Form **990-T** (2018)

		Evenue Ouncellandian Bustana Income To But								OMB No 1545-0687		
For	Exempt Organization Business Income Tax I (and proxy tax under section 6033(e))						Return		2018			
	artment of the Treasury	i	▶Go to w		T for instru	tions	and ending and the latest inform		Ор	en to Public Inspection for		
<u> Inter</u>	rnal Revenue Service  Check box if	Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).						. J.50°	1(c)(3) Organizations Only			
* <u>A</u>	address changed  Exempt under section	Name of organization ( Check box if name changed and see instructions )  D Employer idea (Employees' true							ee instructions )			
ĺ	X 501( C)(3)	Print	DAIL CO	MMUNITY O	F USA	, I	NC					
ĺ	408(e) 220(e)	or		room or suite no If a P O				02-0	568	3841		
[	408A 530(a)	Туре	2976 Bt	JFORD HWY				E Unrelated bu	isines	ss activity code		
[	529(a)		City or town, state	or province, country, and	ZIP or foreign	postal c	ode	(See instructi	ons )	, ,		
C	Book value of all assets		DULUTH			GA	30096	53112	20	1		
	at end of year	F G	roup exemption	number (See instru	ictions ) 🕨		•					
	764,142	G C	heck organizatio	on type ▶ X 50	01(c) corpoi	ation	501(c) trust	401(a) trus	it	Other trust		
Н	Enter the number of the	organi	zation's unrelate	d trades or busines	sses. ▶1	Desc	ribe the only (or first	) unrelated trade o	r bus	siness here		
	<b></b>									nly one, complete		
	Parts I–V If more than	one, de	scribe the first in	the blank space at	t the end of	the p	revious sentence, co	omplete Parts I and	ı II, d	complete		
	Schedule M for each ac	ditional	trade or busine	ss, then complete F	Parts III-V					·· ···-		
1	During the tax year, wa If "Yes," enter the name	s the co and ide	rporation a subs entifying numbe	sidiary in an affiliate r of the parent corpo	ed group or	a pare	ent-subsidiary contro	olled group?		Yes X No		
J	The books are in care of	of <b>T</b>	AWEOO YI	JN, CPA	-		Т4	elenhone number	7	70-451-1850		
			le or Busine				(A) Income	(B) Expenses		(C) Net		
1a	Gross receipts or sale											
b	Less returns and allow			c Balance	•	1c		A STATE OF THE STA	-			
2	Cost of goods sold (S		A. line 7)			2						
3	Gross profit Subtract					3				15.17 37.70 416		
4a	Capital gain net incon				• •••	4a						
b	Net gain (loss) (Form 479	•	•	orm 4797)		4b		TIME WALLEY	***			
С	Capital loss deduction		. , ,	,		4c		**************************************				
5	Income (loss) from partnership			ent)		5		THE PARTY OF THE P	100			
6	Rent income (Schedu	le C)				6	22,92	7 22,4	104	523		
7	Unrelated debt-finance	ed inco	me (Schedule E	)		7						
8	Interest, annuities, royalti	es, and r	ents from controlle	d organization (Schedu	ule F)	8						
9	Investment income of a s	ection 50	1(c)(7), (9), or (17)	organization (Schedul	le G)	9						
10	Exploited exempt active	vity inco	me (Schedule I	)		10						
Ø1	Advertising income (S	Schedule	e J)			11				~		
<b>E12</b>	Other income (See in:	struction	ns, attach sched	ule)		12		The same of the sa		,		
B)	Total. Combine lines 3 through 12					13	22,92	<del>.                                    </del>				
	artilla Deduction	ns No	t Taken Else	where (See ins	structions	for	limitations on de business incom	ductions.) (Exc	ept	for contributions,		
71 34	Compensation of office				the uniter	aleu	business incom	e.)	4.4			
<del>4</del> 5	Salaries and wages	cis, une	sciois, and trust	ces (Schedule K)				-	14 15			
>.° ≥16	Repairs and maintena	ince	·				•	· -	16			
517	Bad debts			RECEI	VED.	1		-	17			
18	Interest (attach sched	ule) (se	e instructions)	[	<del></del>	o		-	18			
19	Taxes and licenses	, (	,	5 NOV 18	20/3	S2S		··	19			
20	Charitable contributions (	See instr	uctions for limitation	る NOV 18	20.9	أن			20			
21	Depreciation (attach F					쯨	21					
22	Less depreciation clai			elsewhere on retu	ն Մ۲	Ì	22a		22b	. 0		
23	Depletion		1		-,				23			
24	Contributions to defen	red com	pensation plans					T .	24			
25	Employee benefit prog	grams	•		_				25			
26	Excess exempt expen	ses (Sc	hedule I)		•			·	26			
27	Excess readership cos	sts (Sch	edule J)					27				
28	Other deductions (atta	ich sche	edule)						28			
29	Total deductions. Ad	d lines	14 through 28	•				. [	29			
30	Unrelated business ta							<u>-</u>	30	523		
31	Deduction for net oper	rating lo	ss arising in tax	years beginning on	or after Ja	nuary	1, 2018 (see instruc	ctions)	31	SALES PROBLEM		
22	Unrelated business to	vahla in	aanna Cubtraat	l 24 fram line 20			*		22	523		

	m 990-1 (2018) DAIL COMMUNITY OF USA, INC	<u> </u>			Page	<u> 2</u>
	art III   Total Unrelated Business Taxable income					
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see		1 1			_
	instructions)		33		52:	<u>3</u>
34	Amounts paid for disallowed fringes		34			_
35	Deductions for net operating loss arising in tax years beginning before January 1, 2018 (see		1 1			
	instructions) .		35	<u> </u>		_
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum		1			_
	of lines 33 and 34		36		52:	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)		37		1,000	<u>J</u>
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,					_
	enter the smaller of zero or line 36		38	,		0
	art IV Tax Computation					_
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	•	39			_
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on		<del></del>			
	the amount on line 38 from Tax rate schedule or Schedule D (Form 1041)		40			_
41	Proxy tax. See instructions	•	41			_
42	Alternative minimum tax (trusts only)		42			_
43	Tax on Noncompliant Facility Income. See instructions		43			_
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44			<u>0</u>
Pa	art V   Tax and Payments					_
45a	• • • • • • • • • • • • • • • • • • • •		]			
b	Other credits (see instructions) 45b		1 1			
C	General business credit Attach Form 3800 (see instructions)  45c		] [			
đ	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d		]			
e	Total credits. Add lines 45a through 45d		45e			
46	Subtract line 45e from line 44		46			_
47	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (att sch.)		47			_
48	Total tax. Add lines 46 and 47 (see instructions)		48			5
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 2		49			_
50a			10			-
b			1 1			
			1 1			
C			1 1			
d	0 0	·	łi			
e			1			
f	- the state of the		{ {			
g						
-4	Form 4136 Other Total ▶ <b>50g</b>					
51	Total payments. Add lines 50a through 50g	٠	51			_
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	<b>▶</b> ∐	52		<del></del>	_
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	•	53			<u>)</u>
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		54			_
55	Enter the amount of line 54 you want Credited to 2019 estimated tax ▶ Refun		55			_
Pa	art VII Statements Regarding Certain Activities and Other Information (see Instru	ictions)				_
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other	authority		Y	es No	,
	over a financial account (bank, securities, or other) in a foreign country? If "YES," the organization may ha FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "YES," enter the name of the foreign	ive to file	,	1		١
	here	Country		-	X	1
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to	n a fore	an taust?	, F	X	
	If "YES," see instructions for other forms the organization may have to file.	o, a 10101;	girador		+	7
58	Enter the amount of tax-exempt interest received or accrued during the tax year					_
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my li-	knowledge a	nd belief, it	IS		
Sig				May the IRS disci	iss this retu	7
Hei				with the preparer (see instructions)	shown belo	W
1161				X Yes	No	I
	Signature of officer Date Title  Print/Type preparer's name Preparer's signature Date	<del> </del>			<u> </u>	كِ
n., .	.   " ' '		Check	If PTIN		
Paid		/12/19				_
-	parer Film's name > Wesley & Associates, Atlanta Co.	Firm's	EIN P	20-06	93/6	ځ
JSE	Only 3700 Crestwood Parkway Ste 380		_			_
	Firm's address Duluth, GA 30096	Phone	no .	770-451		
				Form <b>990</b>	<b>-T</b> (2018	)

Forn	n 990-T (2018) DAIL CO	MMUNITY	OF	USA, IN	IC	1	02-0	568841	Page	<u> 3</u>	
Sch	redule A - Cost of Good	ls Sold. Ente	r met	hod of inve	ntory valua	ıtion ▶	·				
1	Inventory at beginning of year	1		6	Inventory at	end of	year		6		
2	Purchases	2		7 Cost of goods sold. Subtract			<b>78</b>				
3	Cost of labor	3			line 6 from li	ne 5 E	nter her	e and			
4a	Additional sec 263A costs				ın Part I, line	2		į~	7		
	(attach schedule)	4a		8	Do the rules	of sect	tion 263	A (with respect to	Yes M	 10	
þ	Other costs (attach schedule)	4b						red for resale) apply		T.	
5	Total. Add lines 1 through 4b	5			to the organ		_	, , , , , , , , , , , , , , , , , , , ,			
Sch	redule C - Rent Income	(From Real	Prope	erty and Pe				ed With Real Pr	operty)	_	
	ee instructions)	•	•	•		•	•		• • • •		
1. Des	scription of property		_							_	
(1)	OFFICE RENTAL									_	
(2)										_	
(3)											
(4)										_	
		2. Rent receive	d or accru	ieq							
	(a) From personal property (if the percen	tage of rent		(b) From real and	i personal propert	y (if the		3(a) Deductions dire	ctly connected with the income		
	for personal property is more than 109	% but not	р	ercentage of rent fo	or personal proper	ty exceed	is	ın columns 2(a) and 2(b) (attach schedule)			
	more than 50%)		ţ	50% or if the rent is	based on profit o	r income)		See	Statement 1		
(1)		22,927							22,40	4	
(2)										_	
(3)										_	
(4)											
Tota	<u> </u>	22,927	Total					(b) Total deductions	•		
(c) T	otal income. Add totals of colu	mns 2(a) and 2(	b). Ent	er				Enter here and on pag	e 1,		
	and on page 1, Part I, line 6, co				<u> </u>	22_	, 927	Part I, line 6, column (I	3) ► 22,40	4	
Sch	<u>redule E – Unrelated Del</u>	<u>bt-Financed</u>	Inco	<b>me</b> (see insti	ructions)					_	
			- 1	2 Gmss	income from or				nected with or allocable to		
	1. Description of debt-finance	d property	İ		to debt-financed			debt-financ	ed property		
			l	property (a			traight line depreciation	(b) Other deductions			
								(attach schedule)	(attach schedule)		
1)	N/A									_	
2)											
3)			-							_	
4)		<del> </del>						····		_	
	Amount of average     acquisition debt on or	Average adjusted ba of or allocable to	ISIS		. Column		7. Gr	oss income reportable	8. Allocable deductions		
		debt-financed proper	ty		divided column 5	ł		olumn 2 x column 6)	(column 6 x total of columns 3(a) and 3(b))		
	property (attach schedule)	(attach schedule)									
1)			$\rightarrow$			- %	<del></del>			—	
2)			+			%					
3)		<del>,</del>				%				—	
4)		<del></del>				%				_	
								here and on page 1, l, line 7, column (A).	Enter here and on page Part I, line 7, column (B		
	1_						1 0111	, iiio 7, coluilii (A).	r art i, illie r, coluillir (b	,	
Γota	lS Laividondo roccived deductio			_		▶ [				_	

Schedule F - Interest, Ani	nuities, Roya	alties, and R	ents F	rom Cont	rolled	Organiza	tions (see II	structio	ns)	
41 )		•		pt Controlle						
Name of controlled organization	ıdeı	2. Employer number	1	nrelated income ee instructions)		tal of specified ments made	5. Part of column included in the organization's great	controlling	6. Deductions directly connected with income in column 5	
(1) N/A						<u> </u>				
(2)							<del> </del>			
(3)					<del></del>		+			
(4)							<u> </u>			
Nonexempt Controlled Organiz	rations						<u> </u>			
				<del></del>	-			l		
7 Tavable Income		Net unrelated income ss) (see instructions)		9. Total of specified payments made		ıncluded ın	column 9 that is the controlling 's gross income	1	Deductions directly nected with income in column 10	
(1)										
(2)										
(3)										
(4)										
					_	Enter here	nns 5 and 10 and on page 1, 8, column (A)	Ente	d columns 6 and 11 r here and on page 1, I, line 8, column (B)	
Totals	<u> </u>	0 4: 504	/ \/ <del>-</del>	(0)		L		<u> </u>		
Schedule G – Investment	Income of a	Section 501	(c)(7),	(9), or (17)	) Orga	anization (	see instruction	ons)		
, 1. Description of income		2. Amount of it	ncome	directly	ductions connected schedule)		4. Set-asides attach schedule)		5. Total deductions and set-asides (col. 3 plus col. 4)	
(1) <b>N/A</b>	, -···· ·								<del>-,,</del>	
(2)			· · · · · · · · · · · · · · · · · · ·	<u> </u>						
(3)		· · · · · · · · · · · · · · · · · · ·								
(4)			-	†			<del></del>		<del></del>	
Totals .		Enter here and o Part I, line 9, col						Ent Pa	er here and on page 1, rt I, line 9, column (B).	
Schedule I – Exploited Exc	empt Activity	Income O	ther Ti	nan Adver	tisina	Income /	see instruction	ne)		
Genedale I - Exploited Ext		y income, o		Idii Advei	usniy	mcome (		115)	<u> </u>	
Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expension directly connected production unrelated business in	with n of ed	4. Net income (I from unrelated to or business (col 2 minus column If a gain, composts 5 through	rade umn 3) ute	5. Gross incom from activity the is not unrelate business incom	at attribu	penses lable to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) N/A										
(2)			. †	•	-+					
(3)				-			<del></del>		<del> </del>	
(4)							····			
Totals .	Foter bere and or pago 1, Part I, line 10 col. (A).	Enter here a payu 1, Pa line 10 col	und on Saill, (R)						Enter here and on page 1, Part II, line 26	
Schedule J - Advertising I	ncome (see	nstructions)	[2]	The Carlot of Carlot of Section 1967	year Thirty	・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・	A Charles of the September of 1, class of	IDEL PAR DIRECTOR	<u>-1</u>	
Rart I Income From I			a Con	solidated	Basis	}				
1. Name of penodical	2. Gross advertising income	3. Direct advertising	et	4. Advertising gain or (loss) (c 2 minus col 3) a gain, compucols 5 through	col If	5. Circulation income	6 Rea	dership sts	7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A		<u> </u>	· ·							
(2)	**************************************	<u> </u>	3					•		
(3)	<u> </u>		i i			<del></del>				
(4)										
Totals (carry to Part II, line (5))									3000 1000 7777	

Totals, Part II (lines 1-5)

Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.) 7. Excess readership 4. Advertising 2. Gross gain or (loss) (col costs (column 6 5. Circulation 6. Readership 3. Direct advertising 2 minus col 3) If minus column 5, but 1. Name of penodical advertising costs income costs a gain, compute not more than cols 5 through 7 column 4) (1) N/A (2) <u>(3)</u> (4) Totals from Part I Enter here and on Enter here and on Enter here and page 1, Part I, page 1, Part I, on page 1, line 11, col (A) line 11, col (8) Part II, line 27

Schedule K - Compensation of Officers, Direct	ctors, and Trustees (see instructions)							
1. Name	2. Title	Percent of time devoted to business	Compensation attributable to unrelated business					
(1) N/A		%						
(2)		%						
(3)		%						
(4)		%						
Total. Enter here and on page 1, Part II, line 14		<b>&gt;</b>						

Form **990-T** (2018)

02-0568841

## **Federal Statements**

## Statement 1 - Form 990-T, Schedule C, Column 3 - Deductions

Description	Deduction
OFFICE RENTAL Interest Repairs Utilities TELEPHONE	12,900 4,246 5,258
Total	22,404

## Form **4562**

Name(s) shown on return

Department of the Treasury
Internal Revenue Service (99)

## **Depreciation and Amortization**

(Including Information on Listed Property)

Attach to your tax return.

DAIL COMMUNITY OF USA, INC

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

OMB No 1545-0172

Attachment Sequence No

Identifying number

02-0568841

179

Business or activity to which this form relates Indirect Depreciation 图Part 图 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1,000,000 Maximum amount (see instructions) 2 Total cost of section 179 property placed in service (see instructions) 2 2,500,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If marned filing separately, see instructions (a) Description of property (b) Cost (business use only) 6 (c) Elected cost Listed property. Enter the amount from line 29 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 2017 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 TO MENTAL BANKS OF THE PARTY OF 13 Carryover of disaflowed deduction to 2019 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 Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions 14 Property subject to section 168(f)(1) election 15 3,388 Other depreciation (including ACRS) 16 MACRS Depreciation (Don't include listed property. See instructions.) Part III MACRS deductions for assets placed in service in tax years beginning before 2018 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2018 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (d) Recovery (a) Classification of property (e) Convention placed in (f) Method (g) Depreciation deduction period only-see instructions) 19a 3-year property 5-year property 7-year property C 10-year property 15-year property 20-year property 25-year property S/L 25 yrs Residential rental 27.5 yrs MM S/L property 27.5 yrs MM S/L MM Nonresidential real 39 yrs S/L property MM S/L Section C—Assets Placed in Service During 2018 Tax Year Using the Alternative Depreciation System 20a Class life 12-year b S/L 12 yrs. 30-year 30 yrs MM S/L d 40-year 40 vrs MM S/L Part IVI Summary (See instructions. Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter 26,572 here and on the appropriate lines of your return. Partnerships and S corporations—see instructions For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs