ł,	Form	'990-T								OMB No 1545-0687				
						nd proxy tax und				ra 21 201	، ا	2010		
		,	For calendar year 2018 or other tax year beginning SEP 1, 2018 and ending AUG 31, 201								9 -	ZU IO		
		artment of the Treasury and 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 50 t(c)(3) Organizations Only		
	A [Check box if address changed										oyer identification number oyees' trust, see ctions.)		
	D E	kempt under section	Drint	. AMEDICA CANI CADE POD KIDE							46-2077931			
		501(c 0 (3)	Print AMERICA CAN! CARS FOR KIDS Or Number, street, and room or surte no. If a P.O. box, see instructions.								E Unrelated business activity code			
		408(e) 220(e)	7100 MARVIN D. LOVE FREEWAY									(See matructions)		
		408A 530(a)	Crty or lown, state or province, country, and ZIP or foreign postal code DALLAS, TX 75237								441100			
	C B∞	ok value of all assets	12.2.2											
	ate	Book value of all assets at end of year 3,751,822. G Check organization type X 501(c) corporation 501(c) trust 401(a) trust												
	H En	3,751,822. 6 Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust inter the number of the organization's unrelated trades or businesses. 1 Describe the only (or first) unrelated												
,	tra	ade or business here CONSIGNMENT SALES FROM AUCTION . If only one, complete Parts I-V. If more than one,												
	des	scribe the first in the bl	ank spa	ce at the end	of the previo	us sentence, complete P	arts I an	d II, complete	a Schedule	e M for each addition	al trade	or		
		siness, then complete												
					-	affiliated group or a pare	nt-subsi	idiary controlle	d group?	▶ Ĺ	Ye	s 🗓 No		
		If "Yes," enter the name and identifying number of the parent corporation. The books are in care of MALCOLM WENTWORTH Telephone number > 972-274-5437												
		e books are in care of rt님을 Unrelated						(A) Inc		v				
50	T. 54 ".			ie oi bus	mess mo	zome T	T	(A) Inc	ome	(B) Expenses	enteral.	(C) Net		
2020		Gross receipts or sale				- Bolones								
~		Less returns and allow Cost of goods sold (S		A (mo 7)		c Balance	1c 2	<u> </u>			right de la company	anteral attendance		
-		Gross profit. Subtract				' ·	3			RACHE HE TAX		S DESKRIPE OF THE BUTTON MAKES FALLS		
9		Capital gain net incom					4a							
AUG		Net gain (loss) (Form			-	n 4797)	4b							
\circ		Capital loss deduction					4c							
CANNED	5	Income (loss) from a	partners	ship or an S c	orporation (a	ittach statement)	5			CENTRAL PROPERTY.				
2	6	Rent income (Schedu	le C)				6							
8	7	Unrelated debt-finance	ed incor	ne (Schedule	E)		7			.				
19	8	Interest, annuities, roy	alties, a	nd rents from	a controlled	organization (Schedule F)	ļ		<u></u>					
190				a section 501(c)(7), (9), or (17) organization (Schedule G) 9										
		Exploited exempt activ			 									
		Advertising income (S		tructions; attach schedule) STATEMENT 1 12 208,990.								208,990.		
		•										208,990.		
		Total Combine lines 3 through 12 13 208, 990. Part, III Deductions Not Taken Elsewhere (See instructions for limitations on deductions)										200,2201		
	,,,,,,,,					t be directly connecte								
	14	Compensation of off	cers. di	rectors, and t	rustees (Sch	edule K)					14			
	15	Salaries and wages				····	 .		-		15	32,507.		
	16	Repairs and mainten	ance		.lR	ECEIVED.					16	1,731.		
	ad Life	Bad debts		iule) (see instructions MAY 0 4 2020 SEE STATEMENT 2										
			dule) (s									981.		
•	B	Taxes and licenses		:	101		SSI.				19	114.		
	2 <u>2</u>	Chantable contribute			1 ——	· · ·	'≌ .				20			
		Depreciation (attach				GDEN, U.T.			21					
- 1 Per 1000 C	22	Less depreciation cla	ilmea oi	1 Schedule A				ļ	22a		22b 23			
		Depletion Contributions to defe	rrad co	 mnancetna n	ane				-		24	-		
		Employee benefit pro		приновион р							25			
		Excess exempt exper	-	:hedule ()			-				26			
	5,3	Excess readership co									27			
	33	Other deductions (at	lach sch	redule)				SEE	STAT	PEMENT 3	28	156,688.		
	29	Total deductions. A		_						2%	29	192,021.		
	30				· ·	g loss deduction. Subtra				-	30	16,969.		
	31	•	et operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)								31	15 060		
	32	Unrelated business taxable income. Subtract line 31 from line 30									16,969. Form 990-T (2018)			
	62370	າປ1–09-19 LMA F0	raper	MOIK HEQUEL	UN ACT NOTIC	e, see instructions.						LOSIN 200-1 (SO 18)		

Form 9'30-1	(2018) AMERICA CAN! CARS FOR KIDS	46-2077931	Page 2
Part I	Total Unrelated Business Taxable Income		
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	16,969.
34	Amounts paid for disallowed fringes	34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of		*
	lines 33 and 34	36	16,969.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	28 37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,		
30	enter the smaller of zero or line 36	ረ ኅ	15,969.
Danu	Vi Tax Computation		13,303.
		₩ D 39	3,353.
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	7 33 X	3,3331
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:	33.13%	
	Tax rate schedule or Schedule D (Form 1041)	. 40	
41	Proxy tax. See instructions	. • 41	
42	Alternative minimum tax (trusts only)		
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	42 4	3,353.
Part _* \	Tax and Payments	V	<u>.</u>
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a		
b	Other credits (see instructions)		
C	General business credit. Attach Form 3800 45c	-13.50°,	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	5.54	
е	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	3,353.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (a	ttach schedute) 47	
48	Total tax. Add lines 46 and 47 (see instructions)	48	3,353.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50 a	Payments: A 2017 overpayment credited to 2018	18,418.	<u> </u>
	2018 eshmated tax payments 50b		
	Foreign organizations: Tax paid or withheld at source (see instructions)		
	Backup withholding (see instructions)		
	Credit for small employer health insurance premiums (attach Form 8941)		
9	Other credits, adjustments, and payments: Form 2439		
	Form 4136 Other Total ▶ 50 g		40 410
51	Total payments. Add lines 50a through 50g	51	48,418.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached 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 owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	. \$ 54	45,065.
55		inded 4 55	45,065.
:Part)	Statements Regarding Certain Activities and Other Information (see Instruc	tions)	
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		
	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 fore	ian trust?	<u>x</u>
٠.	If "Yes," see instructions for other forms the organization may have to file.	· 3 ··	
58	Enter the amount of tax-exempt interest received or accrued during the tax year		
	Under penalties of pergry, I declare that I have examined this return, including accompanying schedules and statements, and to the b	est of my knowledge and belie	f, it is true,
Sign	correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge CHIEF OPERATING	<u>.</u>	<u></u>
Here	4-29-20 OFFICER	May the this di	scuss this return with
	Signature of officer Date Title	the preparer st instructions)?	own below (see
			X Yes No
		Check if PTIN	
Paid		self- employed	1004050
Prepa	rer KEVIN WARNEKE Awr Varuat 4/24/2020		1294950
Use C	nly Firm's name ► LANE GORMAN TRUBITT, LLC	Firm's EIN 🕨 75.	-1044330
	2626 HOWELL ST, SUITE 700		
	Firm's address ▶ DALLAS, TX 75204	Phone no. 214-8	<u>/1-7500</u>

67

Phone no. 214-871-7500 Form **990-T** (2018)

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Schedule A - Cost of Goods	Sold. Enter	method of inven	itory va	luation 🕨 N/A	,					
1 Inventory at beginning of year	_1		6	Inventory at end of yea	ır		6			
2 Purchases	2		7	Cost of goods sold. Su		line 6	1			
3 Cost of labor 3				from line 5. Enter here						
4a Additional section 263A costs			7	line 2		·	7			
(attach schedule)	4a			Do the rules of section	263A (1	with respect to		Yes	No	
b Other costs (attach schedule)	. 4b		7	property produced or a						
5 Total. Add lines 1 through 4b	5		7	the organization?		, , , , , , , , , , , , , , , , , , , ,			1	
Schedule C - Rent Income (Property and			ease	d With Real Prope	ertv)		•	
(see instructions)							,,			
1. Description of property										
(1)										
(2)										
(3)										
(4)								-		
	2. Rent receiv	ed or accrued								
(a) From personal property (if the per- rent for personal property is more 10% but not more than 50%)	centage of than	i of rent for p	personal p	nd personal property (if the percentage arsonal property exceeds 50% or if the based on profit or income)			ons directly connected with the income in mins 2(a) and 2(b) (attach schedule)			
(1)										
(2)										
(3)	•									
(4)		Ì								
Total	0.	Totai			0.					
(c) Total income. Add totals of columns		ter				(b) Total deductions.				
here and on page 1, Part I, line 6, column	(A)				0.	Enter here and on page 1, Part I, line 6, column (B)	>		0.	
Schedule E - Unrelated Deb	t-Financed	Income (see	instruc	tions)						
			Ι.			Deductions directly confite debt-finance	nected w	nth or allocable		
				 Gross income from or allocable to debt- 	(2)	Straight line depreciation	(b) Other deductions			
Description of debt-financed property			financed property		\"	(attach schedule)	1	(affach schedule)		
			1							
(1)							I			
(2)										
(3)							1			
(4)			1				Ì			
4. Amount of average acquisition 5. Average debt on or allocable to debt-financed property (altach schedule) debt-fina		adjusted basis allocable to niced property h schedule)	6.	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))		
(1)			1	01			+			
(1)			1	<u>%</u>			+			
(2)			+				+			
(3)			+	<u>%</u>			+			
(4)		· . · · . · ·		%			+			
						inter here and on page 1, Part I, line 7, column (A)		inter here and on pag Part I, line 7, column (
Totals				>	l	0.			0.	
Total dividends-received deductions in	cluded in columi	18					·L		0.	
							•	Form 990-T	(20.10)	

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Totals (carry to Part II, line (5))

á,

0

0.

Form 990-T (2018)

•

Page 5 Rart III 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 gain or (loss) (col: 2 minus 7. Excess readership costs (column 6 minus 2. Gross 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising income col 9) If a gain, compute cols 5 through 7 column 5, but not more than column 4) advertising costs ілсоте costs (1) (2) (3) (4) TO AND 0. Totals from Part I 0. 0. Enter here and Enter here and on Enter here and on page 1, Parti, ime 11, col (A) page 1, Parti, line 11, col (B). 0. Totals, Part II (lines 1-5) Schedule K - Compensation of Officers, Directors, and Trustees (see instructions) 3. Percent of time devoted to Compensation attributable to unrelated business 2. Trile 1. Name business (1) (2) (3)

Form 990-T (2018)

0.

(4)

Total. Enter here and on page 1, Part II, line 14

£ 4

FORM 990-T	OTHER INCOME	STATEMENT 1			
DESCRIPTION	AMOUNT				
CONSIGNMENT SALES	208,990.				
TOTAL TO FORM 990-T, P	208,990.				
FORM 990-T	INTEREST PAID	STATEMENT 2			
DESCRIPTION		AMOUNT			
INTEREST EXPENSE		981.			
TOTAL TO FORM 990-T, P	981.				
FORM 990-T	OTHER DEDUCTIONS	STATEMENT 3			
DESCRIPTION		AMOUNT			
FEES CONTRACTED SERVICES AUCTION EXPENSES COMPUTER EXPENSES INVENTORY PREP BOND AND INSURANCE ADVERTISING OFFICE EXPENSE UTILITIES TRAVEL MISCELLANEOUS RENT		2,139. 49,637. 4,487. 2,187. 17,483. 1,109. 72,124. 2,884. 955. 312. 3,087. 284.			
TOTAL TO FORM 990-T, P	AGE 1, LINE 28	156,688.			