

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2020 calendar year, or tax year beginning _____, **and ending** _____

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization: **SoulMedic Media Group, Inc.**
 Doing business as: **RemedyLIVE**
 Number and street (or P.O. box if mail is not delivered to street address): **6429 Oakbrook Parkway** Room/suite: _____
 City or town, state or province, country, and ZIP or foreign postal code: **Fort Wayne IN 46825**

D Employer identification number: **27-2417633**

E Telephone number: **260-422-1958**

F Name and address of principal officer:
Clinton Faupel
6429 Oakbrook Parkway
Fort Wayne IN 46825

G Gross receipts \$: **1,249,389**

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ **www.remedylive.com**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **2010** **M** State of legal domicile: **IN**

H(c) Group exemption number ▶

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: RemedyLIVE engages people in meaningful conversations through technology as a next step toward Christ.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	12
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	12
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	40
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	6,075
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	3,518	
Revenue	8 Contributions and grants (Part VIII, line 1h)	850,291	1,216,088
	9 Program service revenue (Part VIII, line 2g)		0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,000	-905
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	27,664	11,305
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	884,955	1,226,488
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	467,903	423,860
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 82,433		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	345,287	223,190
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	813,190	647,050	
19 Revenue less expenses. Subtract line 18 from line 12	71,765	579,438	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 1,006,969	End of Year 1,585,559
	21 Total liabilities (Part X, line 26)	24,057	23,209
	22 Net assets or fund balances. Subtract line 21 from line 20	982,912	1,562,350

Part II Signature Block

Under penalties 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 officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: **Clinton Faupel** Date: _____
 Type or print name and title: **Executive Director**

Paid Preparer Use Only

Print/Type preparer's name: **Brian L. Hamil, MBA, CPA** Preparer's signature: _____ Date: **06/16/21** Check if self-employed PTIN: **P00200692**

Firm's name: **Hamil, Lehman & England, PC** Firm's EIN: **35-2083429**

Firm's address: **6404 Constitution Drive Fort Wayne, IN 46804** Phone no.: **260-434-1852**

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III

1 Briefly describe the organization's mission:

RemedyLIVE engages people in meaningful conversations through technology as a next step toward Christ.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **440,651** including grants of \$) (Revenue \$ **1,215,258**)

See Schedule O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **440,651**

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

1a	8
1b	0

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 40		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed IN
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input checked="" type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input type="checkbox"/> Other (explain on Schedule O)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20	State the name, address, and telephone number of the person who possesses the organization's books and records ► Danae Lake 6429 Oakbrook Parkway Fort Wayne IN 46825 260-422-1958

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Clinton Faupel	40.00									
Executive Director	0.00			X			77,613	0	23,379	
(2) Tondra Call	1.00									
Board Director	0.00	X					0	0	0	
(3) Mike Clem	1.00									
Board Director	0.00	X					0	0	0	
(4) Marta Doster	1.00									
Board Director	0.00	X					0	0	0	
(5) Rob Hayworth	2.00									
Board Chair	0.00	X		X			0	0	0	
(6) Lisa Isenbarger	2.00									
Treasurer	0.00	X		X			0	0	0	
(7) Alan Jones	1.00									
Board Director	0.00	X					0	0	0	
(8) Derek Laliberte	1.00									
Board Director	0.00	X					0	0	0	
(9) Ross McCampbell	1.00									
Board Director	0.00	X					0	0	0	
(10) Chris Mulkey	1.00									
Board Director	0.00	X					0	0	0	
(11) Laura Murphy	1.00									
Board Director	0.00	X					0	0	0	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) Joel Nichols	1.00									
Board Director	0.00	X						0	0	0
(13) Josh Parrish	2.00									
Vice-Chairman	0.00	X		X				0	0	0
1b Subtotal								77,613		23,379
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								77,613		23,379

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	41,500				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,174,588				
	g Noncash contributions included in lines 1a-1f	1g	\$ 16,272				
	h Total. Add lines 1a-1f			1,216,088			
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		6a					
		b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		7a		470			
		b Less: cost or other basis and sales exps.	7b	1,375			
		c Gain or (loss)	7c	-905			
	d Net gain or (loss)			-905	-905		
	8a Gross income from fundraising events (not including \$ 41,500 of contributions reported on line 1c). See Part IV, line 18	8a		21,495			
b Less: direct expenses		8b	21,526				
c Net income or (loss) from fundraising events				-31			
9a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
	11a Video Production		812900	6,075		6,075	
	b Advertising			5,261	5,261		
	c						
	d All other revenue						
e Total. Add lines 11a-11d			11,336				
12 Total revenue. See instructions			1,226,488	4,356	6,075	0	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	100,992	58,020	28,591	14,381
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	261,138	180,473	43,890	36,775
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	40,339	20,720	11,187	8,432
10 Payroll taxes	21,391	14,569	3,814	3,008
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	6,592		6,592	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	758		758	
12 Advertising and promotion	1,292	859	433	
13 Office expenses				
14 Information technology	37,908	37,451	398	59
15 Royalties				
16 Occupancy	39,396	19,946	11,402	8,048
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	39,210	34,496	2,996	1,718
23 Insurance	7,493	4,439	1,958	1,096
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Get schooled tour	49,654	49,654		
b Supplies	27,821	14,313	7,292	6,216
c Telephone and internet	3,887	2,253	1,152	482
d Fuel	2,409	1,384	682	343
e All other expenses	6,770	2,074	2,821	1,875
25 Total functional expenses. Add lines 1 through 24e	647,050	440,651	123,966	82,433
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	407,843	1	851,532
	2 Savings and temporary cash investments	70,040	2	70,053
	3 Pledges and grants receivable, net	425,750	3	515,000
	4 Accounts receivable, net	1,224	4	2,361
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	9,720	8	7,920
	9 Prepaid expenses and deferred charges	12,497	9	15,329
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 376,942		
	b Less: accumulated depreciation	10b 322,758	10c	54,184
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets	11,792	14	68,180
	15 Other assets. See Part IV, line 11	1,000	15	1,000
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,006,969	16	1,585,559	
Liabilities	17 Accounts payable and accrued expenses	24,057	17	23,209
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	24,057	26	23,209
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	514,052	27	907,100
	28 Net assets with donor restrictions	468,860	28	655,250
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	982,912	32	1,562,350
33 Total liabilities and net assets/fund balances	1,006,969	33	1,585,559	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,226,488
2	Total expenses (must equal Part IX, column (A), line 25)	2	647,050
3	Revenue less expenses. Subtract line 2 from line 1	3	579,438
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	982,912
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,562,350

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Federal Statements

Statement 1 - Form 4562, Line 26 - Property Used More Than 50% in a Qualified Business

Property Type	Date	Business %	Cost	Depr Basis	Period	Method	Deduction	Section 179
Vehicle - Dodge 2001 Van	8/31/10	100.00	\$ 4,302	\$ 4,302	5.0	200DBHY	\$	\$
Van Wrap	5/31/15	100.00	2,635	1,317	5.0	200DBHY	76	
Vehicle Wrap	2/18/16	100.00	2,016	2,016	5.0	S/L-	403	
2015 Ram ProMaster	5/25/16	100.00	28,258	28,258	5.0	S/L-	2,075	
2015 Ram ProMaster ReBuild	6/21/16	100.00	16,685	16,685	5.0	S/L-	2,075	
Total			\$ 53,896	\$ 52,578			\$ 4,629	\$ 0

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization

SoulMedic Media Group, Inc.

Employer identification number

27-2417633

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2019 Schedule A, Part II, line 14 15 %

16a 33 1/3% support test—2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

b 33 1/3% support test—2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶

17a 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

b 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,228,435	1,009,405	1,157,407	850,291	1,216,088	5,461,626
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	6,866	5,775	10,800	31,328	26,756	81,525
3 Gross receipts from activities that are not an unrelated trade or business under section 513	23,843	3,537	12,750			40,130
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	1,259,144	1,018,717	1,180,957	881,619	1,242,844	5,583,281
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	54,438	7,714	15,231	10,529	27,598	115,510
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b	54,438	7,714	15,231	10,529	27,598	115,510
8 Public support. (Subtract line 7c from line 6.)						5,467,771

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6	1,259,144	1,018,717	1,180,957	881,619	1,242,844	5,583,281
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				10,457	3,518	13,975
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	1,259,144	1,018,717	1,180,957	892,076	1,246,362	5,597,256

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	97.69%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	97.95%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations *(continued)*

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described in line 11a above?		
c	A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2	Activities Test. Answer lines 2a and 2b below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations *(continued)*

Section D – Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i>)	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	
9 Distributable amount for 2020 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required— <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020 Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

SoulMedic Media Group, Inc.

Employer identification number

27-2417633

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Question, Held at the End of the Tax Year. Rows include purpose(s) of easements, total number of easements, acreage, and monitoring expenses.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Question, Amount. Rows include whether the organization elected to report art/historical treasures and the amounts reported.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ %
 - b** Permanent endowment ▶ %
 - c** Term endowment ▶ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 3b**
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		376,942	322,758	54,184
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				54,184

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	1,389,951
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	163,463
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	163,463
3	Subtract line 2e from line 1	3	1,226,488
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	1,226,488

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	810,513
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	163,463
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	163,463
3	Subtract line 2e from line 1	3	647,050
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	0
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	647,050

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part X - FIN 48 Footnote

The Organization recognizes the tax benefit from an uncertain tax position only if it is more likely than not that the tax position will be sustained on examination by taxing authorities, based on the technical merits of the positions related to the potential sources of income subject to unrelated business income tax (UBIT). There were no unrecognized tax benefits identified or recorded as liabilities for the years ended December 31, 2020 and 2019.

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

SoulMedic Media Group, Inc.

Employer identification number

27-2417633

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total					▶		

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		Texteractive (event type)	(event type)	None (total number)	(add col. (a) through col. (c))
Revenue	1 Gross receipts	62,995			62,995
	2 Less: Contributions	41,500			41,500
	3 Gross income (line 1 minus line 2)	21,495			21,495
Direct Expenses	4 Cash prizes	180			180
	5 Noncash prizes	1,540			1,540
	6 Rent/facility costs	15,840			15,840
	7 Food and beverages	2,308			2,308
	8 Entertainment	504			504
	9 Other direct expenses	1,154			1,154
	10 Direct expense summary. Add lines 4 through 9 in column (d)				21,526
11 Net income summary. Subtract line 10 from line 3, column (d)				-31	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____
a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a		%
b An outside facility	13b		%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:
Name ▶
Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
c If "Yes," enter name and address of the third party:
Name ▶
Address ▶

16 Gaming manager information:
Name ▶
Gaming manager compensation ▶ \$
Description of services provided ▶
 Director/officer Employee Independent contractor

17 Mandatory distributions:
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

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SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZComplete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020**Open to Public
Inspection**

Employer identification number

SoulMedic Media Group, Inc.**27-2417633****Form 990, Part III, Line 4a - First Accomplishment****RemedyLIVE has the three following programs:**

The RemedyLIVE Chat Center is staffed 24/7 by paid staff, who are trained to provide a compassionate presence, through texting and web-based chats, to people that are looking for help with a personal struggle, often times mental health related. In 2020, 5,659 clients from around the United States had 26,595 conversations with our chat staff, called SoulMedics. The 24/7 chat center has many different types of conversations, but most orbit around the client's mental health.

The Get Schooled Tour, for middle school and high school students, is a one-hour, interactive convocation that combines live entertainment, interactive polling, motivating video, and an educational emphasis on mental health to reveal the network of care that surrounds students. During the 2019-2020 school year, the Get Schooled Tour served 24,548 students at 50 different schools through the state of Indiana. In 2020, the Get Schooled Tour Jr. launched to serve grades 1 through 5 with age appropriate mental health education content.

The WIRED Experience is a one-hour event, that can happen virtually or in person and uses RemedyLIVE's proprietary polling technology to ask the participants questions about their mental health so aggregate results can be presented with important next steps to lower the stigma and move those struggling into the network of care. In 2020, 2,444 adults were served

Name of the organization

Employer identification number

SoulMedic Media Group, Inc.

27-2417633

through 39 WIRED Experience.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The Board of Directors reviews and approves Form 990 before it is filed.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The policy is reviewed annually by all Board members and any conflicts are discussed by the full Board of Directors.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The board of directors reviews and approves the executive director's salary annually. In addition, the compensation committee meets specifically to discuss the executive director's job description and employment contract.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

The organization's governing documents are available on their website, upon

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation

Book / Tax Depreciation Difference \$ 14,587

Filing Instructions

SoulMedic Media Group, Inc.

Exempt Organization Business Tax Return

Taxable Year Ended December 31, 2020

Date Due: November 15, 2021

Remittance: None is required. Your Form 990-T for the tax year ended 12/31/20 shows a total overpayment of \$1,661, which is to be refunded in its entirety.

Signature: Form 8453-EO, Exempt Organization Declaration and Signature for Electronic Filing should be signed and dated by an authorized officer of the organization and returned to:

Hamil, Lehman & England, PC
6404 Constitution Drive
Fort Wayne, IN 46804

Form 8453-EO will be included as an attachment to the electronic file and therefore must be signed and returned before the electronic file is transmitted to the IRS.

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **990-T**

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

OMB No. 1545-0047

2020

Department of the Treasury
Internal Revenue Service

For calendar year 2020 or other tax year beginning _____, and ending _____

▶ 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).

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

<p>A <input type="checkbox"/> Check box if address changed.</p> <p>B Exempt under section</p> <p><input checked="" type="checkbox"/> 501(C) (3)</p> <p><input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e)</p> <p><input type="checkbox"/> 408A <input type="checkbox"/> 530(a)</p> <p><input type="checkbox"/> 529(a) <input type="checkbox"/> 529A</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.)</p> <p>SoulMedic Media Group, Inc.</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions.</p> <p>6429 Oakbrook Parkway</p> <p>City or town, state or province, country, and ZIP or foreign postal code</p> <p>Fort Wayne IN 46825</p>	<p>D Employer identification number</p> <p>27-2417633</p> <p>E Group exemption number (see instructions)</p> <p>F <input type="checkbox"/> Check box if an amended return.</p>
<p>C Book value of all assets at end of year ▶ 1,585,559</p>		<p>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"/> Applicable reinsurance entity</p> <p>H Check if filing only to ▶ <input type="checkbox"/> Claim credit from Form 8941 <input type="checkbox"/> Claim a refund shown on Form 2439</p> <p>I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ▶ <input checked="" type="checkbox"/></p> <p>J Enter the number of attached Schedules A (Form 990-T) ▶ 1</p> <p>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</p>	
<p>L The books are in care of ▶ Danae Lake</p>		<p>Telephone number ▶ 260-422-1958</p>	

Part I Total Unrelated Business Taxable income		
1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	4,518
2 Reserved	2	
3 Add lines 1 and 2	3	4,518
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	4,518
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	4,518
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	3,518

Part II Tax Computation		
1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	739
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	739

For Paperwork Reduction Act Notice, see instructions.

Form **990-T** (2020)

Part III Tax and Payments

1a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b Other credits (see instructions)	1b		
c General business credit. Attach Form 3800 (see instructions)	1c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e Total credits. Add lines 1a through 1d	1e		
2 Subtract line 1e from Part II, line 7	2		739
3 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach statement)	3		
4 Total tax. Add lines 2 and 3 (see instructions). <input type="checkbox"/> Check if includes tax previously deferred under section 1294. Enter tax amount here	4		739
5 2020 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 4	5		
6a Payments: A 2019 overpayment credited to 2020	6a		
b 2020 estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b	2,400	
c Tax deposited with Form 8868	6c		
d Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e Backup withholding (see instructions)	6e		
f Credit for small employer health insurance premiums (attach Form 8941)	6f		
g Other credits, adjustments, and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total	6g		
7 Total payments. Add lines 6a through 6g	7		2,400
8 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	8		
9 Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		0
10 Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		1,661
11 Enter the amount of line 10 you want: Credited to 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		1,661

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

	Yes	No
1 At any time during the 2020 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		X
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.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year		
4a Did the organization change its method of accounting? (see instructions)		X
b If 4a 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 4b. Also, provide any other additional information. See instructions.

Under penalties 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.

Sign Here Signature of officer Date Title **Executive Director**

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

Paid Preparer Use Only

Print/Type preparer's name: **Brian L. Hamil, MBA, CPA** Preparer's signature: _____ Date: **06/16/21** Check if self-employed PTIN: _____

Firm's name: **Hamil, Lehman & England, PC** Firm's EIN: **35-2083429**

Firm's address: **6404 Constitution Drive Fort Wayne, IN 46804** Phone no.: **260-434-1852**

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

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

OMB No. 1545-0047

2020

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).

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

A Name of the organization SoulMedic Media Group, Inc.	B Employer identification number 27-2417633
C Unrelated Business Activity Code (see instructions) ▶ 812900	D Sequence: 1 of 1

E Describe the unrelated trade or business ▶ Unrelated Business Activity

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 partnership and S corporation (attach statement)	5		
6 Rent income (Part IV)	6		
7 Unrelated debt-financed income (Part V)	7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)	8		
9 Investment income of section 501(c)(7), (9), or (17) organization (Part VII)	9		
10 Exploited exempt activity income (Part VIII)	10		
11 Advertising income (Part IX)	11		
12 Other income (see instructions; attach statement) See Stmt 1	12 6,075		6,075
13 Total. Combine lines 3 through 12	13 6,075		6,075

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		1,418
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		
8 Less depreciation claimed in Part III and elsewhere on return	8a		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) See Statement 2	14		139
15 Total deductions. Add lines 1 through 14	15		1,557
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16		4,518
17 Deduction for net operating loss (see instructions)	17		
18 Unrelated business taxable income. Subtract line 17 from line 16	18		4,518

For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2020

Part III Cost of Goods Sold

Enter method of inventory valuation

Table with 8 rows for Cost of Goods Sold. Rows include: 1 Inventory at beginning of year, 2 Purchases, 3 Cost of labor, 4 Additional section 263A costs, 5 Other costs, 6 Total, 7 Inventory at end of year, 8 Cost of goods sold. Includes Yes/No checkboxes for section 263A rules.

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

Table for Rent Income. Row 1: Description of property. Rows 2-4: Rent received or accrued (a, b, c). Row 3: Total rents received or accrued. Row 4: Deductions directly connected with the income. Row 5: Total deductions.

Part V Unrelated Debt-Financed Income (see instructions)

Table for Unrelated Debt-Financed Income. Row 1: Description of debt-financed property. Rows 2-7: Gross income from or allocable to debt-financed property, deductions, and average acquisition debt. Row 8: Total gross income. Row 9: Allocable deductions. Row 10: Total allocable deductions. Row 11: Total dividends-received deductions.

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

1. Name of controlled organization	2. Employer identification number	Exempt/Nonexempt 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

Part IX Advertising Income

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A	<input type="checkbox"/>	_____
B	<input type="checkbox"/>	_____
C	<input type="checkbox"/>	_____
D	<input type="checkbox"/>	_____

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
a Add columns A through D. Enter here and on Part I, line 11, column (A)	▶ _____			
3 Direct advertising costs by periodical				
a Add columns A through D. Enter here and on Part I, line 11, column (A)	▶ _____			
4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in 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				
7 Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8 Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				
a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on Part II, line 13	▶ _____			

Part X Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on Part II, line 1			▶ _____

Part XI Supplemental Information (see instructions)

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Unrelated Business Activity**Statement 1 - Schedule A (990T), Part I, Line 12 - Other Income**

Description	Amount
Video Production	\$ 6,075
Total	\$ 6,075

Unrelated Business Activity**Statement 2 - Schedule A (990T), Part II, Line 14 - Other Deductions**

Description	Amount
studio fee	\$ 139
Total	\$ 139

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Depreciation and Amortization
(Including Information on Listed Property)

▶ Attach to your tax return.

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

OMB No. 1545-0172

2020

Attachment Sequence No. **179**

Name(s) shown on return

SoulMedic Media Group, Inc.

Identifying number
27-2417633

Business or activity to which this form relates

Indirect Depreciation

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.

1	Maximum amount (see instructions)	1	1,040,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,590,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2019 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2021. Add lines 9 and 10, less line 12	▶ 13	

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.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	31,396

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

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2020	17	3,185
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here	▶ <input type="checkbox"/>	

Section B—Assets Placed in Service During 2020 Tax Year Using the General Depreciation System

	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property						
b	5-year property						
c	7-year property						
d	10-year property						
e	15-year property						
f	20-year property						
g	25-year property			25 yrs.		S/L	
h	Residential rental property			27.5 yrs.	MM	S/L	
				27.5 yrs.	MM	S/L	
i	Nonresidential real property			39 yrs.	MM	S/L	
					MM	S/L	

Section C—Assets Placed in Service During 2020 Tax Year Using the Alternative Depreciation System

20a	Class life					S/L	
b	12-year			12 yrs.		S/L	
c	30-year			30 yrs.	MM	S/L	
d	40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	4,629
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	39,210
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	▶ 23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?				<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	24b If "Yes," is the evidence written?				<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)		(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions							25				
26 Property used more than 50% in a qualified business use:											
See Statement 1			%	53,896	52,578			4,629			
27 Property used 50% or less in a qualified business use:											
		%					S/L-				
		%					S/L-				
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	4,629			
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1									29		

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (don't include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **aren't** more than 5% owners or related persons. See instructions.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners			X
39 Do you treat all use of vehicles by employees as personal use?			X
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?			X
41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions			X
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.			

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2020 tax year (see instructions):					
43 Amortization of costs that began before your 2020 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Federal Asset Report

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:										
2	6 Channel Compressor	8/31/10	1,020				1,020	5 HY 200DB	1,020	0
3	Audio Cards (3)	8/31/10	1,004				1,004	5 HY 200DB	1,004	0
	Sold/Scrapped: 12/31/20									
6	Black cabinet with Doors	8/31/10	61				61	7 HY 200DB	61	0
9	Brother Labeler	8/31/10	29				29	5 HY 200DB	29	0
14	Computer - iMac (5)	8/31/10	4,026				4,026	5 HY 200DB	4,026	0
15	Computer - Mac Mini (2)	8/31/10	236				236	5 HY 200DB	236	0
16	Computer - Mac Pro	8/31/10	1,359				1,359	5 HY 200DB	1,359	0
17	Computer - Mac Pro with three Blackmagic Int	8/31/10	2,724				2,724	5 HY 200DB	2,724	0
22	Computer - PCs (2)	8/31/10	3,057				3,057	5 HY 200DB	3,057	0
24	Computer display	8/31/10	430				430	5 HY 200DB	430	0
	Sold/Scrapped: 12/31/20									
25	Computer display	8/31/10	860				860	5 HY 200DB	860	0
	Sold/Scrapped: 12/31/20									
31	Cord Mats (10)	8/31/10	235				235	5 HY 200DB	235	0
32	Countryman E6 Hardwired Headset Mics (2)	8/31/10	355				355	5 HY 200DB	355	0
33	Dell	8/31/10	229				229	5 HY 200DB	229	0
38	External Hard Drive - 1TB	8/31/10	57				57	5 HY 200DB	57	0
39	External Hard Drive - Acom Data 1TB	8/31/10	63				63	5 HY 200DB	63	0
40	External Hard Drive - Western Digital 1TB (5)	8/31/10	69				69	5 HY 200DB	69	0
41	External Hard Drive - Western Digital 2TB	8/31/10	153				153	5 HY 200DB	153	0
43	Furniture - Arm Chair (4)	8/31/10	974				974	7 HY 200DB	974	0
49	Furniture - Book Shelf - Wood & Metal (6)	8/31/10	220				220	7 HY 200DB	220	0
51	Furniture - Cabinets - Lockable storage (5)	8/31/10	326				326	7 HY 200DB	326	0
52	Furniture - Conference table	8/31/10	373				373	7 HY 200DB	373	0
55	Furniture - Desk - Glass corner shaped (5)	8/31/10	304				304	7 HY 200DB	304	0
61	Furniture - Love seats (4)	8/31/10	1,237				1,237	7 HY 200DB	1,237	0
62	Furniture - Sofas (5)	8/31/10	1,544				1,544	7 HY 200DB	1,544	0
65	Headphone Amplifier - Henry (6)	8/31/10	631				631	5 HY 200DB	631	0
66	In-Ear Monitor Systems	8/31/10	5,647				5,647	5 HY 200DB	5,647	0
69	LED Light Bar (2)	8/31/10	772				772	5 HY 200DB	772	0
71	Logitech Quickcam Vision Pro (2)	8/31/10	115				115	5 HY 200DB	115	0
	Sold/Scrapped: 12/31/20									
72	Logitech Quickcam Vision Pro (2)	8/31/10	115				115	5 HY 200DB	115	0
	Sold/Scrapped: 12/31/20									
74	Matrox Dual Head	8/31/10	103				103	5 HY 200DB	103	0
75	Mic Mixer - Rolls	8/31/10	115				115	5 HY 200DB	115	0
76	Mic Mixer - Shure	8/31/10	143				143	5 HY 200DB	143	0
81	Netgear Switch (6)	8/31/10	209				209	5 HY 200DB	209	0
82	Office Task Chairs (10)	8/31/10	516				516	5 HY 200DB	516	0
93	Projectors (2)	8/31/10	574				574	5 HY 200DB	574	0
95	RAM Upgrades for iMacs & 1 Power Mac (5)	8/31/10	436				436	5 HY 200DB	436	0
102	Small PA (5)	8/31/10	832				832	5 HY 200DB	832	0
117	Studio headphones (3)	8/31/10	172				172	5 HY 200DB	172	0
118	Studio Mics & Risers (4) 1 of 2	8/31/10	680				680	5 HY 200DB	680	0
119	Studio on-air light (2)	8/31/10	344				344	5 HY 200DB	344	0
120	Studio Speaker - Fostex (4)	8/31/10	436				436	5 HY 200DB	436	0
123	Trailer	8/31/10	1,721				1,721	5 HY 200DB	1,721	0
126	TV - Samsung plus wall mounts & DVD play	8/31/10	1,083				1,083	5 HY 200DB	1,083	0
127	TV - Vizio	8/31/10	184				184	5 HY 200DB	184	0
128	UPS - back up power supply (2)	8/31/10	574				574	5 HY 200DB	574	0
129	UPS - back up power supply Auxiliary (4)	8/31/10	1,950				1,950	5 HY 200DB	1,950	0
132	Van sound system	8/31/10	459				459	5 HY 200DB	459	0
137	Video Camera - Canon HD (2)	8/31/10	1,004				1,004	5 HY 200DB	1,004	0
	Sold/Scrapped: 12/31/20									
138	Video Camera - Flip	8/31/10	122				122	5 HY 200DB	122	0
	Sold/Scrapped: 12/31/20									
139	Video Camera - Sony HD (2)	8/31/10	1,033				1,033	5 HY 200DB	1,033	0
	Sold/Scrapped: 12/31/20									
140	Video Camera Tripods (3)	8/31/10	92				92	5 HY 200DB	92	0
	Sold/Scrapped: 12/31/20									
141	Video extenders (4)	8/31/10	321				321	5 HY 200DB	321	0
146	XLR Compact Adapter	8/31/10	126				126	5 HY 200DB	126	0
152	Computer - Mac Pro	12/10/10	1,534				1,534	5 HY 200DB	1,534	0
153	Computer - Mac Pro	11/16/10	1,460				1,460	5 HY 200DB	1,460	0
156	Apple Mac Pro	4/05/11	1,277				1,277	5 MQ200DB	1,277	0
161	Cameras	5/27/11	6,709				6,709	7 MQ200DB	6,709	0
162	Camera Gear	6/01/11	2,866				2,866	7 MQ200DB	2,866	0

Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Basis for Depr	PerConv Meth	Prior	Current	
163	Video Display from Neoti LLC	6/30/11	2,590			2,590	5 MQ200DB	2,590	0	
164	Studio fixtures	9/01/11	857			857	7 MQ200DB	857	0	
165	Kitchen Shelving	10/17/11	896			896	7 MQ200DB	896	0	
166	Web Streaming Components	7/31/11	3,371			3,371	7 MQ200DB	3,371	0	
	Sold/Scrapped: 12/31/20									
167	Web Streaming Components	9/30/11	2,655			2,655	7 MQ200DB	2,655	0	
	Sold/Scrapped: 12/31/20									
168	Sonnet Fusion DX800RAID with Controller	12/22/11	4,695			4,695	7 MQ200DB	4,695	0	
169	Black Magic Design Micro Videohub w/ DeckLink	12/22/11	2,785			2,785	7 MQ200DB	2,785	0	
170	Mac Pro Server	12/22/11	4,349			4,349	7 MQ200DB	4,349	0	
171	Mac Pro Server	12/22/11	4,349			4,349	7 MQ200DB	4,349	0	
172	APC Smart-UPS SMT 30000RM2U	12/22/11	1,325			1,325	7 MQ200DB	1,325	0	
173	Video Editing Computer - Mac Pro	1/01/11	2,249			2,249	5 MQ200DB	2,249	0	
174	StarTech.com 8 Port 1U Rack Mount	12/22/11	780			780	7 MQ200DB	780	0	
175	8U Rack Mounted 23" Widescreen LCD Flat Panel	12/22/11	850			850	7 MQ200DB	850	0	
176	3 Fusion Series-4 Drive Hardware RAID-4TB	12/22/11	2,985			2,985	7 MQ200DB	2,985	0	
177	Sonnet Tempo SATA E4P - Storage Controller	12/22/11	900			900	7 MQ200DB	900	0	
180	Mac Book Pro - Jason's Laptop	12/22/11	1,358			1,358	5 MQ200DB	1,358	0	
182	Lighting	12/22/11	1,747			1,747	7 MQ200DB	1,747	0	
184	iPad2 - 16GB Black	12/22/11	710			710	5 MQ200DB	710	0	
	Sold/Scrapped: 9/14/20									
185	2 EW112PG2-A Sennheiser Portable Wireless	12/22/11	1,200			1,200	7 MQ200DB	1,200	0	
187	Mac Book Pro	12/22/11	1,090			1,090	5 MQ200DB	1,090	0	
188	Studio LED Lighting	12/31/11	3,706			3,706	7 MQ200DB	3,706	0	
189	15' Pipe Grid System	12/31/11	1,441			1,441	7 MQ200DB	1,441	0	
190	3 LCD screens for front entrance	12/31/11	3,364			3,364	5 MQ200DB	3,364	0	
191	Cabling and Wiring	12/31/11	4,038			4,038	7 MQ200DB	4,038	0	
211	Install & Integrate Equipment from Macprofilms	12/22/11	8,750			8,750	7 MQ200DB	8,750	0	
212	Labor to install pipe grid system & LED lighting	2/22/11	1,548			1,548	7 MQ200DB	1,548	0	
213	Studio Lights	2/23/12	10,936			10,936	7 HY 200DB	10,936	0	
214	Server	2/28/12	801			801	5 HY 200DB	801	0	
216	Media Storage	3/16/12	1,049			1,049	7 HY 200DB	1,049	0	
217	1 X Standard Merch Case	3/14/12	675			675	7 HY 200DB	675	0	
222	75% Studio B Grid and Accoustical Treatment	6/22/12	6,176			6,176	7 HY 200DB	6,176	0	
223	Lights	6/13/12	1,288			1,288	7 HY 200DB	1,288	0	
224	Blackmagic Design UltraStudio	5/18/12	993			993	7 HY 200DB	993	0	
226	80" LED Smart HDTV	5/30/12	4,499			4,499	5 HY 200DB	4,499	0	
	Sold/Scrapped: 5/27/20									
227	Refurbished iMac w/ apple care	6/06/12	2,181			2,181	5 HY 200DB	2,181	0	
	Sold/Scrapped: 12/31/20									
228	70" TV w/ 3yr warranty	6/13/12	2,508			2,508	5 HY 200DB	2,508	0	
230	LaCie 5 big Network v.2 10TB 2X Gigabit Ethernet	8/22/12	990			990	7 HY 200DB	990	0	
231	Ethernet Switch	8/22/12	539			539	7 HY 200DB	539	0	
232	Lights for Studio B	9/25/12	6,836			6,836	7 HY 200DB	6,836	0	
233	Studio B Grid and Accoustical Treatment	7/09/12	2,059			2,059	7 HY 200DB	2,059	0	
240	Desk and Chairs for Editor Suite	6/01/12	3,072			3,072	7 HY 200DB	3,072	0	
241	Office Furniture	10/01/12	972			972	7 HY 200DB	972	0	
242	Audio Equipment	10/12/12	1,318			1,318	7 HY 200DB	1,318	0	
243	Video Equipment	10/12/12	1,390			1,390	7 HY 200DB	1,390	0	
244	Lighting Equipment	10/12/12	4,288			4,288	7 HY 200DB	4,288	0	
245	Editing Equipment	10/12/12	835			835	7 HY 200DB	835	0	
246	Office Equipment	10/12/12	491			491	7 HY 200DB	491	0	
247	Video Switcher w/ Accessories	2/28/13	2,370			2,370	7 HY 200DB	2,264	106	
248	Video Switcher - Mounts (3), 43" plasma tv	2/04/13	1,105			1,105	7 HY 200DB	1,056	49	
249	100 mbps DIA, Fibre switch, Constr Costs	4/24/13	40,000			40,000	7 HY 200DB	38,215	1,785	
250	Webserver - Dell outlet powerededge R320	4/25/13	1,615			1,615	7 HY 200DB	1,543	72	
251	Video Switcher	4/25/13	561			561	7 HY 200DB	535	26	
252	Digital Mixer w/ iPad Ctrl; 1 Shure Lavalier	5/25/13	924			924	7 HY 200DB	883	41	
253	(3) Shure Lavalier Mics	5/29/13	522			522	7 HY 200DB	499	23	
254	Refurbished Mac Mini 2.3 GHz quad core Intel	4/24/13	759			759	7 HY 200DB	725	34	
255	LaCie 5 big Network v 2 10 TB 2x Gigabit Ethernet	4/20/13	2,360			2,360	7 HY 200DB	2,255	105	
256	(13) Road Cases	10/01/13	3,325			3,325	5 HY 200DB	3,325	0	
257	Audio Stream Server	10/03/13	1,191			1,191	5 HY 200DB	1,191	0	
258	(3) Vizio 55" LED TV's	11/13/13	2,094			2,094	5 HY 200DB	2,094	0	
264	3 Lacie 5 Big Disc 10 TB Thunderbolt Drives	3/24/14	1,820			1,820	3 HY 200DB	1,820	0	
265	Studio Sound Proofing	5/21/14	1,276			1,276	3 HY 200DB	1,276	0	
266	Set Materials	5/21/14	1,159			1,159	3 HY 200DB	1,159	0	
267	4 LCD TV Stands	5/21/14	828			828	3 HY 200DB	828	0	
268	Slider Dolly and Ring Light Set	6/17/14	1,206			1,206	3 HY 200DB	1,206	0	
272	Studio Lights w/ Barn Doors - Black (GIK)	8/01/14	13,002			13,002	7 HY 200DB	11,261	581	
	Sold/Scrapped: 12/31/20									

Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
273	Camera for Events	7/09/14	999			999	3 HY 200DB	999	0
274	Lights for Studio - Cool Lights USA	8/29/14	1,146			1,146	3 HY 200DB	1,146	0
276	(2) Blackmagic Designs Production Camera 4K	8/27/15	8,142		X	4,071	7 HY 200DB	7,234	363
317	Computer - Macbook Pro	8/31/10	1,356			1,356	5 HY 200DB	1,356	0
318	Computer display - Aactiva	8/31/10	86			86	5 HY 200DB	86	0
335	Power inverters	8/31/10	34			34	5 HY 200DB	34	0
			<u>261,664</u>			<u>257,593</u>		<u>256,774</u>	<u>3,185</u>

Other Depreciation:

85	Parallels Desktop 3.0 for Mac Sold/Scrapped: 12/31/20	8/31/10	46			46	3 MOAmort	46	0
89	Plimus	8/31/10	57			57	3 MOAmort	57	0
99	Simian (2) Sold/Scrapped: 12/31/20	8/31/10	1,720			1,720	3 MOAmort	1,720	0
114	Software - Sound Effects (2) Sold/Scrapped: 12/31/20	8/31/10	115			115	3 MOAmort	115	0
206	Computer Software Sold/Scrapped: 12/31/20	9/01/11	631			631	3 MOAmort	631	0
207	Episode 6 Mac Sold/Scrapped: 12/31/20	11/29/11	654			654	3 MOAmort	654	0
208	Softron OnTheAir Manaer for OnTheAir Node Sold/Scrapped: 12/31/20	12/22/11	9,280			9,280	3 MOAmort	9,280	0
209	Softron Move Recorder Sold/Scrapped: 12/31/20	12/22/11	1,095			1,095	3 MOAmort	1,095	0
239	UPG CS6 Production Premium 6, Adobe Pre Sold/Scrapped: 12/31/20	6/18/12	2,479			2,479	3 MOAmort	2,479	0
259	Website - MessyMinistry.com Sold/Scrapped: 12/31/20	10/15/13	1,000			1,000	3 MO S/L	1,000	0
260	Website - Get Schooled Tour Sold/Scrapped: 12/31/20	12/31/13	510			510	3 MO S/L	510	0
262	SoulMedic Central.com - Initial Development	12/16/13	7,500			7,500	3 MO S/L	7,500	0
270	New Website Sold/Scrapped: 12/31/20	12/01/14	24,700			24,700	2 MO S/L	24,700	0
275	SoulMedica Central Website	7/25/14	5,000			5,000	3 MO S/L	5,000	0
278	SMC Enhancements - Polls, API & Reporting	9/30/15	5,000			5,000	3 MO S/L	5,000	0
279	Website Documentation	12/29/15	3,750			3,750	3 MO S/L	3,750	0
281	Macbook Air (1 of 2)	4/21/16	1,050			1,050	3 MO S/L	1,050	0
282	Macbook Air (2 of 2) Sold/Scrapped: 12/31/20	4/21/16	1,050			1,050	3 MO S/L	1,050	0
284	(12) White Chairs - Board Room	7/01/16	1,210			1,210	3 MO S/L	1,210	0
285	Dell Server for GST	5/26/16	3,498			3,498	3 MO S/L	3,498	0
286	SMC Twilio Intergration	2/17/16	4,000			4,000	3 MO S/L	4,000	0
287	SMC WebPoll Development	2/17/16	867			867	3 MO S/L	867	0
288	SMC Web Poll Development	2/17/16	867			867	3 MO S/L	867	0
289	SMC WebPoll Implementation	2/17/16	867			867	3 MO S/L	867	0
290	SMC Poll Smart Sizing	2/17/16	900			900	3 MO S/L	900	0
291	SMC Twilio Intergration	3/15/16	2,000			2,000	3 MO S/L	2,000	0
292	Agent Activity Enhancements	5/25/16	900			900	3 MO S/L	900	0
294	Security/Activity Enhancements	7/18/16	900			900	3 MO S/L	900	0
295	Converstaion Alert Notification Enhancements	7/18/16	600			600	3 MO S/L	600	0
298	Server Setup/Get Schooled Tour	5/11/16	15,393			15,393	3 MO S/L	15,393	0
300	iPad Pro - C. Faupel	11/10/16	1,130			1,130	3 MO S/L	1,130	0
301	15.4 inch MacBook Pro	11/15/16	2,267			2,267	3 MO S/L	2,267	0
302	SMC - Poll Enhancement - Trivia	10/19/16	3,000			3,000	3 MO S/L	3,000	0
303	SMC - Poll Management Enhancements	10/19/16	600			600	3 MO S/L	600	0
304	Alert Word Fixes	12/31/16	900			900	3 MO S/L	900	0
305	Alarm for ProMaster	11/10/16	515			515	5 MO S/L	326	103
306	2-Adtran Bluesocket Access Points for GST	3/29/17	1,890			1,890	5 MO S/L	1,040	378
307	ProMaster Wrap	5/17/17	2,600			2,600	5 MO S/L	1,343	520
308	SMC - Blocking Client Accounts/IP Addresses	3/13/17	3,000			3,000	3 MO S/L	2,833	167
309	SMC - Implement Conversation Success Evaluation	3/13/17	656			656	3 MO S/L	620	36
310	Account Abuse Detection	5/22/17	3,600			3,600	3 MO S/L	3,100	500
311	Implement Campaigns and Brands	5/22/17	2,000			2,000	3 MO S/L	1,722	278
312	SMC - Timesheet Feature	7/11/17	7,500			7,500	3 MO S/L	6,250	1,250
313	Da-Lite 88692 Fast Fold Dlx Complete Screen	9/11/17	1,078			1,078	5 MO S/L	503	216
314	Vivitek D557W WXGA DLP Projector	9/11/17	572			572	5 MO S/L	267	115
315	Sling Media SlingStudio Videography Solution	9/25/17	999			999	5 MO S/L	450	199
316	Sony Full HD NXCAM Camcorder -Sweetwater	11/13/17	5,097			5,097	5 MO S/L	2,294	1,019
319	Implement pledge poll type	11/27/17	900			900	3 MO S/L	625	275

Federal Asset Report

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current	
320	SMC Scheduler	5/26/18	3,750			3,750	3 MO S/L	1,979	1,250	
321	SMC Auto Nickname Assignmests in Trivia P	7/18/18	638			638	3 MO S/L	319	212	
322	GST Verizon 3 theme	9/27/18	563			563	3 MO S/L	234	188	
323	Upper side cabinets both sides	7/27/18	800			800	5 MO S/L	227	160	
324	iphone 8 AT&T	4/24/18	583			583	3 MO S/L	324	130	
	Sold/Scrapped: 9/14/20									
325	MacBook Pro 2015 15" Serial# C02QC54K	4/25/18	1,699			1,699	5 MO S/L	566	340	
326	IMAC PRO 27"/CTO Serial # C02WP0H9H	5/24/18	6,599			6,599	5 MO S/L	2,090	1,319	
327	LaCie 2Big Dock 12TB RAID Thunderbolt	6/01/18	749			749	5 MO S/L	237	150	
328	Hard Drive & Video Card for one of the 5 iMac	6/11/18	614			614	3 MO S/L	324	204	
	Sold/Scrapped: 12/31/20									
329	Refurbished 10.5 in iPad Pro 256GB	7/18/18	789			789	3 MO S/L	373	263	
330	Synology RS2418+ 12bay NAS Raskstation	12/21/18	1,698			1,698	5 MO S/L	340	339	
331	Craddlepoin advanced edge router 220	12/03/18	1,129			1,129	5 MO S/L	245	225	
332	SMC-Twilio 2 step verification	12/14/18	3,075			3,075	3 MO S/L	1,110	1,025	
333	SMC-terms agreement update, checkbox, txt	12/18/18	638			638	3 MO S/L	213	212	
334	SMC-Repeating shifts for scheduler	12/18/18	2,138			2,138	3 MO S/L	713	712	
336	SMC - Scheduler Phase 1	1/03/19	3,750			3,750	3 MO S/L	1,250	1,250	
337	SMC - Grant Reporting Page	5/02/19	713			713	3 MO S/L	158	238	
338	GST Server Rack from Indy Case	2/25/19	1,057			1,057	3 MO S/L	294	352	
339	Macbook Air 1.8	3/19/19	1,000			1,000	3 MO S/L	250	333	
340	15.4-inch MacBook Pro 2.2GHz	6/24/19	1,999			1,999	3 MO S/L	333	667	
341	UniFi Swtich 6 XG	7/15/19	2,098			2,098	3 MO S/L	350	699	
342	Ubiquiti Unifi security Gateway XG USG	8/07/19	2,389			2,389	3 MO S/L	332	796	
343	Da-Lite 93983 Insta- Theater 16:9	8/12/19	664			664	3 MO S/L	92	222	
344	Sony VPL-FHZ66/B Laser Projector	8/12/19	6,050			6,050	3 MO S/L	840	2,017	
345	Sony VPLL-Z3009 Projector Lens	8/12/19	2,156			2,156	3 MO S/L	299	719	
346	Sound system	8/12/19	3,561			3,561	3 MO S/L	495	1,187	
349	Dell PowerEdge R430	9/04/19	1,597			1,597	3 MO S/L	177	533	
350	Blackmagic design pocket cinema camera 4k	11/12/19	1,734			1,734	3 MO S/L	96	578	
351	UniFi WiFi BaseStation XG x 1	11/20/19	1,499			1,499	3 MO S/L	42	499	
352	GST WiFi System install	12/04/19	2,229			2,229	3 MO S/L	62	743	
353	MacBook Air 13.3, 1.8GHZ, 8GB, 128G	12/12/19	700			700	3 MO S/L	19	234	
354	Webinar Feature - Textix	9/30/20	3,450			3,450	3 MO S/L	0	288	
355	Ubiquiti networks Unifi Basestation XG	1/08/20	1,299			1,299	3 MO S/L	0	433	
356	Edelkrone slider 21" bundle	8/14/20	1,247			1,247	3 MO S/L	0	173	
357	Blackmagic pocket cinema Cameras 6k (2)	8/17/20	3,990			3,990	3 MO S/L	0	443	
358	Flash Furniture HI - 4 piece lounge set (2)	8/18/20	2,326			2,326	5 MO S/L	0	155	
359	21.5 inch iMac with Retina 4k display, 8th ge	8/24/20	1,999			1,999	3 MO S/L	0	222	
360	RemedyLIVE Interactive Software - Dev 1	9/01/20	53,200			53,200	3 MO S/L	0	5,911	
361	RemedyLIVE Interactive Softare - Dev 2	11/30/20	14,325			14,325	3 MO S/L	0	796	
362	Da-Lite 39313 HD Screen DV 8x14	10/26/20	2,217			2,217	3 MO S/L	0	123	
	Total Other Depreciation		<u>278,654</u>			<u>278,654</u>		<u>141,292</u>	<u>31,396</u>	
	Total ACRS and Other Depreciation		<u>278,654</u>			<u>278,654</u>		<u>141,292</u>	<u>31,396</u>	
Listed Property:										
133	Vehicle - Dodge 2001 Van	8/31/10	4,302			4,302	5 HY 200DB	4,302	0	
277	Van Wrap	5/31/15	2,635		X	1,317	5 HY 200DB	2,559	76	
296	Vehicle Wrap	2/18/16	2,016			2,016	5 MO S/L	1,546	403	
297	2015 Ram ProMaster	5/25/16	28,258			28,258	5 MO S/L	14,373	2,075	
299	2015 Ram ProMaster ReBuild	6/21/16	16,685			16,685	5 MO S/L	10,418	2,075	
			<u>53,896</u>			<u>52,578</u>		<u>33,198</u>	<u>4,629</u>	
	Grand Totals		594,214			588,825		431,264	39,210	
	Less: Dispositions and Transfers		75,670			75,670		73,380	915	
	Less: Start-up/Org Expense		0			0		0	0	
	Net Grand Totals		<u>518,544</u>			<u>513,155</u>		<u>357,884</u>	<u>38,295</u>	

Bonus Depreciation Report

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<u>Asset</u>	<u>Property Description</u>	<u>Date In Service</u>	<u>Tax Cost</u>	<u>Bus Pct</u>	<u>Tax Sec 179 Exp</u>	<u>Current Bonus</u>	<u>Prior Bonus</u>	<u>Tax - Basis for Depr</u>
276	(2) Blackmagic Designs Production Camera 4K	2/27/15	8,142		0	0	4,071	4,071
277	Van Wrap	5/31/15	2,635	100	0	0	1,318	1,317
	Grand Total		<u>10,777</u>		<u>0</u>	<u>0</u>	<u>5,389</u>	<u>5,388</u>

Depreciation Adjustment Report

FYE: 12/31/2020

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
<u>MACRS Adjustments:</u>						
Page 1	1	247	Video Switcher w/ Accessories	106	254	-148
				<u>106</u>	<u>254</u>	<u>-148</u>

Future Depreciation Report **FYE: 12/31/21**

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
2	6 Channel Compressor	8/31/10	1,020	0	0
6	Black cabinet with Doors	8/31/10	61	0	0
9	Brother Labeler	8/31/10	29	0	0
14	Computer - iMac (5)	8/31/10	4,026	0	0
15	Computer - Mac Mini (2)	8/31/10	236	0	0
16	Computer - Mac Pro	8/31/10	1,359	0	0
17	Computer - Mac Pro with three Blackmagic Inte	8/31/10	2,724	0	0
22	Computer - PCs (2)	8/31/10	3,057	0	0
31	Cord Mats (10)	8/31/10	235	0	0
32	Countryman E6 Hardwired Headset Mics (2)	8/31/10	355	0	0
33	Dell	8/31/10	229	0	0
38	External Hard Drive - 1TB	8/31/10	57	0	0
39	External Hard Drive - Acom Data 1TB	8/31/10	63	0	0
40	External Hard Drive - Western Digital 1TB (5)	8/31/10	69	0	0
41	External Hard Drive - Western Digital 2TB	8/31/10	153	0	0
43	Furniture - Arm Chair (4)	8/31/10	974	0	0
49	Furniture - Book Shelf - Wood & Metal (6)	8/31/10	220	0	0
51	Furniture - Cabinets - Lockable storage (5)	8/31/10	326	0	0
52	Furniture - Conference table	8/31/10	373	0	0
55	Furniture - Desk - Glass corner shaped (5)	8/31/10	304	0	0
61	Furniture - Love seats (4)	8/31/10	1,237	0	0
62	Furniture - Sofas (5)	8/31/10	1,544	0	0
65	Headphone Amplifier - Henry (6)	8/31/10	631	0	0
66	In-Ear Monitor Systems	8/31/10	5,647	0	0
69	LED Light Bar (2)	8/31/10	772	0	0
74	Matrox Dual Head	8/31/10	103	0	0
75	Mic Mixer - Rolls	8/31/10	115	0	0
76	Mic Mixer - Shure	8/31/10	143	0	0
81	Netgear Switch (6)	8/31/10	209	0	0
82	Office Task Chairs (10)	8/31/10	516	0	0
93	Projectors (2)	8/31/10	574	0	0
95	RAM Upgrades for iMacs & 1 Power Mac (5)	8/31/10	436	0	0
102	Small PA (5)	8/31/10	832	0	0
117	Studio headphones (3)	8/31/10	172	0	0
118	Studio Mics & Risers (4) 1 of 2	8/31/10	680	0	0
119	Studio on-air light (2)	8/31/10	344	0	0
120	Studio Speaker - Fostex (4)	8/31/10	436	0	0
123	Trailer	8/31/10	1,721	0	0
126	TV - Samsung plus wall mounts & DVD players (8/31/10	1,083	0	0
127	TV - Vizio	8/31/10	184	0	0
128	UPS - back up power supply (2)	8/31/10	574	0	0
129	UPS - back up power supply Auxiliary (4)	8/31/10	1,950	0	0
132	Van sound system	8/31/10	459	0	0
141	Video extenders (4)	8/31/10	321	0	0
146	XLR Compact Adapter	8/31/10	126	0	0
152	Computer - Mac Pro	12/10/10	1,534	0	0
153	Computer - Mac Pro	11/16/10	1,460	0	0
156	Apple Mac Pro	4/05/11	1,277	0	0
161	Cameras	5/27/11	6,709	0	0
162	Camera Gear	6/01/11	2,866	0	0
163	Video Display from Neoti LLC	6/30/11	2,590	0	0
164	Studio fixtures	9/01/11	857	0	0
165	Kitchen Shelving	10/17/11	896	0	0
168	Sonnet Fusion DX800RAID with Controller	12/22/11	4,695	0	0
169	Black Magic Design Micro Videohub w/ Decklink	12/22/11	2,785	0	0
170	Mac Pro Server	12/22/11	4,349	0	0
171	Mac Pro Server	12/22/11	4,349	0	0
172	APC Smart-UPS SMT 30000RM2U	12/22/11	1,325	0	0
173	Video Editing Computer - Mac Pro	1/01/11	2,249	0	0
174	StarTech.com 8 Port 1U Rack Mount	12/22/11	780	0	0
175	8U Rack Mounted 23" Widescreen LCD Flat Panel	12/22/11	850	0	0
176	3 Fusion Series-4 Drive Hardware RAID-4TB	12/22/11	2,985	0	0
177	Sonnet Tempo SATA E4P - Storage Controller	12/22/11	900	0	0
180	Mac Book Pro - Jason's Laptop	12/22/11	1,358	0	0
182	Lighting	12/22/11	1,747	0	0
185	2 EW112PG2-A Sennheiser Portable Wireless w/M	12/22/11	1,200	0	0
187	Mac Book Pro	12/22/11	1,090	0	0

Future Depreciation Report **FYE: 12/31/21**

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
188	Studio LED Lighting	12/31/11	3,706	0	0
189	15' Pipe Grid System	12/31/11	1,441	0	0
190	3 LCD screens for front entrance	12/31/11	3,364	0	0
191	Cabling and Wiring	12/31/11	4,038	0	0
211	Install & Integrate Equipment from Macprofes.	12/22/11	8,750	0	0
212	Labor to install pipe grid system & LED light	12/22/11	1,548	0	0
213	Studio Lights	2/23/12	10,936	0	0
214	Server	2/28/12	801	0	0
216	Media Storage	3/16/12	1,049	0	0
217	1 X Standard Merch Case	3/14/12	675	0	0
222	75% Studio B Grid and Accoustical Treatment	5/22/12	6,176	0	0
223	Lights	6/13/12	1,288	0	0
224	Blackmagic Design UltraStudio	5/18/12	993	0	0
228	70" TV w/ 3yr warranty	6/13/12	2,508	0	0
230	LaCie 5 big Network v.2 10TB 2X Gigabit	8/22/12	990	0	0
231	Ethernet Switch	8/22/12	539	0	0
232	Lights for Studio B	9/25/12	6,836	0	0
233	Studio B Grid and Accoustical Treatment	7/09/12	2,059	0	0
240	Desk and Chairs for Editor Suite	6/01/12	3,072	0	0
241	Office Furniture	10/01/12	972	0	0
242	Audio Equipment	10/12/12	1,318	0	0
243	Video Equipment	10/12/12	1,390	0	0
244	Lighting Equipment	10/12/12	4,288	0	0
245	Editing Equipment	10/12/12	835	0	0
246	Office Equipment	10/12/12	491	0	0
247	Video Switcher w/ Accessories	2/28/13	2,370	0	0
248	Video Switcher - Mounts (3), 43" plasma tv (2	3/04/13	1,105	0	0
249	100 mbps DIA, Fibre switch, Constr Costs	4/24/13	40,000	0	0
250	Websserver - Dell outlet poweredge R320	4/25/13	1,615	0	0
251	Video Switcher	4/25/13	561	0	0
252	Digital Mixer w/ iPad Ctrl; 1 Shure Lavalier	5/25/13	924	0	0
253	(3) Shure Lavalier Mics	5/29/13	522	0	0
254	Refurbished Mac Mini 2.3 GHz quad core Intel	6/24/13	759	0	0
255	LaCie 5 big Network v 2 10 TB 2x Gigabit Ethe	9/03/13	2,360	0	0
256	(13) Road Cases	10/01/13	3,325	0	0
257	Audio Stream Server	10/03/13	1,191	0	0
258	(3) Vizio 55" LED TV's	11/13/13	2,094	0	0
264	3 Lacie 5 Big Disc 10 TB Thunderbolt Drives	3/24/14	1,820	0	0
265	Studio Sound Proofing	5/21/14	1,276	0	0
266	Set Materials	5/21/14	1,159	0	0
267	4 LCD TV Stands	5/21/14	828	0	0
268	Slider Dolly and Ring Light Set	6/17/14	1,206	0	0
273	Camera for Events	7/09/14	999	0	0
274	Lights for Studio - Cool Lights USA	8/29/14	1,146	0	0
276	(2) Blackmagic Designs Production Camera 4K	2/27/15	8,142	363	0
317	Computer - Macbook Pro	8/31/10	1,356	0	0
318	Computer display - Activa	8/31/10	86	0	0
335	Power inverters	8/31/10	34	0	0
			<u>230,471</u>	<u>363</u>	<u>0</u>

Other Depreciation:

89	Plimus	8/31/10	57	0	0
262	SoulMedic Central.com - Initial Development	12/16/13	7,500	0	0
275	SoulMedica Central Website	7/25/14	5,000	0	0
278	SMC Enhancements - Polls, API & Reporting	9/30/15	5,000	0	0
279	Website Documentation	12/29/15	3,750	0	0
281	Macbook Air (1 of 2)	4/21/16	1,050	0	0
284	(12) White Chairs - Board Room	7/01/16	1,210	0	0
285	Dell Server for GST	5/26/16	3,498	0	0
286	SMC Twilio Intergration	2/17/16	4,000	0	0
287	SMC WebPoll Development	2/17/16	867	0	0
288	SMC Web Poll Development	2/17/16	867	0	0
289	SMC WebPoll Implementation	2/17/16	867	0	0
290	SMC Poll Smart Sizing	2/17/16	900	0	0
291	SMC Twilio Intergration	3/15/16	2,000	0	0
292	Agent Activity Enhancements	5/25/16	900	0	0
294	Security/Activity Enhancements	7/18/16	900	0	0
295	Converstaion Alert Notification Enhancements	7/18/16	600	0	0

Future Depreciation Report **FYE: 12/31/21**

FYE: 12/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
298	Server Setup/Get Schooled Tour	5/11/16	15,393	0	0
300	iPad Pro - C. Faupel	11/10/16	1,130	0	0
301	15.4 inch MacBook Pro	11/15/16	2,267	0	0
302	SMC - Poll Enhancement - Trivia	10/19/16	3,000	0	0
303	SMC - Poll Management Enhancements	10/19/16	600	0	0
304	Alert Word Fixes	12/31/16	900	0	0
305	Alarm for ProMaster	11/10/16	515	86	0
306	2-Adtran Bluesocket Access Points for GST	3/29/17	1,890	378	0
307	ProMaster Wrap	5/17/17	2,600	520	0
308	SMC - Blocking Client Accounts/IP Addresses	3/13/17	3,000	0	0
309	SMC - Implement Conversation Success Evaluati	3/13/17	656	0	0
310	Account Abuse Detection	5/22/17	3,600	0	0
311	Implement Campaigns and Brands	5/22/17	2,000	0	0
312	SMC - Timesheet Feature	7/11/17	7,500	0	0
313	Da-Lite 88692 Fast Fold Dlx Complete Screen	9/11/17	1,078	215	0
314	Vivitek D557W WXGA DLP Projector	9/11/17	572	114	0
315	Sling Media SlingStudio Videography Solution	9/25/17	999	200	0
316	Sony Full HD NXCAM Camcorder -Sweetwater	10/13/17	5,097	1,019	0
319	Implement pledge poll type	11/27/17	900	0	0
320	SMC Scheduler	5/26/18	3,750	521	0
321	SMC Auto Nickname Assignmests in Trivia Polls	7/07/18	638	107	0
322	GST Verizon 3 theme	9/27/18	563	141	0
323	Upper side cabinets both sides	7/27/18	800	160	0
325	MacBook Pro 2015 15" Serial# C02QC54KG8WN	4/25/18	1,699	340	0
326	IMAC PRO 27"/CTO Serial # C02WP0H9HX8F	5/24/18	6,599	1,320	0
327	LaCie 2Big Dock 12TB RAID Thunderbolt 3 7200R	6/01/18	749	150	0
329	Refurbished 10.5 in iPad Pro 256GB	7/18/18	789	153	0
330	Synology RS2418+ 12bay NAS Raskstation	12/21/18	1,698	340	0
331	Craddlepoin advanced edge router 220	12/03/18	1,129	226	0
332	SMC-Twilio 2 step verification	12/14/18	3,075	940	0
333	SMC-terms agreement update, checkbox, txtchat	12/18/18	638	213	0
334	SMC-Repeating shifts for scheduler	12/18/18	2,138	713	0
336	SMC - Scheduler Phase 1	1/03/19	3,750	1,250	0
337	SMC - Grant Reporting Page	5/02/19	713	237	0
338	GST Server Rack from Indy Case	2/25/19	1,057	352	0
339	Macbook Air 1.8	3/19/19	1,000	334	0
340	15.4-inch MacBook Pro 2.2GHz	6/24/19	1,999	666	0
341	UniFi Swtich 6 XG	7/15/19	2,098	699	0
342	Ubiquiti Unifi security Gateway XG USG	8/07/19	2,389	796	0
343	Da-Lite 93983 Insta- Theater 16:9	8/12/19	664	221	0
344	Sony VPL-FHZ66/B Laser Projector	8/12/19	6,050	2,017	0
345	Sony VPLL-Z3009 Projector Lens	8/12/19	2,156	719	0
346	Sound system	8/12/19	3,561	1,187	0
349	Dell PowerEdge R430	9/04/19	1,597	532	0
350	Blackmagic design pocket cinema camera 4k	11/12/19	1,734	578	0
351	UniFi WiFi BaseStation XG x 1	11/20/19	1,499	500	0
352	GST WiFi System install	12/04/19	2,229	743	0
353	MacBook Air 13.3, 1.8GHZ, 8GB, 128G	12/12/19	700	233	0
354	Webinar Feature - Textix	9/30/20	3,450	1,150	0
355	Ubiquiti networks Unifi Basestation XG	1/08/20	1,299	433	0
356	Edelkrone slider 21" bundle	8/14/20	1,247	416	0
357	Blackmagic pocket cinema Cameras 6k (2)	8/17/20	3,990	1,330	0
358	Flash Furniture HI - 4 piece lounge set (2)	8/18/20	2,326	465	0
359	21.5 inch iMac with Retina 4k display, 8th ge	8/24/20	1,999	666	0
360	RemedyLIVE Interactive Software - Dev 1	9/01/20	53,200	17,733	0
361	RemedyLIVE Interactive Software - Dev 2	11/30/20	14,325	4,775	0
362	Da-Lite 39313 HD Screen DV 8x14	10/26/20	2,217	739	0
Total Other Depreciation			234,177	46,627	0
Total ACRS and Other Depreciation			234,177	46,627	0

Listed Property:

133	Vehicle - Dodge 2001 Van	8/31/10	4,302	0	0
277	Van Wrap	5/31/15	2,635	0	0
296	Vehicle Wrap	2/18/16	2,016	67	0
297	2015 Ram ProMaster	5/25/16	28,258	2,075	0
299	2015 Ram ProMaster ReBuild	6/21/16	16,685	2,075	0

Future Depreciation Report **FYE: 12/31/21**

FYE: 12/31/2020

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
			<u>53,896</u>	<u>4,217</u>	<u>0</u>
	Grand Totals		<u>518,544</u>	<u>51,207</u>	<u>0</u>

Name SoulMedic Media Group, Inc.	Taxpayer Identification Number 27-2417633
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Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	<u>21,495</u>
2. Advertising income	2.	_____
3. Circulation income	3.	_____
4. Other income	4.	_____
5. Returns and allowances	5.	_____
6. Contributions received	6.	<u>41,500</u>
7. Total revenue. Add lines 1 through 6	7.	<u>62,995</u>
8. Cost of Goods Sold	8.	_____
9. Employment Expense	9.	_____
10. Fees for services	10.	_____
11. Indirect Expense	11.	_____
12. Depreciation Expense	12.	_____
13. Exempt Activity Expense	13.	_____
14. Fundraising Expense	14.	<u>21,526</u>
15. Total expenses. Add lines 8 through 14	15.	<u>21,526</u>
16. Net Income/Loss. Line 7 minus Line 15	16.	<u>41,469</u>

Expense Details - Indirect Expense:

Advertising and promotion	_____
Office	_____
Printing/publication/postage	_____
Info technology/Maintenance	_____
Royalties & License Fees	_____
Occupancy/Real Estate Taxes	_____
Travel & Repairs	_____
Travel/entertainment (officials)	_____
Conferences/meetings	_____
Interest	_____
Insurance	_____
Total Indirect Expense	_____

Expense Details - Depreciation Expense:

On investment property	_____
On non-investment property	_____
Amortization	_____
Depletion	_____
Total Depreciation Expense	_____

Expense Details - Cost of Goods Sold:

Beginning inventory	_____
Purchases	_____
Labor	_____
Section 263A costs	_____
Other costs	_____
Ending inventory	_____
Total Cost of Goods Sold	_____

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	_____
Bad debts	_____
Taxes/licenses	_____
Charitable contributions	_____
Dividend recd deductions	_____
Readership costs	_____
Other expenses	_____
Total Exempt Activity Expense	_____

Expense Details - Employment Expense:

Compensation of officers	_____
Other salaries and wages	_____
Pension plan contributions	_____
Other employee benefits	_____
Payroll taxes	_____
Total Employment Expense	_____

Expense Details - Fundraising Expense:

Cash prizes	<u>180</u>
Non-cash prizes	<u>1,540</u>
Rent and facility costs	<u>15,840</u>
Food & beverages (Part II only)	<u>2,308</u>
Entertainment (Part II only)	<u>504</u>
Other direct expenses	<u>1,154</u>
Total Fundraising Expense	<u>21,526</u>

Expense Details - Fees for Services:

Management	_____
Legal	_____
Accounting	_____
Lobbying	_____
Professional fundraising	_____
Investment management	_____
Other	_____
Total Fees for Services	_____

Information is indicated for use on Form 990-T, Schedule A:

- Part V, Debt Financing
- Part VI, Controlled Org Income
- Part VII, Investments for C(7)(9)(17)
- Part VIII, Exploited Activities
- Part IX, Advertising Income

Allocation of Expense to Program Service Accomplishments:

First	_____
Second	_____
Third	_____
All other	_____

Form **990-W**

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations

OMB No. 1545-0047

(Worksheet)
Department of the Treasury
Internal Revenue Service

(and on Investment Income for Private Foundations)
▶ Go to www.irs.gov/Form990W for instructions and the latest information.
▶ Keep for your records. Do not send to the Internal Revenue Service.

2021

1	Unrelated business taxable income expected in the tax year	1	3,518
2	Tax on the amount on line 1. See instructions for tax computation	2	739
3	Alternative minimum tax for trusts. See instructions	3	
4	Total. Add lines 2 and 3	4	739
5	Estimated tax credits. See instructions	5	
6	Subtract line 5 from line 4	6	739
7	Other taxes. See instructions	7	
8	Total. Add lines 6 and 7	8	739
9	Credit for federal tax paid on fuels. See instructions	9	
10a	Subtract line 9 from line 8. Note: If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions	10a	739
b	Enter the tax shown on the 2020 return. See instructions. Caution: If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c	10b	739
c	2021 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c	10c	739

		(a)	(b)	(c)	(d)	
11	Installment due dates. See instructions	11	04/15/21	06/15/21	09/15/21	12/15/21
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization."	12	200	200	200	200
13	2020 Overpayment. See instructions	13				
14	Payment due (Subtract line 13 from line 12)	14	200	200	200	200

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2021)

Form 990-T	Business Income Activity Summary	2020
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Name SoulMedic Media Group, Inc.	Taxpayer Identification Number 27-2417633
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Business Activity Income (and allocation of Prior-2018 NOL)

- | | |
|--|-----|
| A. Total Pre-2018 Net Operating Losses Carried Forward | N/A |
| B. Total Pre-2018 Net Operating Loss allocated to Sch A activities | B. |
| C. Total Pre-2018 Net Operating Loss allocated to Form 990-T, Line 6 | C. |
| D. Pre-2018 Applied (Sum of B and C) | D. |
| E. Pre-2018 Remaining (Line A minus Line D) | E. |
| F. Pre-2018 Net Operating Losses Expiring this Year | F. |
| G. Pre-2018 Net Operating Losses Carried Forward | G. |

Unrelated Business Income Activity with Income	Code	Net Income	Allocated Pre2018 NOL
1. Unrelated Business Activity	812900	1. 4,518	
2.		2.	
3.		3.	
4.		4.	
5.		5.	
6.		6.	
7.		7.	
8.		8.	
9.		9.	
10.		10.	
11.		11.	
12.		12.	
13.		13.	
14.		14.	
15. All other revenue		15.	
16. Total taxable income		16. 4,518	

Business Activity Losses

Unrelated Business Income Activity with Losses	Code	Current Year Loss
1.		1.
2.		2.
3.		3.
4.		4.
5. All other activities		5.
6. Totals		6.

Form **990****Two Year Comparison Report****2019 & 2020**

For calendar year 2020, or tax year beginning

, ending

Name

Taxpayer Identification Number

SoulMedic Media Group, Inc.**27-2417633**

		2019	2020	Differences
Revenue	1. Contributions, gifts, grants	1. 850,291	1,216,088	365,797
	2. Membership dues and assessments	2.		
	3. Government contributions and grants	3.		
	4. Program service revenue	4.		
	5. Investment income	5.		
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7. 7,000	-905	-7,905
	8. Net income or (loss) from fundraising events	8. 15,519	-31	-15,550
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 12,145	11,336	-809
	12. Total revenue. Add lines 1 through 11	12. 884,955	1,226,488	341,533
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15. 98,329	100,992	2,663
	16. Salaries, other compensation, and employee benefits	16. 369,574	322,868	-46,706
	17. Professional fundraising fees	17.		
	18. Other professional fees	18. 15,981	7,350	-8,631
	19. Occupancy, rent, utilities, and maintenance	19. 38,856	39,396	540
	20. Depreciation and Depletion	20. 38,811	39,210	399
	21. Other expenses	21. 251,639	137,234	-114,405
	22. Total expenses. Add lines 13 through 21	22. 813,190	647,050	-166,140
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 71,765	579,438	507,673
Other Information	24. Total exempt revenue	24. 884,955	1,226,488	341,533
	25. Total unrelated revenue	25. 12,145	6,075	-6,070
	26. Total excludable revenue	26. 7,000	4,356	-2,644
	27. Total assets	27. 1,006,969	1,585,559	578,590
	28. Total liabilities	28. 24,057	23,209	-848
	29. Retained earnings	29. 982,912	1,562,350	579,438
	30. Number of voting members of governing body	30. 11	12	
	31. Number of independent voting members of governing body	31. 11	12	
	32. Number of employees	32. 43	40	
	33. Number of volunteers	33. 12	0	

Form **990T**

Two Year Comparison Report

2019 & 2020

For calendar year 2020, or tax year beginning , ending

Name

Taxpayer Identification Number

SoulMedic Media Group, Inc.

27-2417633

		2019	2020	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rent income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Income from controlled organizations (net of expense)	6.			
	7. Section 501(c)(7)(9)(17) organization income (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.	12,145	6,075	-6,070
	11. Total trade or business income. Combine lines 1 through 10	11.	12,145	6,075	-6,070
Expenses	12. Compensation of officers, directors, and trustees	12.			
	13. Other salaries and wages	13.	688	1,418	730
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Charitable contributions	18.			
	19. Depreciation and Depletion	19.			
	20. Contributions to deferred compensation plans	20.			
	21. Employee benefit programs	21.			
	22. Other deductions	22.		139	139
	23. Total deductions. Add lines 12 through 22	23.	688	1,557	869
	24. Net income (990T/first activity); Subtract line 23 from 11	24.	11,457	4,518	-6,939
25. Number of unrelated business activities for this return	25.	1	1		
26. Unrelated business taxable income from all trades	26.	11,457	4,518	-6,939	
27. Disallowed employee fringe benefits	27.				
28. Charitable contributions	28.				
29. Taxable income before NOL loss	29.	11,457	4,518	-6,939	
30. Net operating loss (pre-2018)	30.				
31. Specific deduction	31.	1,000	1,000		
32. Unrelated business taxable income.	32.	10,457	3,518	-6,939	
Tax & Credits	33. Income tax (corporate or trust)	33.	2,196	739	-1,457
	34. Proxy tax	34.			
	35. Other taxes	35.			
	36. Total taxes	36.	2,196	739	-1,457
	37. Other credits	37.			
	38. General business credit	38.			
	39. Credit for prior year minimum tax	39.			
	40. Total credits	40.			
	41. Net tax after credits	41.	2,196	739	-1,457
	42. Recapture taxes and 965 tax	42.			
43. Total Taxes	43.	2,196	739	-1,457	
Due/Refund	44. Prior year overpayment and estimated tax payments	44.		2,400	2,400
	45. Payment made with extension	45.			
	46. Backup withholding and foreign withholding	46.			
	47. Other payments	47.			
	48. Total payments	48.		2,400	2,400
	49. Balance due/(Overpayment)	49.	2,196	-1,661	-3,857
	50. Overpayment applied to next year	50.			
	51. Penalties	51.	85		-85
52. Total due/(Refund)	52.	2,281	-1,661	-3,942	

Form **SchM****Two Year Comparison for Unrelated Business Activity****2019 & 2020**

For calendar year 2020, or tax year beginning

, ending

Organization Name

SoulMedic Media Group, Inc.

Taxpayer Identification Number

27-2417633Unincorporated Business Income Tax Code: **812900**Activity: **Unrelated Business Activity**

		2019	2020	Differences	
Revenue	1. Gross profit/loss on business activities	1.			
	2. Capital gains/losses	2.			
	3. Income/loss from partnerships and S corporations	3.			
	4. Rental income (net of expense)	4.			
	5. Unrelated debt-financed income (net of expense)	5.			
	6. Interest, and other income from controlled organizations (net of expense)	6.			
	7. Investment income of specific organizations (net of expense)	7.			
	8. Exploited exempt activity income (net of expense)	8.			
	9. Advertising income (net of expense)	9.			
	10. Other income	10.	12,145	6,075	-6,070
	11. Total trade or business income. Combine lines 1 through 10	11.	12,145	6,075	-6,070
Expenses	12. Compensation of officers, directors, and trustees	12.	688	-688	
	13. Other salaries and wages	13.		1,418	1,418
	14. Repairs and maintenance	14.			
	15. Bad debts	15.			
	16. Interest	16.			
	17. Taxes and licenses	17.			
	18. Depreciation and Depletion	18.			
	19. Contributions to deferred compensation plans	19.			
	20. Employee benefit programs	20.			
	21. Other deductions	21.		139	139
	22. Total deductions. Add lines 12 through 22	22.	688	1,557	869
	23. Taxable income before deductions. Subtract line 23 from 11	23.	11,457	4,518	-6,939
	24. Deductible losses	24.			
	25. Unrelated business taxable income (loss)	25.	11,457	4,518	-6,939

Form 990	Tax Return History	2020
Name SoulMedic Media Group, Inc.		Employer Identification Number 27-2417633

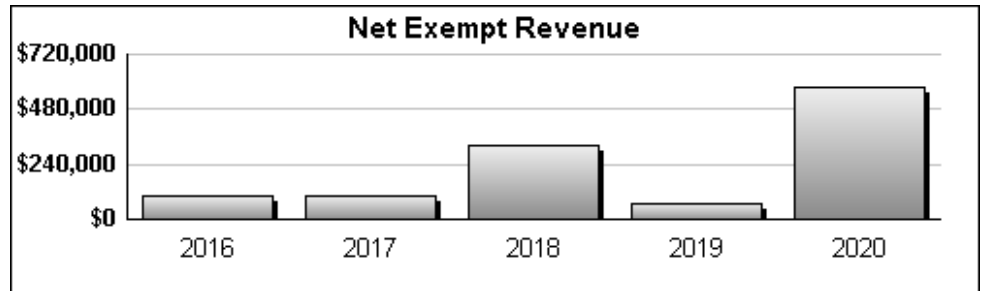
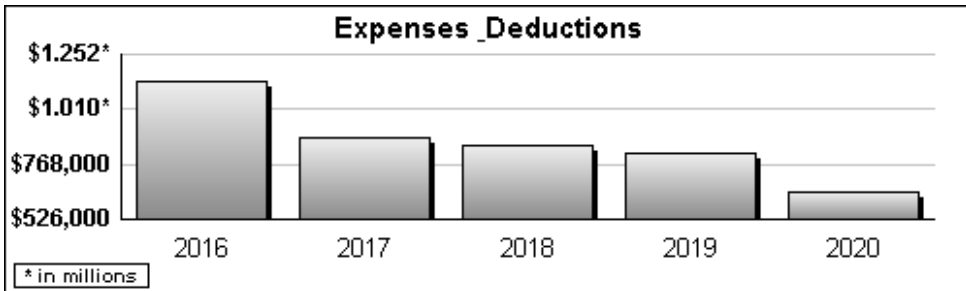
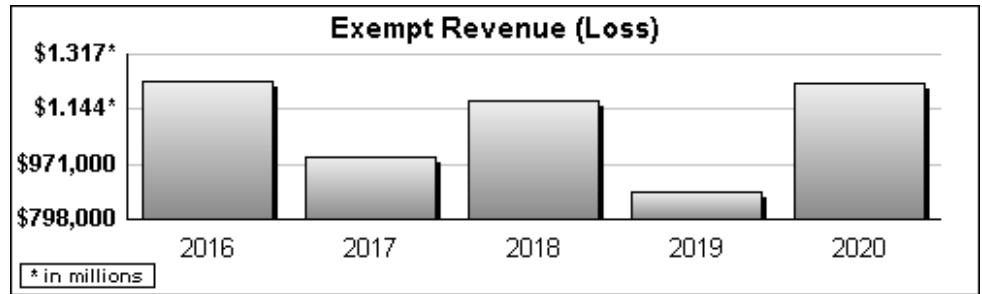
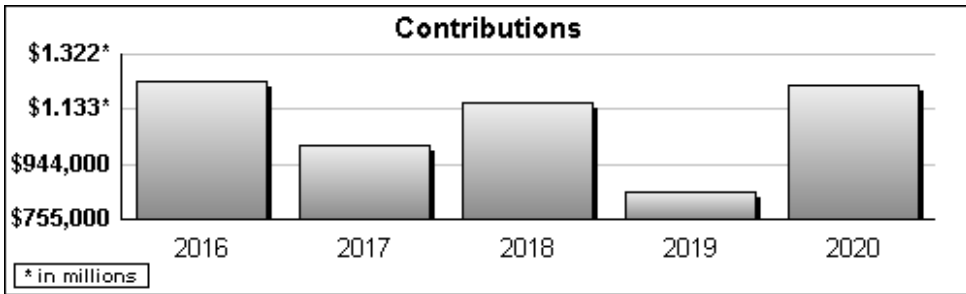
	2016	2017	2018	2019	2020	2021
Contributions, gifts, grants	1,228,435	1,009,405	1,157,407	850,291	1,216,088	
Membership dues						
Program service revenue						
Capital gain or loss	-1,167		50	7,000	-905	
Investment income						
Fundraising revenue (income/loss)	-21,245	-22,573	-1,377	15,519	-31	
Gaming revenue (income/loss)						
Other revenue	23,899	3,537	12,750	12,145	11,336	
Total revenue	1,229,922	990,369	1,168,830	884,955	1,226,488	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	84,790	93,561	93,560	98,329	100,992	
Other compensation	184,663	333,952	320,867	369,574	322,868	
Professional fees	9,841	13,141	11,608	15,981	7,350	
Occupancy costs	38,459	38,102	44,028	38,856	39,396	
Depreciation and depletion	57,035	49,763	49,363	38,811	39,210	
Other expenses	756,409	356,703	327,372	251,639	137,234	
Total expenses	1,131,197	885,222	846,798	813,190	647,050	
Excess or (Deficit)	98,725	105,147	322,032	71,765	579,438	
Total exempt revenue	1,229,922	990,369	1,168,830	884,955	1,226,488	
Total unrelated revenue				12,145	6,075	
Total excludable revenue	22,732	3,537	12,800	7,000	4,356	
Total Assets	572,949	602,644	927,549	1,006,969	1,585,559	
Total Liabilities	88,978	13,529	16,402	24,057	23,209	
Net Fund Balances	483,971	589,115	911,147	982,912	1,562,350	

Form 990T	Tax Return History	2020
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Name SoulMedic Media Group, Inc.	Employer Identification Number 27-2417633
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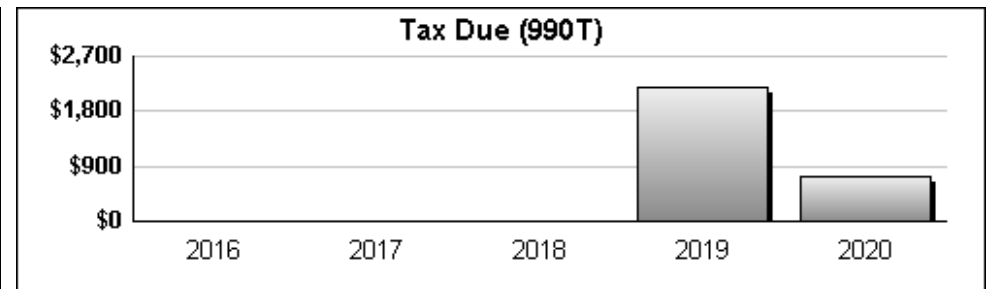
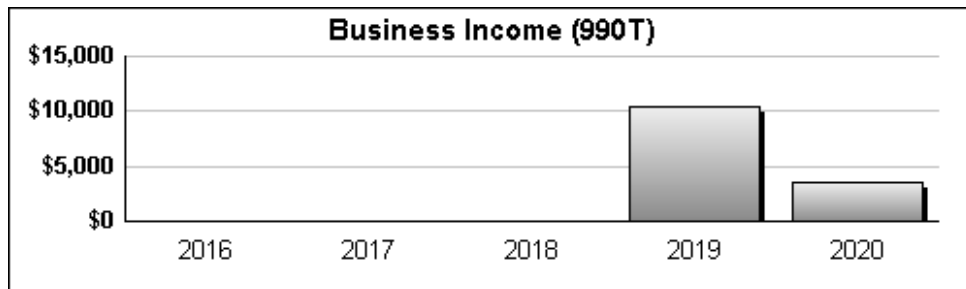
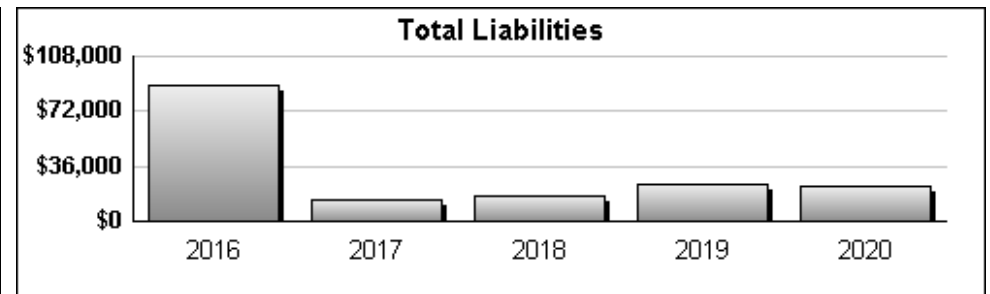
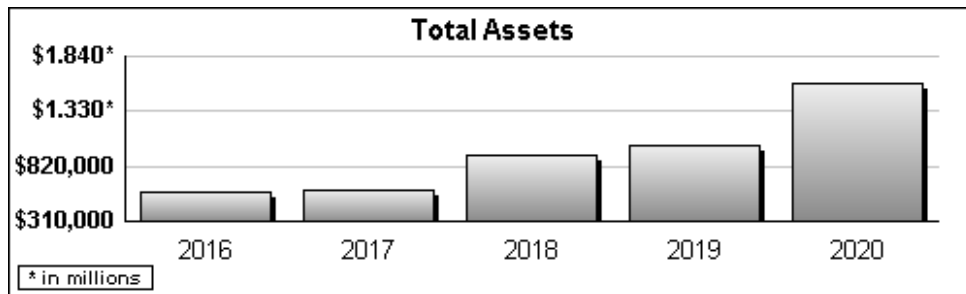
* Income shown net of expenses

	2016	2017	2018	2019	2020	2021
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*						
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income				12,145	6,075	
Total trade or business income.				12,145	6,075	
Compensation of officers, ect.						
Other salaries and wages				688	1,418	
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion						
Deferred compensation plans						
Employee benefit programs						



Form 990T	Tax Return History	2020
Name SoulMedic Media Group, Inc.		Employer Identification Number 27-2417633

	2016	2017	2018	2019	2020	2021
Other deductions					139	
Net income (990T/first activity)				11,457	4,518	
UBTI from all trades	0	0	0	11,457	4,518	
Taxable employee fringe benefits						
Charitable contributions						
Net operating loss deduction						
Specific deduction				1,000	1,000	
Income after expense and deductions				10,457	3,518	
Income tax (corporate or trust)				2,196	739	
Other taxes						
Total taxes				2,196	739	
General business credit						
Other credits						
Net tax after credits				2,196	739	
Estimated tax payments					2,400	
Other payments						
Balance due/Overpayment				2,196	-1,661	



Federal Statements**Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)**

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Miscellaneous	\$ 758	\$	\$ 758	\$
Total	<u>\$ 758</u>	<u>\$ 0</u>	<u>\$ 758</u>	<u>\$ 0</u>

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Payroll service fee	\$ 2,146	\$	\$ 2,146	\$
Repairs and maintenance	1,869	1,014	589	266
Bank fees	1,280			1,280
Events	809	800		9
Staff development	406		86	320
Cost of goods sold	260	260		
Total	<u>\$ 6,770</u>	<u>\$ 2,074</u>	<u>\$ 2,821</u>	<u>\$ 1,875</u>

Federal Statements**Texteractive****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
Design	\$ 259
Meeting	
Video	400
Labor	
Misc	495
Total	<u>\$ 1,154</u>