Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2019 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

For	cale	ndar year 2018 or tax year beginning		, and ending		
Na	me o	f foundation	A Employer identification	number		
	ES	LEY HOME SERVICES, INC.	62-1642972			
		and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
_		5 APPLING ROAD	_ - _		901-380-49	00
		town, state or province, country, and ZIP or foreign p.DOVA, TN 38016	ostal code		C If exemption application is p	ending, check here
		k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
•		Final return	Amended return	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		· —-
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test, mputation
H_	_	k type of organization: X Section 501(c)(3) ex	• •	04	E If private foundation sta	tus was terminated
			Other taxable private founda		under section 507(b)(1)	(A), check here
		arket value of all assets at end of year J Accounts Part II, col. (c), line 16) 01	ng method: L Cash ther (specify)	X Accrual	F If the foundation is in a under section 507(b)(1)	
	-\$	779, 426. (Part I, colum	nn (d) must be on cash basis	s.)		(b), check liefe
_	art I		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	650,000.			
2	2	Check If the foundation is not required to attach Sch. B. Interest on savings and temporary				
1	4	cash investments Dividends and interest from securities				1
,	5a	a Gross rents				i
	l t	Net rental income or (loss)				
	, 6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
_] _t	assets on line 6a		0.		
2020	7 8	Capital gain net income (from Part IV, line 2)		<u> </u>	0.	
	9	Net short-termpeapital gain IVED Income modulications				i
LAW 0 I	10a	Gross sales less returns and allowandes				
₹	b	Less Cost of goods sold 2 U 2019	,]
	1	Gross profit or (loss)	6EO 614	0.	650 614	CONTRACTOR 1
	11 12	Other Income OGDEN, UT	659,614.	0.	659,614. 659,614.	STATEMENT 1
Ž —	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
SCANNED -	14	Other employee salaries and wages	453,315.	0.	0.	453,312.
		Pension plans, employee benefits	36,381.	0.	0.	36,381.
Š	16a	Legal fees	6 005		2 275	4 550
		Accounting fees STMT 2 Other professional fees STMT 3	6,825.	0.	2,275.	4,550. 12,663.
ú	17	other professional fees STMT 3	12,005.			12,003.
	18	Taxes STMT 4	37,121.	0.	0.	37,121.
1	19	Depreciation and depletion	686.	0.	686.	
, ‡	20	Occupancy	15.550		18 850	
,	21	Travel, conferences, and meetings	17,752.	0.	17,752.	0.
ב ה ה	22	Printing and publications Other expenses STMT 5	57,897.	0.	7,407.	50,490.
	24	Total operating and administrative	3,703.1		7,2010	30,2301
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		expenses. Add lines 13 through 23	622,640.	0.	28,120.	594,517.
	25	Contributions, gifts, grants paid	0.			0.
7	26	•	622 640	^	20 120	E04 E17
57	27	Add lines 24 and 25 Subtract line 26 from line 12,	622,640.	0.	28,120.	594,517.
	27 a	SUBTRACT line 26 from line 12. Excess of revenue over expenses and disbursements	686,974.		,	
7		Net investment income (If negative, enter -0-)		0.		
7 <u>'</u>		Adjusted net income (if negative, enter -0-)			631,494.	
823	01 12	2-11-18 LHA For Paperwork Reduction Act Notice	saa instructions			Form 990-PF (2018)

LHA For Paperwork Reduction Act Notice, see instructions.

	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	128,237.	591,122.	591,122.
	2	Savings and temporary cash investments			
	3	Accounts receivable ► 163,573.			
		Less: allowance for doubtful accounts	111,102.	163,573.	163,573.
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ß	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	37,608.	24,317.	24,317.
As	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock		-	
	C	Investments - corporate bonds			
	11	tovestments - land, buildings, and equipment basis			
		Less accumulated depreciation	•		<u> </u>
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ► 9,881. Less accumulated depreciation STMT 7 ► 9,467.			
		Less accumulated depreciation STMT 7 ▶9,467.	479.	414.	414.
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	277,426.	779,426.	779,426.
	17	Accounts payable and accrued expenses	251,970.	79,646.	1
	18	Grants payable			ļ
Ş	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			<u> </u>
iabi	21	Mortgages and other notes payable			<u> </u>
_	22	Other liabilities (describe)			<u> </u>
	23	Total liabilities (add lines 17 through 22)	251,970.	79,646.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.	05 456	600 500	
Net Assets or Fund Balances		Unrestricted	25,456.	699,780.	
ılan	25	Temporarily restricted			
i Ba	26	Permanently restricted			
nug		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31.]
ts c	27	Capital stock, trust principal, or current funds			<u> </u>
sse	28	Paid-in or capital surplus, or land, bldg., and equipment fund			<u> </u>
ţ	29	Retained earnings, accumulated income, endowment, or other funds	25 456	600 700	
ž	30	Total net assets or fund balances	25,456.	699,780.	
	١		277 426	779,426.	1
_	31	Total liabilities and net assets/fund balances	277,426.	119,420.	<u> </u>
P	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	25,456.
	•	amount from Part I, line 27a		2	686,974.
		r increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	712,430.
5	Decr	eases not included in line 2 (itemize)	SEE ST	ATEMENT 6 5	12,650.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	699,780.

(a) List and describe 2-story brick w	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donation					d (c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
<u>1a</u>					<u> </u>		\perp		
b NO	ONE				ـ		\perp		
C		-			₩	_	+		-
<u>d</u>					+-		+		
<u>e</u>	10.5		(1) 0-1	-44b b	٠.,			(1) Com on (1)	
(e) Gross sales price	(1) (Pepreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (lo (e) plus (f) min)	
a	1								<u> </u>
b							•		
C									
d									
<u>e</u>									
Complete only for assets show	ing gain in o	column (h) and owned by t	he foundation	on 12/31/69.				Gains (Col. (h) g	
(i) FMV as of 12/31/69	(j) Adjusted basis		cess of col. (I)				k), but not less Losses (from co	
	ļ	as of 12/31/69	over	col. (j), if any					
<u>a</u>	 	,							
<u>b</u>	 								
	†							<u>.</u>	
e									
<u></u>	1	C If goin, also anton	un Dort I. lino	7	7	_			
2 Capital gain net income or (net o	apital loss)	If gain, also enter If (loss), enter -0	- in Part I. line	, :7	<u> </u>	2			
3 Net short-term capital gain or (le	nee) ae defu	•		•					
If gain, also enter in Part I, line 8			u (<i>u)</i> .		ال				
If (loss), enter -0- in Part I, line	8					3			
		ection 4940(e) for					Incor	ne	
(For optional use by domestic priva	te foundatio	ns subject to the section 4	940(a) tax on	net investment in	come	.)			
If section 4940(d)(2) applies, leave	this part bla	ınk.							
Was the foundation liable for the se If "Yes," the foundation doesn't qual				•	1007				Yes X No
1 Enter the appropriate amount in					ntries.				
(a) Base period years		(b)			(c)			T	(d) tribution ratio
Base periód years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist	tributions	Net value of no			ssets	(col. (b)	tribution ratio divided by col. (c))
2017		75	9,543.			5,9	93.		126.738361
2016	Ì	96	8,191.						172.061667
2015		74	8,825.			2,1	14.		354.221854
2014			0.				0.		.000000
2013			0.				0.		.000000
2 Total of line 1, column (d)								2	653.021882
3 Average distribution ratio for the			on line 2 by 5.0), or by the numb	er of y	ears .			120 604286
the foundation has been in exist	ence if less	than 5 years						3	130.604376
			_						17 004
4 Enter the net value of noncharita	ble-use ass	ets for 2018 from Part X, I	ine 5					4	17,984.
F. Marihania lana 4 harabana 0								_	2 3/0 700
5 Multiply line 4 by line 3								5	2,348,789.
C Enter 10/ of not investment inco	ma /10/ af [Part L lina 27h)							0.
6 Enter 1% of net investment inco	me (1% of F	rart I, line 270)						6	<u> </u>
7 Add lines 5 and 6] 7	2,348,789.
, ridu lilitos o aritu ti							- ' 	2,010,100.	
8 Enter qualifying distributions fro	m Part XII	line 4						8	594,517.
If line 8 is equal to or greater that			1h and comp	lete that part usin	n 2 10	% tay rate			
See the Part VI instructions.	<i>1</i> , 611	oon the box his all vi, lille	io, and comp	ioto tiiat part usiii	iy a 17	יי ופא ומוכ.			

		429/2		Page 4			
		e ilistruc	LIOIT	"	i		
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			- 1	ĺ		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%			0.	i		
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			ـــِـا	i		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.	,		
3	Add lines 1 and 2	-		0.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u>0.</u>			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.			
6	Credits/Payments:				ĺ		
	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0.						
	Exempt foreign organizations - tax withheld at source				ĺ		
	Tax paid with application for extension of time to file (Form 8868) 6c 0.			j	Ì		
	Backup withholding erroneously withheld 6d 0.			 _	ı		
7	Total credits and payments. Add lines 6a through 6d			0.			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			0.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						
	Enter the amount of line 10 to be: Credited to 2019 estimated tax				,		
_	rt VII-A Statements Regarding Activities	· -	N	NI -			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes				
	any political campaign?	<u>1a</u>		X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	-	X	I		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				i		
	distributed by the foundation in connection with the activities.						
	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	X,	i		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				1		
	managers. ► \$0.			اا			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X			
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			 -			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X			
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	$\vdash \vdash$	<u> </u>			
	If "Yes," has it filed a tax return on Form 990-T for this year?		$\vdash \vdash$	Х			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	$\vdash \vdash$				
	If "Yes," attach the statement required by General Instruction T	ľ					
b	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1			
	By language in the governing instrument, or Provided to a state for the first with the state form. By the language in the governing instrument, or			1			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law	<u> </u>	X				
_	remain in the governing instrument?	6	X	-			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7					
	Colored to the state of the foundation and the state of t			· [
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.	-					
	TN			, İ			
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	- <u>-</u> -		ــا			
_	of each state as required by General Instruction G? If "No," attach explanation	8b	Х		_		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar				7		
46	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9_	$\vdash\vdash\vdash$	X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10					

Form **990-PF** (2018)

Page 5

Form	1 990-PF (2018) WESLEY HOME SERVICES, INC. 62	-1642972		Page 5
Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
• •	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileg			
12	If "Yes," attach statement. See instructions	12		x
12	·	13	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	[13]		<u> </u>
	Website address \blacktriangleright N/A The books are in care of \blacktriangleright DONALD D. OLLIO, JR. Telephone no. \blacktriangleright 9	01_390_4	900	
14		<u>01-380-4</u> +4 ▶38016	900	
	, <u> </u>	+4 <u>►36016</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	1 33	· / ¬ ►	•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	- No
16			Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country			1
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available	_		1
	for the benefit or use of a disqualified person)?	X No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			1
	If the foundation agreed to make a grant to or to employ the official for a period after	ŀ		
	termination of government service, if terminating within 90 days.)	X No		
	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
		N/A 1b		
				\vdash
_				
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			$\frac{x}{x}$
_	before the first day of the tax year beginning in 2018?	<u>1c</u>		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018?	K No		
	If "Yes," list the years \blacktriangleright			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)	N/A <u>2b</u>		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
)			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	X No		1
b	of "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	-		
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	,		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
		N/A 3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	 1		
	had not been removed from recognity before the first day of the tax year beginning in 2018?	4h		<u>x</u>

Form **990-PF** (2018)

Total number of other employees paid over \$50,000

Form 990-PF (2018) WESLEY HOME SERVICES, INC.	62-1	642972 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
-		
· <u></u>		
		
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	Il information such as the	Expenses
1 TO PROVIDE NON MEDICAL HOME SERVICES TO ASSIST	·	
"PRIMARILY ELDERLY" IN THEIR HOMES TO PREVENT		
CARE, INCLUDING THOSE RECEIVING MEDICAID BENEF		594,517.
2		
	,	
3		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1 <u>N/A</u>		
	-	
2		
All other program-related investments. See instructions.		
3		
	i	

Form **990-PF** (2018)

Total. Add lines 1 through 3

Page 8

WESLEY HOME SERVICES, INC.

Į.	art/X Minimum Investment Return (All domestic foundations must complete this part. Foreign	1 foun	dations, see	e instructions.)
1	Fair, market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
а	Average monthly fair market value of securities		1a	0.
b	Average of monthly cash balances		1b	359,679.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	359,679.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	359,679.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	9	4	341,695.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	17,984.
6	Minimum investment return. Enter 5% of line 5		6	899.
P	art:XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundation	ns an	d certain	
	foreign organizations, check here 🕨 🗶 and do not complete this part.)			
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2018 from Part VI, line 5			
b	Income tax for 2018. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	
ΠP	art·XII] Qualifying Distributions (see instructions)			
-				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	594,517. 0.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:			
a	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4		4	594,517.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	594,517.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	ition q	ualifies for the	e section
	4940(e) reduction of tax in those years.			

Form **990-PF** (2018)

Part XIII Undistributed Income (see	instructions)	N/A		
•	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,				
line 7				
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only				
b Total for prior years:				
,		l		
3 Excess distributions carryover, if any, to 2018.				
a From 2013				<u> </u>
b From 2014				
c From 2015		İ		
d From 2016				
e From 2017		ì		
f Total of lines 3a through e				
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$				
a Applied to 2017, but not more than line 2a		· · · · · · · · · · · · · · · · · · ·		
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				· · · · · · · · · · · · · · · · · · ·
(Election required - see instructions)				
d Applied to 2018 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018				
(If an amount appears in column (d), the same amount				
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		-		
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by		1		+
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)				
8 Excess distributions carryover from 2013		1		!
not applied on line 5 or line 7				
9 Excess distributions carryover to 2019.				- <u>-</u>
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:	· —————			
a Excess from 2014				
b Excess from 2015				,
c Excess from 2016				
d Excess from 2017				•
e Eyress from 2018				

	<u>HOME SERVICE</u>		 	<u>62-16</u>	42972 Page 10
Part XIV Private Operating Fo	oundations (see ins	tructions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling of	r determination letter that i	t is a private operating			
foundation, and the ruling is effective for	2018, enter the date of th	e ruling	▶ <u></u>		
b Check box to indicate whether the found	ation is a private operating	foundation described in		1942(j)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed	899.	300.	281.	<u>/ 106.</u>	1,586. 1,348.
b 85% of line 2a	764.	255.	239.	90.	1,348.
c Qualifying distributions from Part XII,					
line 4 for each year listed	594,517.	759,543.	968,191.	748,825.	3,071,076.
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly			'		
for active conduct of exempt activities.					
Subtract line 2d from line 2c	594,517.	759,/543.	968,191.	748,825.	3,071,076.
3 Complete 3a, b, or c for the					
alternative test relied upon; a "Assets" alternative test - enter;					
(1) Value of all assets	,				0.
(2) Value of assets qualifying	/				
under section 4942(ı)(3)(B)(ı)					0.
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed	599.	200.	187.	71.	1,057.
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					_
512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt organizations as provided in					_
section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from					
an exempt organization					0.
(4) Gross investment income	<u> </u>			1.05.000	0.
Part XV Supplementary Info			the foundation na	ad \$5,000 or mor	e in assets
at any time during the	-	cuons.)			
1 Information Regarding Foundation	_				
a List any managers of the foundation who year (but only if they have contributed m			butions received by the fo	undation before the closi	e of any tax
	iore man 40,000). (See Sec	ulion 307 (u)(2).)			
NONE					
b List any managers of the foundation who other entity) of which the foundation has			r an equally large portion	of the ownership of a pa	rtnership or
- · ·	a 1070 of greater interest.	•			
NONE CONTRACTOR	0 0:4 1 0	Sabalanahin aka Dua			
2 Information Regarding Contribution Check here ► X if the foundation o				accept uppelleded requi	note for funds. If
the foundation makes gifts, grants, etc.,					ests for lunes. If
a The name, address, and telephone numb		••			<u> </u>
a The hame, address, and telephone humb	ier of email address of the	person to whom applica	IIVIIS SIIVUIU DE AUUI ESSEC	.	
b The form in which applications should b	e submitted and information	on and materials they sho	ould include:	. =	
c Any submission deadlines:			 · · ·		
				 	
d Any restrictions or limitations on awards	, such as by geographical	areas, charitable fields, k	unds of institutions, or oth	ner tactors:	

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation status of recipient Purpose of grant or contribution Amount any foundation manager or substantial contributor Name and address (home or business) a Paid during the year NONE ▶ 3a ٥. Total **b** Approved for future payment NONE **▶** 3b Total 0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
1 Program service revenue.	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a CLIENT SERVICE REVENUE					659,614.
b					
c			—		
d					
e			†		<u> </u>
f		-	1		
Fees and contracts from government agencies		-			· · · · · · · · · · · · · · · · · · ·
2 Membership dues and assessments			†		
3 Interest on savings and temporary cash					
investments	ŀ				
4 Dividends and interest from securities	-				
5 Net rental income or (loss) from real estate:		· · · · ·	†		
a Debt-financed property	-		+-		
b Not debt-financed property	<u> </u>		 		
6 Net rental income or (loss) from personal	-		†		
property			1		
7 Other investment income					
8 Gain or (loss) from sales of assets other			$\dagger -$		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory	-				
1 Other revenue:			 		
a b	_				
	-		1		
c					
d					<u> </u>
2 Subtotal. Add columns (b), (d), and (e)	 	0.	\vdash	0.	659,614.
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	659,614.
See worksheet in line 13 instructions to verify calculations.)				13	037,014.
· · · · · · · · · · · · · · · · · · ·					· · · · ·
Part XVI-B Relationship of Activities t	o the Acco	mplishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which inco	me is reported in	column (a) of Part Y\/I-A	contrib	uted importantly to the accomp	alichment of
the foundation's exempt purposes (other than			COILLID	ated importantly to the accomp	Monnent of
A FEES COLLECTED FROM SEF			TITE	NTS SUCH AS NO	N-MEDICAL
HOME CARE.			<u></u>	THE BOOM IND IN	M HEDICHE

		Y HOME S					642972	Pa	ige 13
Part)			nsfers to a	nd Transactions a	nd Relation	ships With Nonch	naritable		
	• Exempt Organ						_	152	
	the organization directly or indi					section 501(c)		Yes	No
	ner than section 501(c)(3) organ				•				
	nsfers from the reporting found	ation to a nonchar	itable exempt or	ganization of:					<u> </u>
(1)	Cash						1a(1)		X
(2)	Other assets						1a(2)		Х
-	er transactions;						<u> </u>		
٠,٠	Sales of assets to a noncharita	· -					1b(1)		X
٠,,	Purchases of assets from a no	·	t organization				1b(2)	-	X
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements						<u>1b(4)</u>		X
	Loans or loan guarantees						1b(5)		X
	Performance of services or me	·	-				1b(6)		X
	ring of facilities, equipment, ma						1c		X
	e answer to any of the above is							ets,	
	ervices given by the reporting f			ed less than fair market val	ue in any transac	tion or sharing arrangeme	nt, show in		
	ımn (d) the value of the goods,	, _		<u> </u>					
(a) Line no	(b) Amount involved	(c) Name		e exempt organization	(d) Descri	ption of transfers, transactions,	and sharing arr	angemen	its
	 		N/A						
				 					
							- <u>-</u>		
		<u> </u>							
									
		ļ							
	<u> </u>				_				
	<u> </u>	<u> </u>							
2a Is th	ne foundation directly or indirec	tly affiliated with, o	or related to, one	e or more tax-exempt organ	izations describe	d			_
ın s	ection 501(c) (other than sectio	n 501(c)(3)) or in	section 527?				Yes	<u>X</u>	No
b If "Y	es," complete the following sch				<u></u>				
	(a) Name of org	ganization		(b) Type of organization		(c) Description of rela	tionship	_	
	N/A								
					 				
					ļ				
				I	<u> </u>				_
[Under penalties of perjury, I declare to and belief, it perfrue, correct, and corr						May the IRS o		
Sign		000	(2010) 61001				return with the shown below	? See ins	er etr
Here	Klonald W	Welle)_	-	11/13/2019			X Yes		No
	(Signature of officer or trustee			(Date)	Title	 			
	Print/Type preparer's na		Preparer's s	ignature	Date		TIN		
	STEPHANIE	L.	ı		1	self- employed			

STEPHANIE L. LIVI 11/12/19

Form **990-PF** (2018)

P00235829

Firm's EIN ► 62-1657946

Phone no. 901-685-7500

Paid

Preparer

Use Only

LIVINGSTON, CPA

Firm's name ► CANNON WRIGHT BLOUNT PLLC

MEMPHIS, TN 38120

Firm's address ▶ 756 RIDGE LAKE BLVD, SUITE 100

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

Name of the organization Employer identification number WESLEY HOME SERVICES, INC. 62-1642972 Organization type (check one)

Filers of:		Section:
Form 990) or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 990	י פר	X 501(c)(3) exempt private foundation
roilli 990	rrr	
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
		covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General	Rule	
	=	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II. See instructions for determining a contributor's total contributions
Special F	Rules	
	sections 509(a)(1) a any one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from , during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the y to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
	-	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization

Employer identification number

	WESLEY	HOME	SERVICES,	INC.
--	--------	------	-----------	------

62-1642972

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ST. PETER MANOR LLC 108 N AUBURNDALE ST MEMPHIS, TN 38104	\$ 650,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

WESLEY HOME SERVICES, INC.

62-1642972

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization **Employer identification number** 62-1642972 WESLEY HOME SERVICES, Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF	OTHER	INCOME	S	TATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
CLIENT SERVICE REVENUE	_	659,614.	0.	659,614.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	659,614.	0.	659,614.
FORM 990-PF	ACCOUNT	ING FEES	s	TATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	6,825	. 0.	2,275.	4,550.
TO FORM 990-PF, PG 1, LN 16B	6,825	. 0.	2,275.	4,550.
=				
=	(A) EXPENSES PER BOOKS	SSIONAL FEES (B) NET INVEST- MENT INCOME	(C) ADJUSTED	TATEMENT 3 (D) CHARITABLE PURPOSES
FORM 990-PF C	(A) EXPENSES	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE
FORM 990-PF CODESCRIPTION PROFESSIONAL SERVICES	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME 0	(C) ADJUSTED NET INCOME 0. 0.	(D) CHARITABLE PURPOSES
FORM 990-PF CO	(A) EXPENSES PER BOOKS 600 12,063	(B) NET INVEST- MENT INCOME 0	(C) ADJUSTED NET INCOME 0. 0.	(D) CHARITABLE PURPOSES 600. 12,063.
FORM 990-PF COMESCRIPTION PROFESSIONAL SERVICES MANAGEMENT FEES TO FORM 990-PF, PG 1, LN 16C	(A) EXPENSES PER BOOKS 600 12,063	(B) NET INVEST- MENT INCOME 0 0	(C) ADJUSTED NET INCOME 0. 0.	(D) CHARITABLE PURPOSES 600. 12,063.
FORM 990-PF DESCRIPTION PROFESSIONAL SERVICES MANAGEMENT FEES TO FORM 990-PF, PG 1, LN 16C FORM 990-PF	(A) EXPENSES PER BOOKS 600 12,063 12,663 TAX	(B) NET INVEST- MENT INCOME 0 0 0 KES (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME 0. 0. 0. ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 600. 12,063. 12,663. TATEMENT 4 (D) CHARITABLE

FORM 990-PF	OTHER E	XPENSES	Si	FATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	32,169.	0.	0.	32,169.
ADVERTISING AND MARKETING	1,412.	0.	0.	1,412.
TELEPHONE	2,421.	0.	807.	1,614.
I.T. EXPENSE	14,014.	0.	4,671.	9,343.
OFFICE EXPENSE	4,965.	0.	1,655.	3,310.
POSTAGE	53.	0.	18.	35.
DUES & SUBSCRIPTIONS	768.	0.	256.	512.
LICENSES/PERMITS	2,095.	0.	0.	2,095.
TO FORM 990-PF, PG 1, LN 23	57,897.	0.	7,407.	50,490.

FORM 990-PF OTHER DECREASES IN	NET ASSETS OR F	UND BALANCES	STATEMENT 6
DESCRIPTION			AMOUNT
PRIOR YEAR ADJUSTMENT TO ACCRUED O	THER EXPENSE		12,650.
TOTAL TO FORM 990-PF, PART III, LI	NE 5		12,650.
FORM 990-PF DEPRECIATION OF ASSE	TS NOT HELD FOR	INVESTMENT	STATEMENT 7
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
TABLE TOP DISPLAY DELL LATITUDE LAPTOP COMPUTER LTC PAYROLL SOFTWARE SANDATA SOFTWARE SURFACE PRO3 SURFACE PRO3 & DOCKING STATION COMPUTER	1,483. 1,654. 2,016. 1,500. 898. 1,709. 621.	1,483. 1,654. 2,016. 1,500. 898. 1,709. 207.	0. 0. 0. 0. 0. 414.
TOTAL TO FM 990-PF, PART II, LN 14	9,881.	9,467.	414.

FORM 990-PF	PART VIII - TRUSTEES	LIST OF OFF AND FOUNDAT	ICERS, D ION MANA	IRECTORS GERS	STAT	EMENT 8
NAME AND ADDRESS		TITL AVRG	E AND HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
DR. CYNTHIA DAVIS 1615 APPLING ROAD CORDOVA, TN 38016		BOARD 2.	MEMBER 00	0.	0.	0.
DWIGHT DAVIS 1615 APPLING ROAD CORDOVA, TN 38016		BOARD :	MEMBER 00	0.	0.	0.
REV. ANDY THOMPSON 1615 APPLING ROAD CORDOVA, TN 38016	I	BOARD :	MEMBER 00	0.	0.	0.
AMANDA WARD 1615 APPLING ROAD CORDOVA, TN 38016		BOARD 1	MEMBER 00	0.	0.	0.
WILLIAM KEITH 1615 APPLING ROAD CORDOVA, TN 38016		BOARD 1		0.	0.	0.
NANCY ALBONETTI 1615 APPLING ROAD CORDOVA, TN 38016		BOARD 1	MEMBER 00	0.		0.
EDDIE SMITH 1615 APPLING ROAD CORDOVA, TN 38016		BOARD 1		0.	0.	0.
WALLACE MCALEXANDE 1615 APPLING ROAD CORDOVA, TN 38016	ER.	PRESIDI 2.		0.	0.	0.
SCOTT BLOUNT 1615 APPLING ROAD CORDOVA, TN 38016		VICE PI 2.	RESIDENT	0.	0.	0.
MARY LOU CUSHING 1615 APPLING ROAD CORDOVA, TN 38016		SECRETA 2.	ARY/TREA:	SURER 0.	0.	0.

WESLEY HOME SERVICES, INC.			62	2-1642972
JAMES NASSO 1615 APPLING ROAD CORDOVA, TN 38016	CEO 2.00	0.	0.	0.
DONALD OLLIO 1615 APPLING ROAD CORDOVA, TN 38016	CFO 2.00	0.	0.	0.
RONALD BUDYNAS 1615 APPLING ROAD CORDOVA, TN 38016	COO 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	, PART VIII	0.	0.	0.

FORM 990-PF CASH DEEMED CHARITABLE EXPLANATION STATEMENT STATEMENT 9 PART X, LINE 4

PART X, LINE 4: BASED ON PRIOR YEARS EXPERIENCE, AN ESTIMATED AMOUNT OF 95% OF CASH IS USED IN FURTHERING CHARITABLE ACTIVITIES.

2018 DEPRECIATION AND AMORTIZATION REPORT

FORM 9	990-PF PAGE 1						990-PF	•					`	
Asset No	Description	Date Acquired	Method	Lıfe	No c >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1		09/30/10	SL	5.00	16	1,483.				1,483.	1,483.		.0	1,483.
2	DELL LATITUDE LAPTOP COMPUTER	02/01/11	SL	3.00	1 19	1,654.				1,654.	1,654.		0	1,654.
m	LTC PAYROLL SOFTWARE	10/01/10	SL	5.00	16	2,016.				2,016.	2,016.		0.	2,016.
4	SANDATA SOFTWARE	06/01/12	SL	3.00	16	1,500.				1,500.	1,500.		0	1,500.
2	SURFACE PRO3	05/01/15	SL	3.00	16	898.				898.	798.		100.	898.
9		09/01/15	SL	3.00	16	1,709.				1,709.	1,330.		379.	1,709.
7	COMPUTER	01/01/18	SL	3.00	16	621.				621.			207.	207.
	* TOTAL 990-PF PG 1 DEPR					9,881.				9,881.	8,781.		. 989	9,467.
	CURRENT YEAR ACTIVITY													
	BEGINNING BALANCE					9,260.			.0	9,260.	8,781.			9,260.
	ACQUISITIONS					621.			0.	621.	0.			207.
	DISPOSITIONS					0.			0.	0.	0.			0
	ENDING BALANCE					9,881.			0.	9,881.	8,781.			9,467.
	ENDING ACCUM DEPR										9,467.			
	ENDING BOOK VALUE										414.			
828111 04-01-18	04-01-18					pesousid tesset (I)	200		•	* ITC Salvada	Bootie Comm	Jetano Deioze	Bonns Commercial Dautalistic Coduction	2002

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone