

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

2022

For calendar year 2022 or other tax year beginning 07/01/22, and ending 06/30/23

Go to www.irs.gov/Form990T for instructions and the latest information.

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

Department of the Treasury
Internal Revenue Service

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A <input type="checkbox"/> Check box if address changed.		Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC.	D Employer identification number 56-1845926
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) <input type="checkbox"/> 529A	Print or Type	Number, street, and room or suite no. If a P.O. box, see instructions. 351 WAGONER DRIVE SUITE 200	E Group exemption number (see instructions)
		City or town, state or province, country, and ZIP or foreign postal code FAYETTEVILLE NC 28303	F <input type="checkbox"/> Check box if an amended return.
		C Book value of all assets at end of year <u>3,703,640</u>	
G 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 <input type="checkbox"/> State college/university	
H Check if filing only to		<input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439	
I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation		<input type="checkbox"/>	
J Enter the number of attached Schedules A (Form 990-T)		<u>1</u>	
K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes," enter the name and identifying number of the parent corporation			

L The books are in care of MARIE LILLY Telephone number 910-867-9700

Part I Total Unrelated Business Taxable Income

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	0
2 Reserved	2	
3 Add lines 1 and 2	3	
4 Charitable contributions (see instructions for limitation rules)	4	
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	
6 Deduction for net operating loss. See instructions	6	0
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	0
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	2	0
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0

For Paperwork Reduction Act Notice, see instructions.

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)
1b Other credits (see instructions)
1c General business credit. Attach Form 3800 (see instructions)
1d Credit for prior year minimum tax (attach Form 8801 or 8827)
1e Total credits. Add lines 1a through 1d
2 Subtract line 1e from Part II, line 7
3 Other amounts due. Check if from: Form 4255 Form 8611 Form 8697 Form 8866
3 Other (attach statement)
4 Total tax. Add lines 2 and 3 (see instructions). Check if includes tax previously deferred under section 1294. Enter tax amount here
5 Current net 965 tax liability paid from Form 965-A, Part II, column (k)
6a Payments: A 2021 overpayment credited to 2022
6b 2022 estimated tax payments. Check if section 643(g) election applies
6c Tax deposited with Form 8868
6d Foreign organizations: Tax paid or withheld at source (see instructions)
6e Backup withholding (see instructions)
6f Credit for small employer health insurance premiums (attach Form 8941)
6g Other credits, adjustments, and payments: Form 2439 Form 4136 Other Total
7 Total payments. Add lines 6a through 6g
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid
11 Enter the amount of line 10 you want: Credited to 2023 estimated tax Refunded

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2022 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
2 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.
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$
4 Enter available pre-2018 NOL carryovers here \$ -52,825. Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.
6a Did the organization change its method of accounting? (see instructions)
b If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here Under penalty 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: Taylor Mobley Date: 05/08/24 Title: TREASURER
Preparer's name: PAMELA W. VILLEGAS, CPA Preparer's signature: Pamela W. Villegas, CPA Date: 05/08/24 Check self-employed if PTIN
Firm's name: COMSTOCK & VILLEGAS, CPAS, PA Firm's address: 2545 RAVENHILL DR STE 106 FAYETTEVILLE, NC 28303 Firm's EIN: Phone no. 910-483-6077

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

**SCHEDULE A
(Form 990-T)**

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

OMB No. 1545-0047

2022

Department of the Treasury
Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information.

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).

A Name of the organization PARTNERSHIP FOR CHILDREN OF	B Employer identification number 56-1845926
C Unrelated business activity code (see instructions) 531120	D Sequence: 1 of 1

E Describe the unrelated trade or business RENTAL OF OFFICE SUITES-FRC

Part I Unrelated Trade or Business Income	(A) Income	(B) Expenses	(C) Net
1a Gross receipts or sales			
b Less returns and allowances c Balance	1c		
2 Cost of goods sold (Part III, line 8)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4a Capital gain net income (attach Sch D (Form 1041 or Form 1120)). See instructions	4a		
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from a partnership or an S corporation (attach statement)	5		
6 Rent income (Part IV)	6		
7 Unrelated debt-financed income (Part V)	7 3,631	4,609	-978
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11		
12 Other income (see instructions; attach statement)	12		
13 Total. Combine lines 3 through 12	13 3,631	4,609	-978

Part II Deductions Not Taken Elsewhere See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income				
1 Compensation of officers, directors, and trustees (Part X)	1			
2 Salaries and wages	2			
3 Repairs and maintenance	3			
4 Bad debts	4			
5 Interest (attach statement). See instructions	5			
6 Taxes and licenses	6			
7 Depreciation (attach Form 4562). See instructions	7 23,544			
8 Less depreciation claimed in Part III and elsewhere on return	8a 23,544	8b		0
9 Depletion	9			
10 Contributions to deferred compensation plans	10			
11 Employee benefit programs	11			
12 Excess exempt expenses (Part VIII)	12			
13 Excess readership costs (Part IX)	13			
14 Other deductions (attach statement)	14			
15 Total deductions. Add lines 1 through 14	15			
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16			-978
17 Deduction for net operating loss. See instructions	17			
18 Unrelated business taxable income. Subtract line 17 from line 16	18			-978

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

Part III Cost of Goods Sold Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1 Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.

A _____
 B _____
 C _____
 D _____

	A	B	C	D
2 Rent received or accrued				
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)				
c Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3 Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)				
4 Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5 Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)				

Part V Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.

A 351 WAGONER DRIVE FAYETTEVILLE NC 28303
 B _____
 C _____
 D _____

	A	B	C	D
2 Gross income from or allocable to debt-financed property	165,029			
3 Deductions directly connected with or allocable to debt-financed property	SEE STATEMENT 2			
a Straight line depreciation (attach statement)	23,544			
b Other deductions (attach statement)	185,936			
c Total deductions (add lines 3a and 3b, columns A through D)	209,480			
4 Amount of average acquisition debt on or allocable to debt-financed property (attach statement)	SEE STATEMENT 3			
5 Average adjusted basis of or allocable to debt-financed property (attach statement)	SEE STATEMENT 4			
6 Divide line 4 by line 5	2.20%	%	%	%
7 Gross income reportable. Multiply line 2 by line 6	3,631			
8 Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	3,631			
9 Allocable deductions. Multiply line 3c by line 6	4,609			
10 Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	4,609			
11 Total dividends-received deductions included in line 10				

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organization			
		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 Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)

Totals

Part VII 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 statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add columns 3 and 4)
(1)				
(2)				
(3)				
(4)				
		Add amounts in column 2. Enter here and on Part I, line 9, column (A)		Add amounts in column 5. Enter here and on Part I, line 9, column (B)

Totals

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity: _____	
2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2
3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3
4 Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4
5 Gross income from activity that is not unrelated business income	5
6 Expenses attributable to income entered on line 5	6
7 Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7

RENTAL OF OFFICE SUITES-FRC**Statement 1 - Schedule A (990T), Part V, Line 3b - Other Debt Finance Expense Information**

<u>Description</u>	<u>Deduction</u>
OFFICE BLDG-NONEXEMPT USE	\$
INSURANCE	5,872
CLEANING & MAINTENANCE	2,998
SUPPLIES	1,069
REPAIRS	86,975
UTILITIES	21,399
TELEPHONE	892
CONTRACT & TEMPORARY SERVICES	21,132
PERSONNEL COSTS	33,897
BUILDING IMPROVEMENTS/REPAIRS	6,330
BANK CHARGES	3,187
FURNITURE/FIXTURES	2,185
TOTAL	\$ <u>185,936</u>

Federal Statements

RENTAL OF OFFICE SUITES-FRC

Statement 2 - Schedule A (Form 990-T), Page 2, Part V, Line 3a - StraightlineDepreciation Detail

Column	DescProp	Cost Basis	Date Acquired	Useful Life	Years Remaining	Current Year Depreciation	Allowable Depreciation
A	BUILDING	\$ 630,000	1999	40	17	\$ 15,750	\$ 15,750
A	LAND	70,000	1999	0	0		
A	BUILDING	810,000	2000	40	18	20,250	20,250
A	LAND	90,000	2000	0	0		
A	BUILDING	1,674,516	2005	40	23	41,862	41,862
A	LAND	185,000	2005	0	0		
A	RENOVATIONS - OMNI II	24,900	2006	40	24	622	622
A	BLDG. IMP. - SECURITY SYSTEM	25,535	2007	40	25	638	638
A	BLDG. IMP. - TELEPHONE SYSTEM	82,594	2007	40	25	2,065	2,065
A	LESS: DEPRECIATION ALLOCABLE TO PFC			0	0	-51,960	-51,960
A	LESS: DEPRECIATION ALLOCABLE TO EXE			0	0	-5,683	-5,683
	TOTAL	\$ 3,592,545				\$ 23,544	\$ 23,544

RENTAL OF OFFICE SUITES-FRC**Statement 3 - Schedule A (990T), Part V, Line 4 - Amount of Average Acquisition debt on or Allocable to Debt Financed Property**

<u>Description</u>	<u>Deduction</u>
OFFICE BLDG-NONEXEMPT USE	
SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH	522,777
DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	<u>12</u>
AVERAGE ACQUISITION DEBT	<u>43,565</u>
UNRELATED ACTIVITY PERCENTAGE	<u>29</u>
ALLOCATED ACQUISITION DEBT	<u>12,634</u>

RENTAL OF OFFICE SUITES-FRC**Statement 4 - Schedule A (990T), Part V, Line 5 - Average Adjusted Basis of or Allocable to Debt Financed Property**

<u>Description</u>	<u>Deduction</u>
OFFICE BLDG-NONEXEMPT USE	
ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD	2,019,842
ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	<u>1,938,653</u>
TOTAL	3,958,495
DIVIDED BY 2	<u>2</u>
AVERAGE ADJUSTED BASIS	<u>1,979,248</u>
UNRELATED ACTIVITY PERCENTAGE	<u>29</u>
ALLOCATED ADJUSTED BASIS	<u>573,982</u>

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury Internal Revenue Service

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return PARTNERSHIP FOR CHILDREN OF CUMBERLAND COUNTY, INC. Identifying number 56-1845926

Business or activity to which this form relates OFFICE BLDG-NONEXEMPT USE

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

Table with 5 columns: Line number, Description, and Amount. Includes lines 1-13 for Section 179 election details.

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

Table with 3 columns: Line number, Description, and Amount. Includes lines 14-16 for special depreciation allowance.

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

Table with 3 columns: Line number, Description, and Amount. Includes lines 17-18 for MACRS deductions.

Section B—Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

Table with 7 columns: Classification, Month and year placed in service, Basis for depreciation, Recovery period, Convention, Method, and Depreciation deduction. Includes rows 19a-i for various property types.

Section C—Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

Table with 7 columns: Line number, Class life, and Amount. Includes rows 20a-d for alternative depreciation system.

Part IV Summary (See instructions.)

Table with 3 columns: Line number, Description, and Amount. Includes lines 21-23 for summary totals.

For Paperwork Reduction Act Notice, see separate instructions.

Year Ending: June 30, 2023

PARTNERSHIP FOR CHILDREN OF
351 WAGONER DRIVE SUITE 200
FAYETTEVILLE, NC 28303

NOL Carryback Election

Under IRC Section 172(b)(3), the taxpayer elects to relinquish the entire five year carryback period with respect to any net operating loss incurred during the current tax year.