\*\* PUBLIC DISCLOSURE COPY \*\* **Exempt Organization Business Income Tax Return** Form 990-T OMB No. 1545-0047 (and proxy tax under section 6033(e)) , and ending AUG 31, 2022 For calendar year 2021 or other tax year beginning  $\ SEP \ 1$ ,  $\ 2021$ ► Go to www.irs.gov/Form990T for instructions and the latest information. Department of the Treasury 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). Internal Revenue Service Check box if name changed and see instructions.) Check hox if Name of organization ( address changed. MAKE-A-WISH FOUNDATION OF NORTH TEXAS **B** Exempt under section 75-1889666 Print EGroup exemption number (see instructions) X 501(c)(3 or Number, street, and room or suite no. If a P.O. box, see instructions. Type 220(e) 16803 DALLAS PARKWAY, 100 408(e) 408A 530(a) City or town, state or province, country, and ZIP or foreign postal code ADDISON, TX 75001 529(a) 529A Check box if 14,038,862. C Book value of all assets at end of year .... an amended return. Check organization type 

X 501(c) corporation 401(a) trust 501(c) trust Other trust Check if filing only to Claim credit from Form 8941 Claim a refund shown on Form 2439 Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation Enter the number of attached Schedules A (Form 990-T) X No During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes If "Yes," enter the name and identifying number of the parent corporation. The books are in care of BELINDA MARSHALL 214-496-9474 Telephone number ▶ Total Unrelated Business Taxable Income Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions) 2 Reserved 2 3 Add lines 1 and 2 3 0. 4 Charitable contributions (see instructions for limitation rules) 4 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3 5 5 6 6 Deduction for net operating loss. See instructions Total of unrelated business taxable income before specific deduction and section 199A deduction. 7 7 Subtract line 6 from line 5 1,000. Specific deduction (generally \$1,000, but see instructions for exceptions) 8 8 Trusts. Section 199A deduction. See instructions 9 9 1,000. Total deductions. Add lines 8 and 9 10 10 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, 11 0. 11 **Tax Computation** Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21) 1 0. Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Schedule D (Form 1041) 2 Part I. line 11 from: Tax rate schedule or 3 3 **Proxy tax.** See instructions

4

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Alternative minimum tax (trusts only)

Other tax amounts. See instructions

Tax on noncompliant facility income. See instructions

Total. Add lines 3 through 6 to line 1 or 2, whichever applies

For Paperwork Reduction Act Notice, see instructions.

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Form 990-T (2021)

| Form 99  |             | ,   |  |                         |  |                          | Page 2                  |
|----------|-------------|---|--|-------------------------|--|--------------------------|-------------------------|
| Part     | _           | Tax and Payments  |  | <del></del>             |  |                          |                         |
|          |             |   | rm 1118; trusts attach Form 1116)  |                         |  | -                        |                         |
| b        |             |   |  |                         |  | -                        |                         |
| С.       |             |   | 00 (see instructions)  |                         |  | -                        |                         |
| d        |             |   | Form 8801 or 8827)   |                         |  | + _                      |                         |
| e        |             |   |  |                         |  | 1e                       |                         |
| 2        |             |   | 4055   |                         |  | 2                        | 0.                      |
| 3        | Otner       |   | Form 4255 Form 8611  |                         |  |                          |                         |
| 4        | Tatal       |   | Other (attach statement)ons). Check if includes ta   |                         |  | 3                        |                         |
| 4        |             |   |  | •                       |  | 4                        | 0.                      |
| 5        |             |   | m 965-A or Form 965-B, Part II, colum  |                         |  | 5                        | 0.                      |
|          |             |   | to 2021  |                         |  |                          |                         |
|          |             |   | ection 643(g) election applies   |                         |  | -                        |                         |
| c        |             |   |  |                         |  |                          |                         |
| d        |             |   | ld at source (see instructions)  |                         |  |                          |                         |
| e        |             |   |  |                         |  |                          |                         |
| f        |             |   | e premiums (attach Form 8941)  |                         |  |                          |                         |
| g        |             |   | s: Form 2439   |                         |  |                          |                         |
|          |             | Form 4136   | Other T  | otal ▶ 6g               |  |                          |                         |
| 7        | Total       | payments. Add lines 6a through 6g   | J  |                         |  | 7                        |                         |
| 8        |             |   | Check if Form 2220 is attached   |                         |  | 8                        |                         |
| 9        | Tax d       | ue. If line 7 is smaller than the total   | of lines 4, 5, and 8, enter amount owe   | ed                      | <b>&gt;</b>                            | 9                        |                         |
| 10       | Over        | payment. If line 7 is larger than the t   | otal of lines 4, 5, and 8, enter amount  | t overpaid              | <b>&gt;</b>                            | 10                       |                         |
|          |             | the amount of line 10 you want: Cre   |  |                         |  | 11                       |                         |
| Part     |             |   | ain Activities and Other Info  | •                       | · · · · · · · · · · · · · · · · · · ·  |                          |                         |
| 1        |             | ,   | r, did the organization have an interes  | · ·                     | •                                      |                          | Yes No                  |
|          |             | , ,   | or other) in a foreign country? If "Yes  |                         | •                                      |                          |                         |
|          |             |   | k and Financial Accounts. If "Yes," er   | nter the name of t      | the foreign country                    |                          |                         |
| _        | here        | •   |  |                         |  |                          | - X                     |
|          |             | _   | eceive a distribution from, or was it the  | -                       |  |                          | x                       |
|          |             |   | le committe d'annual de la Cla   |                         |  |                          | ^                       |
| •        |             | s," see instructions for other forms t  | ne organization may have to file.<br>eceived or accrued during the tax yea                               | nr.                     | <b>&gt;</b> \$                         |                          |                         |
| 3<br>4   |             |   | nere > \$ D  |                         |  | rnyovor                  |                         |
| 4        |             |   | t reduce the NOL carryover shown he  |                         |  |                          |                         |
| 5        |             | ` '   | e Business Activity Code and post-20   |                         | •                                      | t i, iii ie 4.           |                         |
| •        |             |   | aimed on any Schedule A, Part II, line   |                         |  |                          |                         |
|          | ti io ai    |   | Activity Code  | 1                       | ole post-2017 NOL o                    |                          | _                       |
|          |             |   | 332000   | \$                      | 510 poot 2017 1102 t                   | 37,881.                  | _                       |
|          |             |   |  | \$                      |  | ,                        | _                       |
| 6a       | Did th      | ne organization change its method o   | f accounting? (see instructions)   | 1 4                     |  |                          | х                       |
|          |             |   | bed the change on Form 990, 990-EZ   |                         |  |                          |                         |
|          |             | in in Part V  |  |                         |  |                          |                         |
| Part '   | <b>&gt;</b> | Supplemental Information  |  |                         |  |                          |                         |
| Provide  | the ex      | xplanation required by Part IV, line 6  | b. Also, provide any other additional i  | information. See        | instructions.                          |                          |                         |
|          |             |   | *  |                         |  |                          |                         |
|          |             |   |  |                         |  |                          |                         |
| Ci       | Ur          | nder penalties of perjury, I declare that I have exa<br>prect, and complete. Declaration of preparer (oth | mined this return, including accompanying schedu<br>er than taxpayer) is based on all information of whi | iles and statements, an | d to the best of my knowle<br>owledge. | edge and belief, it is t | rue,                    |
| Sign     |             |   | 7/17/2023  |                         |  | lay the IRS discuss t    | his return with         |
| Here     |             | Belinda Marshall  | CFO  |                         | th                                     | ne preparer shown be     | elow (see               |
|          |             | Signature of officer<br>20A63052482C47C   | Date Title   |                         | in                                     | nstructions)? X          | Yes No                  |
|          |             | Print/Type preparer's name  | Preparer's signature   | Date                    |  | if PTIN                  |                         |
| Paid     |             |   |  |                         | self- employed                         | 1                        | 24                      |
| Prepa    | rer         | MELISSA HANGSLEBEN  | MELISSA HANGSLEBEN   | 07/17/23                |  | P0208703                 |                         |
| Use C    | nly         | Firm's name CLIFTONLARSONA  |  |                         | Firm's EIN ►                           | 41-074                   | b / 4 9                 |
|          |             |   | MAS ROAD, SUITE 2300   |                         | Diam'r (                               | 602) 266 22              | 4.0                     |
|          |             | Firm's address PHOENIX, AZ  | 0 D U I Z  |                         | Phone no. (                            | 602) 266-22              |                         |
| 123711 0 | 1-31-22     |   |  |                         |  | Form                     | 990-T <sub>(2021)</sub> |

# SCHEDULE A (Form 990-T)

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

0004

2021

OMB No. 1545-0047

LUL I

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990T for instructions and the latest information.

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

Name of the organization
MAKE-A-WISH FOUNDATION OF NORTH TEXAS

Unrelated business activity code (see instructions)

| Description | Foundation | Fo

| Pa  | rt I Unrelated Trade or Business Income                      | IANCED | (A) Income          | (B) Expenses      | (C) Net                                 |
|-----|--|--------|---------------------|-------------------|---|
| 1 a | Gross receipts or sales                                      |        |                     |                   |   |
| b   |  | 1c     |                     |                   |   |
| 2   | Cost of goods sold (Part III, line 8)                        | 2      |                     |                   |   |
| 3   | Gross profit. Subtract line 2 from line 1c                   | 3      |                     |                   |   |
| 4 a |  |        |                     |                   |   |
|     | 1120)). See instructions                                     | 4a     |                     |                   |   |
| b   |  | 4b     | -1,436,198.         |                   | -1,436,198.                             |
| С   | Capital loss deduction for trusts                            | 4c     |                     |                   |   |
| 5   | Income (loss) from a partnership or an S corporation (attach | 5      | -47.                |                   | -47.                                    |
| 6   | statement) STATEMENT 1 Rent income (Part IV)                 | 6      |                     |                   |   |
| 7   | Unrelated debt-financed income (Part V)                      | 7      | 7,479.              | 85,498.           | -78,019.                                |
| 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     | -1,428,766.         | 85,498.           | -1,514,264.                             |
| D : | J. D. Doductions Not Taken Floorwhore Contract               | f-:    | limitations on deal | etiana Daduationa | marrat la a                             |

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  |      |             | з  |             |
| 4  | Bad debts  |      |             | 4  |             |
| 5  | Interest (attach statement). See instructions  |      |             | 5  |             |
| 6  | Taxes and licenses   |      |             | 6  |             |
| 7  | Depreciation (attach Form 4562). See instructions                                    |      |             |    |             |
| 8  | Less depreciation claimed in Part III and elsewhere on return                        | 8a   |             | 8b |             |
| 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 | 0.          |
| 16 | Unrelated business income before net operating loss deduction. Subtract line 15 from | Part | I, line 13, |    |             |
|    | column (C)   |      |             | 16 | -1,514,264. |
| 17 | Deduction for net operating loss. See instructions                                   |      |             | 17 | 0.          |
| 18 | Unrelated business taxable income. Subtract line 17 from line 16                     |      |             | 18 | -1,514,264. |
|    |  |      |             |    |             |

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2021

|                | ule A (Form 990-T) 2021  |                           |                          |               | Page 2  |
|----------------|--|---------------------------|--------------------------|---------------|---------|
| <u>Part</u>    | III Cost of Goods Sold Enter method  | od of inventory valuation | <u>n</u> ▶               |               |         |
| 1              | Inventory at beginning of year   |                           |                          |               |         |
| 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 he  | ere and in Part I, line 2 |                          | 8             |         |
| 9              | Do the rules of section 263A (with respect to property pr  |                           |                          |               | Yes No  |
| Part           | IV Rent Income (From Real Property and   | Personal Property         | Leased with Re           | eal Property) |         |
| 1              | Description of property (property street address, city, sta  | ite, ZIP code). Check if  | a dual-use. See instru   | uctions.      |         |
|                | A  |                           |                          |               |         |
|                | В 🔲  |                           |                          |               |         |
|                | c 🗌  |                           |                          |               |         |
|                | D  |                           |                          |               |         |
|                |  | Α                         | В                        | С             | D       |
| 2              | Rent received or accrued   |                           |                          |               |         |
| а              | 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)   |                           |                          |               |         |
| С              | Total rents received or accrued by property.   |                           |                          |               |         |
|                | Add lines 2a and 2b, columns A through D   |                           |                          |               |         |
| 5<br>Part<br>1 | Total deductions. Add line 4 columns A through D. Ente  V Unrelated Debt-Financed Income (see  Description of debt-financed property (street address, cit  A 16803 DALLAS PARKWAY  B | e instructions)           |                          |               | 0.      |
|                | С  |                           |                          |               |         |
|                | D  |                           |                          |               |         |
|                |  | Α                         | В                        | С             | D       |
| 2              | Gross income from or allocable to debt-financed  |                           |                          |               |         |
|                | property   | 10,246.                   |                          |               |         |
| 3              | Deductions directly connected with or allocable  |                           |                          |               |         |
|                | to debt-financed property  |                           |                          |               |         |
| а              | Straight line depreciation (attach statement)  | 0.                        |                          |               |         |
| b              | Other deductions (attach statement) STMT 5   | 117,136.                  |                          |               |         |
| С              | Total deductions (add lines 3a and 3b,   |                           |                          |               |         |
|                | columns A through D)   | 117,136.                  |                          |               |         |
| 4              | Amount of average acquisition debt on or allocable   |                           |                          |               |         |
|                | to debt-financed property (attach statement) STMT 3  | 6,838,130.                |                          |               |         |
| 5              | Average adjusted basis of or allocable to debt-  |                           |                          |               |         |
|                | financed property (attach statement) STMT 4  | 9,368,467.                |                          |               |         |
| 6              | Divide line 4 by line 5  | 72.99%                    | %                        | %             | %       |
| 7              | Gross income reportable. Multiply line 2 by line 6   | 7,479.                    |                          |               |         |
| 8              | <b>Total gross income</b> (add line 7, columns A through D). I   | Enter here and on Part    | I, line 7, column (A)    | <b>&gt;</b>   | 7,479.  |
|                | 2 , , , , , , , , ,  |                           |                          |               |         |
| 9              | Allocable deductions. Multiply line 3c by line 6   | 85,498.                   |                          |               |         |
| 10             | Total allocable deductions. Add line 9, columns A throi  | ugh D. Enter here and o   | on Part I, line 7, colum | nn (B)        | 85,498. |
| 11             | Total dividends-received deductions included in line 1   | 0                         |                          | <b>&gt;</b>   | 0.      |

09320717 131839 A202474

Schedule A (Form 990-T) 2021 Page 3 Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions) **Exempt Controlled Organizations** 1. Name of controlled 2. Employer 3. Net unrelated 4. Total of specified 5. Part of column 4 6. Deductions directly that is included in the identification organization income (loss) payments made connected with controlling organizanumber (see instructions) income in column 5 tion's gross income (1) (2)(3)(4)Nonexempt Controlled Organizations 7. Taxable Income 8. Net unrelated 9. Total of specified 10. Part of column 9 11. Deductions directly that is included in the payments made connected with income (loss) controlling organization's (see instructions) income in column 10 gross income (1) (2)(3)(4)Add columns 5 and 10. Add columns 6 and 11. Enter here and on Part I, Enter here and on Part I, line 8, column (A) 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 Total deductions 2. Amount of 3. Deductions 4. Set-asides and set-asides income directly connected (attach statement) (add cols 3 and 4) (attach statement) (1) (2)(3)(4)Add amounts in Add amounts in column 2. Enter column 5. Enter here and on Part I, here and on Part I, line 9, column (A) line 9, column (B) Totals Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions) Description of exploited activity: 2 Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A) 3 Expenses directly connected with production of unrelated business income. Enter here and on Part I, 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 Expenses attributable to income entered on line 5 6 6

Schedule A (Form 990-T) 2021

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

|   |                                |                     |                 | Page               |
|---|--------------------------------|---------------------|-----------------|--------------------|
| Part IX Advertising Income  |                                |                     |                 |                    |
| 1 Name(s) of periodical(s). Check box if reporting                  | g two or more periodicals on a | consolidated bas    | S.              |                    |
| A   |                                |                     |                 |                    |
| В   |                                |                     |                 |                    |
| c 🔛   |                                |                     |                 |                    |
| D 🔛   |                                |                     |                 |                    |
| Enter amounts for each periodical listed above in the o             | corresponding column.          |                     |                 |                    |
|   | A                              | В                   | С               | D                  |
| 2 Gross advertising income  |                                |                     |                 |                    |
| Add columns A through D. Enter here and on                          | Part I, line 11, column (A)    |                     | <b>&gt;</b>     | 0.                 |
| a   |                                |                     |                 |                    |
| 3 Direct advertising costs by periodical                            |                                |                     |                 |                    |
| a Add columns A through D. Enter here and on                        | Part I, line 11, column (B)    |                     | <b>&gt;</b>     | 0                  |
| <u>-</u>  |                                |                     |                 |                    |
| 4 Advertising gain (loss). Subtract line 3 from lin                 | ne l                           |                     |                 |                    |
| 2. For any column in line 4 showing a gain,                         |                                |                     |                 |                    |
| complete lines 5 through 8. For any column in                       | 1                              |                     |                 |                    |
| line 4 showing a loss or zero, do not complete                      |                                |                     |                 |                    |
| lines 5 through 7, and enter zero on line 8                         |                                |                     |                 |                    |
| 5 Readership costs  |                                |                     |                 |                    |
| 6 Circulation income  |                                |                     |                 |                    |
| <ul><li>7 Excess readership costs. If line 6 is less than</li></ul> |                                |                     |                 |                    |
| line 5, subtract line 6 from line 5. If line 5 is les               | ee                             |                     |                 |                    |
| than line 6, enter zero   |                                |                     |                 |                    |
| 8 Excess readership costs allowed as a                              |                                |                     |                 |                    |
| deduction. For each column showing a gain of                        | nn l                           |                     |                 |                    |
| line 4, enter the lesser of line 4 or line 7                        |                                |                     |                 |                    |
|   |                                | tal ar zara bara ar | nd on           | <u> </u>           |
| Add line 8, columns A through D. Enter the graph Part II, line 13   |                                | tai or zero nere ai | IU OII          | 0                  |
| Part X Compensation of Officers, Dire                               | ectors, and Trustees (         | ee instructions)    |                 |                    |
| · · · · · · · · · · · · · · · · · · ·                               |                                | oo modadaanay       | 3. Percentage   | 4. Compensation    |
| 1. Name   | <b>2.</b> Title                |                     | of time devoted | attributable to    |
| ······································                              | <b>2.</b> 1100                 |                     | to business     | unrelated business |
| (1)   |                                |                     | %               | aniolated basiness |
| (2)   |                                |                     | %               |                    |
| (3)   |                                |                     | %               |                    |
|   |                                |                     | %               |                    |
|   |                                |                     |                 |                    |
| <u> </u>  |                                |                     | 70              |                    |
|   |                                |                     | 70              | 0                  |
| Total. Enter here and on Part II, line 1                            |                                |                     |                 | 0                  |
|   | e instructions)                |                     | 70              | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | 70              | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | 70              | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | 70              | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     |                 | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | , 70<br>        | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | <b>&gt;</b>     | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | 70              | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | 70              | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | , 70<br>        | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | , 70<br>        | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | , 70<br>        | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | , 70<br>        | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | <b>▶</b>        | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | <b>▶</b>        | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     | <b>&gt;</b>     | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     |                 | 0                  |
| Total. Enter here and on Part II, line 1                            | e instructions)                |                     |                 | 0                  |

## MAKE-A-WISH FOUNDATION OF NORTH TEXAS

| FORM 990-T (A) INC                           | OME (LOSS) FROM PA            | RTNERSHIPS        | STATEMENT 1             |
|--|-------------------------------|-------------------|-------------------------|
| DESCRIPTION                                  |                               |                   | NET INCOME<br>OR (LOSS) |
| FLORIDA CAPITAL REAL ESTATE<br>ESTATE INCOME |                               |                   |                         |
| TOTAL INCLUDED ON SCHEDULE                   | -47                           |                   |                         |
| 990-T SCH A POST-2                           | 017 NET OPERATING             | LOSS DEDUCTION    | STATEMENT 2             |
| TAX YEAR LOSS SUSTAINED                      | LOSS<br>PREVIOUSLY<br>APPLIED | LOSS<br>REMAINING | AVAILABLE<br>THIS YEAR  |
| 08/31/19 85,731.                             | 47,850.                       | 37,881.           | 37,881.                 |
| ,  |                               | ,                 | 37,001.                 |

| FORM 990-T (A) PART V - UNRELATED DEBT-FINANCED INCOMAVERAGE ACQUISITION DEBT  | ME                 | STATEMENT 3   |
|--|--------------------|---|
|  | CTIVITY<br>NUMBER  | AMOUNT OF<br>OUTSTANDING<br>DEBT  |
| BEGINNING FIRST MONTH BEGINNING SECOND MONTH BEGINNING THIRD MONTH BEGINNING FOURTH MONTH BEGINNING SIXTH MONTH BEGINNING SEVENTH MONTH BEGINNING EIGHTH MONTH BEGINNING NINTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH BEGINNING TENTH MONTH   |                    | 7,575,709. 7,553,575. 7,530,469. 7,508,170. 7,484,176. 7,461,072. 7,437,888. 7,412,145. 7,388,793. 7,364,539. 7,341,023. 0. |
| TOTAL OF ALL MONTHS<br>NUMBER OF MONTHS IN YEAR  |                    | 82,057,559.<br>12   |
| AVERAGE ACQUISITION DEBT   |                    | 6,838,130.  |
| TOTALS TO FORM 990-T, SCHEDULE A, PART V, LINE 4  FORM 990-T (A) PART V - UNRELATED DEBT-FINANCED INCOLAVERAGE ADJUSTED BASIS  DESCRIPTION OF DEBT-FINANCED PROPERTY   | ME ACTIVITY NUMBER | STATEMENT 4   |
|  |                    | - AMOLINE   |
| 16803 DALLAS PARKWAY  AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON FIRST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD ON LAST DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY HELD DAY OF YOUR AVERAGE ADJUSTED BASIS OF PROPERTY BASIS OF |                    | 9,460,330.<br>9,276,604.  |
| AVERAGE ADJUSTED BASIS OF PROPERTY FOR THE YEAR  |                    | 9,368,467.  |
| TOTAL TO FORM 990-T, SCHEDULE A, PART V, LINE 5  |                    |   |

## MAKE-A-WISH FOUNDATION OF NORTH TEXAS

| FORM 990-T (A)           | PART V - OTHER     | DEDUCTIONS |                      | STATEMENT 5        |
|--------------------------|--------------------|------------|----------------------|--------------------|
| DESCRIPTION              | ACTIVITY<br>NUMBER | AMOUNT     | PERCENT<br>ALLOCABLE | ALLOCABLE<br>TOTAL |
| PROFESSIONAL FEES        |                    | 31,976.    |                      |                    |
| COMMUNICATIONS           |                    | 307.       |                      |                    |
| POSTAGE AND DELIVERY     |                    | 7.         |                      |                    |
| PRINTING, DESIGN, VIDEO, | •                  |            |                      |                    |
| PHOTOGRAPHY              |                    | 74.        |                      |                    |
| TRAVEL                   |                    | 44.        |                      |                    |
| DEPRECIATION             |                    | 10,476.    |                      |                    |
| MISCELLANEOUS            |                    | 20,106.    |                      |                    |
| SALARIES                 |                    | 36,270.    |                      |                    |
| UTILITIES                |                    | 17,876.    |                      |                    |
| - SUBI                   | TOTAL - 1          | 117,136.   | 1.00                 | 117,136.           |
| TOTAL OF FORM 990-T, SCH | HEDULE A, PART V,  | LINE 3(B)  |                      | 117,136.           |

Form **4797** 

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts Under Sections 179 and 280F(b)(2))

► Attach to your tax return.

▶ Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Department of the Treasury Internal Revenue Service Name(s) shown on return Identifying number MAKE-A-WISH FOUNDATION OF NORTH TEXAS 75-1889666 1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (b) Date acquired (a) Description (C) Date sold (d) Gross sales 2 basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) acquisition expense of sale 16803 DALLAS PARKWAY 06/14/18 07/18/22 8,000,000 9,436,198. -1,436,198. Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 -1,436,198. Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 1,436,198, 11 Loss, if any, from line 7 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 -1,436,198. 17 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2021)

(Form 1040), Part I, line 4

18b

Form 4797 (2021) MAKE-A-WISH FOUNDATION OF NORTH TEXAS 75-1889666 Page 2 Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions) (b) Date acquired (c) Date sold 19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: (mo., day, yr.) (mo., day, yr.) Δ В С D These columns relate to the properties on Property A Property B **Property C** Property D lines 19A through 19D. 20 Gross sales price (**Note:** See line 1a before completing.) 20 21 21 Cost or other basis plus expense of sale 22 Depreciation (or depletion) allowed or allowable 22 Adjusted basis. Subtract line 22 from line 21 23 23 Total gain. Subtract line 23 from line 20 24 If section 1245 property: a Depreciation allowed or allowable from line 22 25a 25b **b** Enter the **smaller** of line 24 or 25a If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291. a Additional depreciation after 1975. See instructions 26a **b** Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions 26b c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e 260 d Additional depreciation after 1969 and before 1976 26d e Enter the smaller of line 26c or 26d 26e f Section 291 amount (corporations only) 26f g Add lines 26b, 26e, and 26f 26g If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership. a Soil, water, and land clearing expenses 27a **b** Line 27a multiplied by applicable percentage ..... 27b c Enter the smaller of line 24 or 27b 27c If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, 28a mining exploration costs, and depletion. See instructions b Enter the smaller of line 24 or 28a 28b If section 1255 property: a Applicable percentage of payments excluded 29a from income under section 126. See instructions **b** Enter the **smaller** of line 24 or 29a. See instructions 29b Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30. Total gains for all properties. Add property columns A through D, line 24 30 30 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 31 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6 Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions) (a) Section (b) Section 280F(b)(2) 179 Section 179 expense deduction or depreciation allowable in prior years 33 33 Recomputed depreciation. See instructions 34

Form 4797 (2021) 118012 12-17-21

Recapture amount. Subtract line 34 from line 33. See the instructions for where to report

35

Form **4797** 

Department of the Treasury Internal Revenue Service

Name(s) shown on return

Sales of Business Property

(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))

► Attach to your tax return.

► Go to www.irs.gov/Form4797 for instructions and the latest information.

OMB No. 1545-0184

Identifying number

Attachment 07

MAKE-A-WISH FOUNDATION OF NORTH TEXAS 75-1889666 1a Enter the gross proceeds from sales or exchanges reported to you for 2021 on Form(s) 1099-B or 1099-S (or substitute statement) that you are including on line 2, 10, or 20 1a b Enter the total amount of gain that you are including on lines 2, 10, and 24 due to the partial dispositions of 1b c Enter the total amount of loss that you are including on lines 2 and 10 due to the partial dispositions of MACRS Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions) (f) Cost or other (e) Depreciation (g) Gain or (loss) (b) Date acquired (a) Description (C) Date sold (d) Gross sales 2 basis, plus allowed or Subtract (f) from the of property (mo., day, yr.) (mo., day, yr.) price allowable since improvements and sum of (d) and (e) acquisition expense of sale 16803 DALLAS PARKWAY 06/14/18 07/18/22 8,000,000 9,436,198. -1,436,198. Gain, if any, from Form 4684, line 39 3 Section 1231 gain from installment sales from Form 6252, line 26 or 37 4 Section 1231 gain or (loss) from like-kind exchanges from Form 8824 5 5 Gain, if any, from line 32, from other than casualty or theft 6 6 -1,436,198. Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows 7 Partnerships and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120-S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you didn't have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below. 8 Nonrecaptured net section 1231 losses from prior years. See instructions Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return. See instructions Part II Ordinary Gains and Losses (see instructions) Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less): 1,436,198, 11 Loss, if any, from line 7 Gain, if any, from line 7 or amount from line 8, if applicable 12 12 Gain, if any, from line 31 13 Net gain or (loss) from Form 4684, lines 31 and 38a 14 14 Ordinary gain from installment sales from Form 6252, line 25 or 36 15 Ordinary gain or (loss) from like-kind exchanges from Form 8824 16 16 -1,436,198. 17 Combine lines 10 through 16 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines 18 a and b below. For individual returns, complete lines a and b below. If the loss on line 11 includes a loss from Form 4684, line 35, column (b)(ii), enter that part of the loss here. Enter the loss from income-producing property on Schedule A (Form 1040), line 16. (Do not include any loss on property used as an employee.) Identify as from "Form 4797, line 18a." See instructions 18a b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Schedule 1 (Form 1040), Part I, line 4 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 4797 (2021)

Form 4797 (2021) MAKE-A-WISH FOUNDATION OF NORTH TEXAS 75-1889666 Page 2 Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions) (b) Date acquired (c) Date sold 19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property: (mo., day, yr.) (mo., day, yr.) Δ В С D These columns relate to the properties on Property A Property B **Property C** Property D lines 19A through 19D. 20 Gross sales price (**Note:** See line 1a before completing.) 20 21 21 Cost or other basis plus expense of sale 22 Depreciation (or depletion) allowed or allowable 22 Adjusted basis. Subtract line 22 from line 21 23 23 Total gain. Subtract line 23 from line 20 24 If section 1245 property: a Depreciation allowed or allowable from line 22 25a 25b **b** Enter the **smaller** of line 24 or 25a If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291. a Additional depreciation after 1975. See instructions 26a **b** Applicable percentage multiplied by the smaller of line 24 or line 26a. See instructions 26b c Subtract line 26a from line 24. If residential rental property or line 24 isn't more than line 26a, skip lines 26d and 26e 260 d Additional depreciation after 1969 and before 1976 26d e Enter the smaller of line 26c or 26d 26e f Section 291 amount (corporations only) 26f g Add lines 26b, 26e, and 26f 26g If section 1252 property: Skip this section if you didn't dispose of farmland or if this form is being completed for a partnership. a Soil, water, and land clearing expenses 27a **b** Line 27a multiplied by applicable percentage ..... 27b c Enter the smaller of line 24 or 27b 27c If section 1254 property: a Intangible drilling and development costs, expenditures for development of mines and other natural deposits, 28a mining exploration costs, and depletion. See instructions b Enter the smaller of line 24 or 28a 28b If section 1255 property: a Applicable percentage of payments excluded 29a from income under section 126. See instructions **b** Enter the **smaller** of line 24 or 29a. See instructions 29b Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30. Total gains for all properties. Add property columns A through D, line 24 30 30 Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13 31 Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 33. Enter the portion from other than casualty or theft on Form 4797, line 6 Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions) (a) Section (b) Section 280F(b)(2) 179 Section 179 expense deduction or depreciation allowable in prior years 33 33 Recomputed depreciation. See instructions 34

35 Recapture amount. Subtract line 34 from line 33. See the instructions for where to report Form 4797 (2021) 118012 12-17-21

Electronic Filing PDF Attachment

#### Facts

| \$<br>2,191,500 |
|-----------------|
| _,              |
| 6,328,200       |
| \$<br>8,519,700 |
| \$<br>1,000,000 |
| \$<br>386,433   |
| \$<br>9,906,133 |
|                 |
| \$<br>8,000,000 |
| \$              |

| Highest Level of Debt During FY22 | \$<br>7,575,709   |
|-----------------------------------|-------------------|
| Total Depreciation                | 1,037,181         |
| Accumulated Depreciation          | 771,935           |
| Loss on Sale                      | \$<br>(1,706,513) |

69.1% of the building was NOT used by MAW

#### **Calculation Option 1**

| Average Adjusted Basis   |           | 9,001,575 |
|--------------------------|-----------|-----------|
| Ending Adjusted Basis    |           | 8,868,952 |
| Total Depreciation       | 1,037,181 |           |
| Purchase Price           | 9,906,133 |           |
| Beginning Adjusted Basis |           | 9,134,198 |
| Accumulated Depreciation | 771,935   |           |
| Purchase Price           | 9,906,133 |           |

| Highest Level of Debt  | 7,575,709   |             |
|------------------------|-------------|-------------|
| Average Adjusted Basis | 9,001,575   |             |
| Loss on Sale           | (1,706,513) |             |
| Total Taxable Loss     | S           | (1,436,198) |