ŕ	,) = , p					٠.,	3 T	100712	· 1 /	19211 1
		ı				,	~ g	139312	~ [<i>[</i>	•
, 	990-T		Exempt Organiz	zation Busin	ess	Incom	e Tax F	Return	\vdash	OMB No 1545-0687
Forn	(and proxy tax under section 6033(e))							\neg	2018	
Dona	For calendar year 2018 or other tax year beginning 10/01/18, and ending 09/30/19 Go to www.irs.gov/Form990T for instructions and the latest information.							ᆀᆜ		
	irtment of the Treasury nal Revenue Service	Do n	ot enter SSN numbers on th	/ <i>Form9901</i> for instru his form as it may be	made	and the lat	est informa our organiza	ation.	Ope 3) 501	n to Public Inspection for
Ā	Check box if address changed		Name of organization (Check box if name chan					_	ation number
В	xempt under section	1	SOCIETY OF S		-		-			e instructions)
	K 501(C)(03)_	Print '	GEORGIA, INC	3.						
	408(e) 220(e)	or	Number, street, and room or suite	no If a P O box, see instru	ictions			58-0)9 <u>67</u>	972
	408A 530(a)	Туре	2050-C CHAME	BLEE TUCKE	R R	OAD		_		s activity code
L	529(a)		City or town, state or province, co	ountry, and ZIP or foreign				(See instru		1
CE	Book value of all assets		ATLANTA			30341	L	5311	<u> </u>	<u> </u>
а	t end of year		roup exemption number (S							
			heck organization type >	X 501(c) corpo			01(c) trust	401(a) tr		Other trust
		-	zation's unrelated trades of	r business <u>es</u> ▶⊥	Desci	ribe the or	ily (or first)	unrelated trade		
	RENTAL IN			anaga at the and at	i tha n		-1	manioto Deste I e		nly one, complete
			scribe the first in the blank I trade or business, then co	· ·	i ine pi	evious se	ntence, co	mpiete Parts i a	na II, c	complete
			progration a subsidiary in a	•	a nare	nt-subsidi	ary control	led group?		Yes X No
			entifying number of the par		a parc		ary control	ica group		P 103 110
	>									
			OREEN CARTER		_		Tel	lephone number	<u> • 6</u> '	<u>78-892-6160</u>
E Pa	rt Unrelate	d Trad	<u>le or Business Incor</u>	ne	,	1 (A)	ncome	(B) Expense		(C) Net
1a	Gross receipts or sale	es			ŀ					
b	Less returns and allo			Balance •	1c			THE THE LOCAL TO SELECT		
2	Cost of goods sold (S		•		2					
3	Gross profit Subtract				3					
4a	Capital gain net incor	•	•		4a					
b	•		I, line 17) (attach Form 4797)		4b 4c	<u> </u>	_/	of Four Horneson Transfer and		
С 5	Capital loss deduction income (loss) from partnership				5		/	Marchan Lon Vina Bank		
6	Rent income (Schedu		poration (attach statement)		6) shatasa manda sharan sang	14044401°;	
7	Unrelated debt-finance	•	me (Schedule E)		7		41,207	45	,532	-4,325
8			ents from controlled organization	on (Schedule F)	8					
9	•)1(c)(7), (9), or (17) organization		9					
10	Exploited exempt act				10					
11	Advertising income (S	Schedule	e J)		11					
12	Other income (See in	structio	ns, attach schedule)	•/	12	ļ		· 法定证据 20 经过 2017年17.3 · 法国际管理系统通过证据		
13	Total. Combine lines			<u>/</u>	13		41,207		,532	-4,32 5
	Teduction	ons No	ot Taken Elsewhere (st be directly connected	(See instruction:	s for I	limitation	ns on dec	ductions) (E:	kcept	for contributions,
14			ectors, and trustees (Sche				S IIICOITIE	<u> </u>	14	
15	Salaries and wages	oc13, uni	sciois, and trustees (ounce	730	MIIIN -	005			15	
16	Repairs and maintena	ance							16	
17	Bad debts			AUG 239 2	102U				17	
18	Interest (attach sched	dule) (se	e instructions)	J					18	-
19	Taxes and licenses			Kansas City	, MO	1			19	
20	Charitable contributions ((See instr	ructions for limitation rules)	-					20	
21	Depreciation (attach I	Form 45	62)				21	11,144		
22		imed on	Schedule A and elsewher	re on return			22a	11,144	22b	. 0
23	Depletion								23	
24	Contributions to defei		npensation plans						24	· · — — —
25	Employee benefit pro	-							25	
26	Excess exempt exper								26	<u></u>
27	Excess readership co								27	**
28 29	Other deductions (att.								28	
29 30	Total deductions. A		ୀ4 through 28 ncome before net operating	n Inse deduction Si	ihtraat	line 20 fra	m line 12		30	-4,325
30 31	/		oss arising in tax years beg	=				tions)	31	
32	,	-	ncome Subtract line 31 fro	-	uuai y	1, 2010 (occ mande	aona,	32	
DAA/	/		Act Notice, see instructio					 		Form 990-T (2018)
- 7			,							(==:.0)

	990-I/2018) SOCIETY OF ST. VINCENT DE PAUL	<u> 58-0967972</u>				Page 2
Pa	rtall Total Unrelated Business Taxable income	,				
33/	Total of unrelated business taxable income computed from all unrelated trades or	businesses (see	- }	•		
//	instructions)		L	33		
34	Amounts paid for disallowed fringes	1 1	L	34		
35	Deductions for net operating loss arising in tax years beginning before January 1,	2018 (see	- }	1 1		
	instructions)		L	35		
36	Total of unrelated business taxable income before specific deduction Subtract line	35 from the sum	Γ			
	of lines 33 and 34	, ,	4	36		0
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)		81	37		1,000
38	Unrelated business taxable income. Subtract line 37 from line 36 If line 37 is gr	eater than line 36.	\sim [
	enter the smaller of zero or line 36		1	38		0
Pa	rt IV Tax Computation			Ť		<u>~</u>
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	ол -	·			
	the amount on line 38 from Tax rate schedule or Schedule D (Form	1 1041)		40		
41	Proxy tax. See instructions	• • •	▶	41		_
42	Alternative minimum tax (trusts only)		ſ	42		
43	Tax on Noncompliant Facility Income. See instructions		1	43		
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		ſ	44		0
	ort V Tax and Payments					
45a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	45a				
b	Other credits (see instructions)	45b	\neg	- 1		
c	General business credit Attach Form 3800 (see instructions)	45c		- 1		
	•	45d	{			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	450	\dashv	امدا		
e	Total credits. Add lines 45a through 45d	•	ŀ	45e		
46	Subtract line 45e from line 44 Other taxes		ŀ	46		
47	Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (at	sch)	. }	47		
48	Total tax. Add lines 46 and 47 (see instructions)		ŀ	48		0
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k)	• •	ŀ	49		
50a	Payments A 2017 overpayment credited to 2018	50a				
þ	2018 estimated tax payments	50b		.		
C	Tax deposited with Form 8868	50c				
ď	Foreign organizations: Tax paid or withheld at source (see instructions)	50d	——			
е	Backup withholding (see instructions)	50e				
f	Credit for small employer health insurance premiums (attach Form 8941)	50f		. [
9	Other credits, adjustments, and payments Form 2439		- (. [
	Form 4136 Total ▶	50g		. 1		
51	Total payments. Add lines 50a through 50g			51		
52	Estimated tax penalty (see instructions) Check if Form 2220 is attached	•		52		
53	Tax due, if line 51 is less than the total of lines 48, 49, and 52, enter amount owe	d	▶	53		0
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount	unt overpaid	▶ [54		
<u>55</u>	Enter the amount of line 54 you want. Credited to 2019 estimated tax	Refunded		55		
P	art VI Statements Regarding Certain Activities and Other Inf	ormation (see instructi	ons)			
56	At any time during the 2018 calendar year, did the organization have an interest in over a financial account (bank, securities, or other) in a foreign country? If "YES,"	n or a signature or other aut	honty			Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "YES,"	the organization may have	to file			1
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "YES," entended here ▶	er the name of the foreign co	ountry			X
57	During the tax year, did the organization receive a distribution from, or was it the	trantor of or transferor to a	foreir	an truct	+2	X
•	If "YES," see instructions for other forms the organization may have to file	grantor or, or transferor to, a	, ioicié	jii uusi	, r	
<u>58</u>	Enter the amount of tax-exempt interest received or accrued during the tax year	<u> </u>				
	Under penalties of penjury Adeclare that I have examined this return, including accompanying schedules and	statements, and to the best of my know	dedon ni	nd belief.	ıt ıs	-
Sig	to a name of and Complete Designation of appropriate tables the second or board or all aforesting of the first	preparer has any knowledge				discuss this retur
He		1	21		with the preparation	discuss this retur arer shown below ons)?
, 16		BIRECTOR L'L			X Y	
	Signature of pfficed Date Title Propager's name Prepager's signature	Date		Chart	d PTIN	ليطنب
Paid	. 11. /	i	,,,,	Check	ן" ו∟	250000
				self-emp		259088
	Only 5607 GLENRIDGE DR STE 650	LLC	Firms	EIN P		161308
-36			١		404-ES	1 _ 4 0 4 0
	Firm's address ATLANTA, GA 30342-4959		Phone	no		31-4940
					rom 9	90-T (2018)

	990-T (2018) SOCIE						967972	Page 3		
<u>Sch</u>	edule A - Cost of Go	oods Sold. Ente	<u>r met</u>	thod of inve	ntory valuation I	<u> </u>				
1	Inventory at beginning of	year 1		6	Inventory at end of	year	Ļ	6		
2	Purchases	2		7	7 Cost of goods sold. Subtract 監視機					
3	Cost of labor	3			line 6 from line 5	Enter he	re and	हर्ति । जिस्सी एत्ट्रे क्ष्म्य प्रमुख्या मेर्ड्सिम् स्ट्रे		
4a	Additional sec 263A costs	<u> </u>			ın Part I, line 2		L	7		
	(attach schedule)	4a		8	Do the rules of sec	tion 263	A (with respect to	Yes No		
b	Other costs (attach schedule)	4b			property produced	or acqu	red for resale) apply			
5	Total. Add lines 1 through	n 4b 5			to the organization					
Sch	edule C - Rent Inco	me (From Real I	rop	erty and Pe	ersonal Propert	y Leas	sed With Real Pr	operty)		
(se	e instructions)									
1 Des	cription of property									
(1)	N/A									
(2)										
(3)										
(4)								<u> </u>		
	··· ··	2 Rent received	or accn	ued			1			
	(a) From personal property (if the p	percentage of rent		• •	d personal property (if the		1	ons directly connected with the income		
	for personal property is more the			-	or personal property excee		ın columns 2(a)) and 2(b) (attach schedule)		
	more than 50%)			50% or if the rent i	s based on profit or income	')				
(1)							ļ			
(2)		· · ·					 	· · · · · · · · · · · · · · · · · · ·		
(3)										
(4)		"								
<u>Total</u>			Total_				(b) Total deductions			
	otal income. Add totals of		b) En	ter	_		Enter here and on pag Part I, line 6, column (
	and on page 1, Part I, line edule E - Unrelated		Inco		tructions)		raiti, iiie o, coluitiii (
SCII	equie E - Officialed	Debt-Financeu	11100	ille (see illsi	iructions)	T	2. Dadustinan dimethi ees	nnected with or allocable to		
				2 Gros	s income from or	ST	•	ced property STMT 2		
	 Description of debt-fi 	inanced property		allocable	to debt-financed		Straight line depreciation	(b) Other deductions		
				property (a) S		(attach schedule)	(attach schedule)			
(1)	2050 CHAMBLEI	E TUCKER			46,831	1	11,144	40,603		
(1) (2)	2000 CIIIIDIDI	<u> 100mm</u>			10,031	1		10,000		
(3)						†				
(4)										
<u>.,</u>	4 Amount of average	5 Average adjusted ba	ISIS		6 Column	1	<u>" -, .</u>	8 Allocable deductions		
	acquisition debt on or allocable to debt-financed	of or allocable to debt-financed proper			4 divided		Gross income reportable	(column 6 x total of columns		
	property (attach schedule)	(attach schedule)	,	b	y column 5	"	column 2 x column 6)	3(a) and 3(b))		
(1)	877,625	997,	428		87.99%	4	41,207	45,532		
(2)					9	4				
(3)					9	4				
(4)					9	4				
	EE STATEMENT 3	SEE STATEMEN	T 4				here and on page 1,	Enter here and on page 1,		
						Part	I, line 7, column (A)	Part I, line 7, column (B)		
Tota	ls				•		41,207	45,532		
Tota	l dividends-received ded	luctions included in o	olumr	า 8			<u> </u>	1		

Form **990-T** (2018)

Schedule F - Interest, Ann	uities, Roya	alties, and F					ions (see in	structio	ns)	
			Exem	pt Controlled	Organiz	zations	·			
Name of controlled organization	ıde	2 Employer Identification number		nrelated income se instructions)	4 Total of specified payments made		5 Part of column 4 that included in the controllinorganization's gross income		6 Deductions directly connected with income in column 5	
(1) N/A			<u> </u>							
(2)										
(3)			1							
	<u> </u>		<u>† </u>							
Nonexempt Controlled Organiz	ations				-		<u> </u>			
THOREXCHIPT CONTROLLED CIGARIE	ations		Ī		T			Γ		
7 Tamable lassens			Net unrelated income 9. Total of species) (see instructions) payments ma		ed included in the		•		Deductions directly nnected with income in column 10	
(1)	i									
(2)								İ		
(0)										
(4)					<u> </u>			<u> </u>		
[4)			I		<u> </u>	Add column	ns 5 and 10	Add	d columns 6 and 11	
-							nd on page 1,	Ente	r here and on page 1, I, line 8, column (B)	
Totals Schedule G – Investment	maama af a	Section FO	4/0\/7\	(0) 0= (47)	Organ	inction (L		
Schedule G - investment	income of a	Section 50	1(C)(7),	(9), or (17)	Organ	ization (s	see instruction	ons)		
1. Description of income		2 Amount of income		3 Deductions directly connected (attach schedule)			4 Set-asides (attach schedule)		5 Total deductions and set-asides (col. 3 plus col. 4)	
(1) N/A		<u> </u>		1		- .				
(2)		ļ		1		_			F	
(3)										
(4)				menkashvise nila, laineemyl	THE METERS	ENICE THOUGH INCOME.	HUS IPHLE INVESTIGATION INC.	HIGENIAN		
Totals	•	Enter here and Part I, line 9, co						Ent Pa	er here and on page 1, rt I, line 9, column (B)	
Schedule I - Exploited Exc	empt Activit	y Income, C	Other TI							
-										
1 Description of exploited activity	2 Gross unrelated business incom from trade or business	3 Expe direc connecte producti unrela business	tly ed with ion of ited	4 Net income (los from unrelated tra or business (colur 2 minus column 3 If a gain, comput cols 5 through 7	mn fr 3) ::	Gross income om activity that is not unrelated usiness income	t attribut	penses table to mn 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
(1) N/A							- 			
(2)		+	+		-	-			+	
(3)									+	
Enter here and o page 1, Part I, line 10, col (A)		on Enter here and on page 1, Part I, line 10, col (B)							Enter here and on page 1, Part II, line 26	
Totals •								NAME OF THE OWNER, THE	<u></u>	
Schedule J – Advertising				11.1 . 4 1 . 5					·	
Part Imcome From	Periodicals	Reported o	n a Con	isolidated E	<u> sasıs</u>					
1 Name of periodical	2 Gross advertising income	3 Din advertisin		4 Advertising gain or (loss) (cc 2 minus col 3) a gain, compute cols 5 through 7	lf ÷	5 Circulation income	l l	dership sts	7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A			ij		ing gran					
(2)	1	 							The state of the s	
(3)		- 								
(4)	· · - · ·		i.	n a-mainta anjar arandra istina pina.	=ris(=),_i		- 		pay and a garage and a second a	
Totals (carry to Part II, line (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) 4 Advertising 7. Excess readership 2 Gross gain or (loss) (col costs (column 6 3 Direct 5. Circulation 6 Readership advertising 2 minus col 3) If minus column 5, but 1 Name of periodical advertising costs ıncome . costs ıncome a gain, compute not more than cols 5 through 7 column 4) (1) $\overline{N/A}$ (2) (3) (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 (B) Part II, line 27 Totals, Part II (lines 1-5)

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)							
1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business				
(1) N/A		%					
(2)		%					
(3)		%					
(4)		%					
Total. Enter here and on page 1, Part II, line 14							

Form **990-T** (2018)

58-0967972

Federal Statements

Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation

Description	<u>Deduction</u>
2050 CHAMBLEE TUCKER	
	11,144
TOTAL	11,144

Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

Description	<u>Deduction</u>
2050 CHAMBLEE TUCKER	
MANAGEMENT FEES	455
INTEREST	11,746
REPAIRS	983
UTILITIES	392
PROPERTY TAXES	13,327
SALARIES AND WAGES '	13,700
TOTAL	40,603

Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

Description	Deduction
2050 CHAMBLEE TUCKER SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	3,510,500
AVERAGE ACQUISITION DEBT	877,625

Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

Description	Deduction
2050 CHAMBLEE TUCKER	
ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD	1,003,000
ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	991,856
	1,994,856
DIVIDED BY 2	2
AVERAGE ADJUSTED BASIS	997,428