Form 990-T	E	xempt Organization Bus	sine	ss Income T	ax Return	<u>ا</u> را	OMB No 1545-0687
	l _	(and proxy tax und			90 N-3 0 - 201		2018
-	For ca	lendar year 2018 or other tax year beginning <u>JUL 1,</u> Go to www.irs gov/Form990T for in				: 5	2010
Department of the Treasury Internal Revenue Service	>	Do not enter SSN numbers on this form as it may	be ma	de public if your organiz		. 5	Open to Public Inspection for 01(c)(3) Organizations Only
A Check box if address changed		Name of organization (Check box if name of	hanged	l and see instructions.)			yer identification number byees' trust, see itions)
B Exempt under section	Print	DELAWARE COMMUNITY FOU	NDA	TION, INC		-	2-2804785
X 501(c)(3)03	or Type	Number, street, and room or suite no. If a P.O. bo	x, see II	nstructions.			ted business activity code structions)
408(e) 220(e)	1,700	P.O. BOX 1636			· · · · · ·	-	
408A 530(a)		City or town, state or province, country, and ZIP of	r foreig	in postal code		9000	000
529(a) C Book value of all assets		WILMINGTON, DE 19899 F Group exemption number (See instructions.)				9000	700
at end of year	720	G Check organization type ► X 501(c) corp		n 501(c) trust	401(a)	\ trust	Other trust
		ttion's unrelated trades or businesses.	1		the only (or first) ur		our.gr =
trade or business here	-				complete Parts I-V.		than one,
		ice at the end of the previous sentence, complete Pa	arts I ar				
business, then complete				·			
I During the tax year, was	the corp	poration a subsidiary in an affiliated group or a pare	nt-subs	idiary controlled group?	▶ [Yes	X No
		tifying number of the parent corporation.					
		JOYCE DARLING			one number 3		
	_	de or Business Income	1	(A) Income	(B) Expenses	S	(C) Net
1a Gross receipts or sale			١.				'
Less returns and allo		c Balance	1c				
Cost of goods sold (S			3				-/
Gross profit. Subtrac			4a		-,	\rightarrow	
.b Net gain (loss) (Form		Part II, line 17) (attach Form 4797)	4b		•		
Capital loss deduction			4c				
_5 Income (loss) from a		ship or an S corporation (attach statement)	5				
Rent income (Schedi		(6				
c Capital loss deduction Income (loss) from a Rent income (Schedi Unrelated debt-financi Interest, annuties, roll Investment income of		me (Schedule E)	7				
8 Interest, annuities, ro	yaltıes, a	and rents from a controlled organization (Schedule F)	8				
	f a section	on 501(c)(7), (9), or (17) organization (Schedule G)	9				
40 Exploited exempt act			10				
11 Advertising income (11				
12 Other income (See in			12				
13 Total. Combine lines Part II Deduction		gn 12 o t Taken Elsewhere (See instructions fo	13/	0.			
(Except for	contrib	utions, deductions must be directly connecte	d with	the unrelated busines	s income.)	.	
14 Compensation of of	ficers, d	rectors, and trustees (Schedule K)		REC	EIVED	14	
15 Salaries and wages						M-:	
16 Repairs and mainter	nance			JUL S	20	16	
17 Bad debts				A		17	
18 Interest (attach scho	edule) (s	ee instructions)	•	OGD	EN, UT	18	
19 Taxes and licenses	uone (Co	e instructions for limitation rules)			VP-0	20	
	-	a ·		21		20	
·				22a		22b	
23 Depletion		periodical value discounts to an volum		<u> </u>		23	
24 Contributions to det	ferred, co	mpensation plans				24	
25 Employee benefit pr		•				25	
26 Excess exempt exp	_	chedule i)				26	
27 Excess readership of	costs (Sc	hedule J)				27	
28 Other deductions (a						28	
29 Total deductions. A						29	0.
,		ncome before net operating loss deduction. Subtra				30	0.
,	-	loss arising in tax years beginning on or after Janua	ary 1, 2	018 (see instructions)		31	
		ncome. Subtract line 31 from line 30				32	0 . Form 990-T (2018)
823701 01-09-19 LHA F	oi rape	rwork Reduction Act Notice, see instructions					101111 333-1 (2016)

	Form 990-	DEBINITED CONTROL TO C	04/85	
	Part	Total Unrelated Business Taxable Income		
	1 33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
	1 34	Amounts paid for disallowed fringes	34	·
	35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions) STMT 1	35	0.
	36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		
		lines 33 and 34	36	
	37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	377	1,000.
	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.
11.	Part	V Tax Computation		
, ,	/39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)	39	0.
	40	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on 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	
		/Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.
	Part		-1-1/1	
116 3		Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a	T	
	,	Other credits (see instructions)	 	
٠	C	General business credit. Attach Form 3800	╡	
		Credit for prior year minimum tax (attach Form 8801 or 8827)		
	e	The state of the s	45e	
}.a \$₹.	46	Subtract line 45e from line 44	46	0.
	47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	47	
7.2.	48	Total tax Add lines 46 and 47 (see instructions)	48	0.
	49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
		Payments: A 2017 overpayment credited to 2018		
4		2018 estimated tax payments	1	
in the		Tax deposited with Form 8868	1	
		· · · · · · · · · · · · · · · · · · ·	-	
֥		· · · · · · · · · · · · · · · · · · ·	-	
<u>.</u>		Backup withholding (see instructions) Credit for small employer health insurance premiums (attach Form 8941) 50e 50f	-	
7576			-	
and had also	9	Other credits, adjustments, and payments: Form 2439 Other Total 50g		
314 v.	F.4		-	
•	51		51 52	
	52	Estimated tax penalty (see instructions). Check if Form 2220 is attached		
	53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53 54	
	54 55	Overpayment If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid Enter the amount of line 54 you want: Credited to 2019 estimated tax Refunded	55	
	Part '		1 99 1	
		- L		TVaaTNa
	56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority		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," enter the name of the foreign country		
		here >		X
	57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	50	If "Yes," see instructions for other forms the organization may have to file.		1 1 1
	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 known to the statements.	aviodae and balief it i	le true
	Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	wiedge and belief, it is	s true,
	Here	VP-FINANCE &	May the IRS discuss th	
ņ			he preparer shown bel	
;			nstructions)? X Y	es No
			If PTIN	
	Paid	KATHERINE L. Self-employed		1105
	Prepa	arer SILICATO (1000) SILICATO	_ P00543	
	Use (Only Firm's name ► GUNNIP & COMPANY LLP Firm's EIN ►	51-007	16769
		2751 CENTERVILLE RD., STE. 300	200 005 5	-000
			<u>302-225-5</u>	
	823711 0	I-09-1 9	Form 9	90-T (2018)

DELAWARE COMMUNITY FOUNDATION, INC

FORM 990-T	NET	OPERATING LOSS	DEDUCTION	STATEMENT
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
06/30/12	7,815.	0.	7,815.	7,815.
06/30/13	8,372.	0.	8,372.	8,372
06/30/14	2,029.	0.	2,029.	2,029
06/30/15	7,946.	0.	7,946.	7,946
06/30/16	1,122.	0.	1,122.	1,122
NOL CARRYO	VER AVAILABLE THIS	YEAR	27,284.	27,284