

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

2939327708749

OMB No 1545-0087

Form **990-T**

For calendar year 2018 or other tax year beginning 07-01, 2018, and ending 06-30 20 19.

2018

▶ Go to www.irs.gov/Form990T for instructions and the latest information. **1906**
▶ 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
501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

A Check box if address changed

Name of organization (Check box if name changed and see instructions)

D Employer identification number
(Employees' trust, see instructions)

B Exempt under section
 501(c)(3) **03**
 408(e) 220(e)
 408A 530(a)
 529(a)

Print or Type

ALLIANCE FOR AFRICAN ASSISTANCE

Number, street, and room or suite no. If a P.O. box, see instructions

5952 El Cajon Blvd.

City or town, state or province, country, and ZIP or foreign postal code

San Diego, CA 92115

93-1008369

E Unrelated business activity code
(See instructions)

531110

C Book value of all assets at end of year
4,361,184

F Group exemption number (See instructions) ▶

G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses ▶ 1 Describe the only (or first) unrelated trade or business here **Rental Income**. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

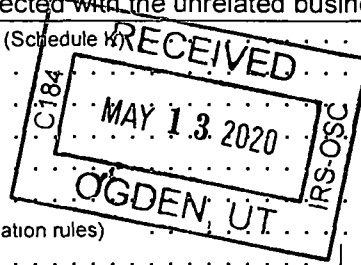
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation ▶

J The books are in care of ▶ **Walter Lam** Telephone number ▶ **(619) 286-9052**

Part I. Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
c	Balance ▶			
2	Cost of goods sold (Schedule A, line 7)			
3	Gross profit Subtract line 2 from line 1c			
4a	Capital gain net income (attach Schedule D)			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c	Capital loss deduction for trusts			
5	Income (loss) from a partnership or an S corporation (attach statement)			
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)	71,513	31,403	40,110
8	Interest, annuities, royalties, and rents from a controlled organization (Schedule F)			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions, attach schedule)			
13	Total. Combine lines 3 through 12	71,513	31,403	40,110

Part II. Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)			
15	Salaries and wages			
16	Repairs and maintenance			
17	Bad debts			
18	Interest (attach schedule) (see instructions)			
19	Taxes and licenses			
20	Charitable contributions (See instructions for limitation rules)			
21	Depreciation (attach Form 4562)			
22	Less depreciation claimed on Schedule A and elsewhere on return			
23	Depletion			
24	Contributions to deferred compensation plans			
25	Employee benefit programs			
26	Excess exempt expenses (Schedule I)			
27	Excess readership costs (Schedule J)			
28	Other deductions (attach schedule)			
29	Total deductions. Add lines 14 through 28			
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13			40,110
31	Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)			
32	Unrelated business taxable income Subtract line 31 from line 30			40,110



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For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2018)

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, Amount. Includes lines 33-38 for Unrelated Business Taxable Income.

Part IV Tax Computation

Table with 3 columns: Line number, Description, Amount. Includes lines 39-44 for Tax Computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, Amount. Includes lines 45a-55 for Tax and Payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Line number, Description, Yes/No. Includes lines 56-58 for Statements Regarding Certain Activities.

Signature of officer: Clifford R Benn, Date: 12/30/19, Title: Executive Director. Includes a signature and date stamp.

Preparer information section including Pnn/Type preparer's name (Clifford Benn), Preparer's signature (Clifford Benn, CPA), Date (12-16-2019), PTIN (P00743739), Firm's name (CLIFFORD R BENN CPA), Firm's address (552 E Carson Street 104, Carson CA 90745), and Phone no (310-631-8145).

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

1	Inventory at beginning of year	1		6	Inventory at end of year	6	
2	Purchases	2		7	Cost of goods sold. Subtract		
3	Cost of labor	3			line 6 from line 5. Enter here and		
4a	Additional section 263A costs				in Part I, line 2	7	
	(attach schedule)	4a					
b	Other costs (attach schedule)	4b		8	Do the rules of section 263A (with respect to		Yes
					property produced or acquired for resale) apply		No
5	Total. Add lines 1 through 4b	5			to the organization?		X

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property

(1) **4527 Esther Street**

(2) **5952 El Cajon Blvd.**

(3)

(4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	Total	

(c) **Total income.** Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) . . ▶

(b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B) ▶

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property		2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
			(a) Straight line depreciation (attach schedule) Statement #12	(b) Other deductions (attach schedule) Statement #13	
(1)	Residential Property	23,320	1,457	21,298	
(2)	Commercial Roof Space	55,064	3,550	11,768	
(3)					
(4)					
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) Statement #14		5. Average adjusted basis of or allocable to debt-financed property (attach schedule) Statement #15		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
		6. Column 4 divided by column 5			
(1)	106,252	150,185	70.75 %	16,499	16,099
(2)	105,177	105,266	99.91 %	55,014	15,304
(3)			%		
(4)			%		
Totals ▶				Enter here and on page 1, Part I, line 7, column (A) 71,513	Enter here and on page 1, Part I, line 7, column (B) 31,403
Total dividends-received deductions included in column 8 ▶					

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

Table with 6 columns: 1. Name of controlled organization, 2. Employer identification number, 3. Net unrelated income (loss), 4. Total of specified payments made, 5. Part of column 4 that is included in the controlling organization's gross income, 6. Deductions directly connected with income in column 5.

Nonexempt Controlled Organizations

Table with 5 columns: 7. Taxable Income, 8. Net unrelated income (loss), 9. Total of specified payments made, 10. Part of column 9 that is included in the controlling organization's gross income, 11. Deductions directly connected with income in column 10.

Totals ▶

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

Table with 5 columns: 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).

Totals ▶

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

Table with 7 columns: 1. Description of exploited activity, 2. Gross unrelated business income from trade or business, 3. Expenses directly connected with production of unrelated business income, 4. Net income (loss) from unrelated trade or business, 5. Gross income from activity that is not unrelated business income, 6. Expenses attributable to column 5, 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).

Totals ▶

Schedule J - Advertising Income (see instructions)

Table with 7 columns: 1. Name of periodical, 2. Gross advertising income, 3. Direct advertising costs, 4. Advertising gain or (loss) (col 2 minus col 3), 5. Circulation income, 6. Readership costs, 7. Excess readership costs (column 6 minus column 5, but not more than column 4).

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

Part II **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.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
Totals, Part II (lines 1-5) ▶	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27

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)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14 ▶			

Federal Supporting Statements

2018 PG01

Name(s) as shown on return

Tax ID Number

ALLIANCE FOR AFRICAN ASSISTANCE

93-1008369

**990-T - Schedule E - Line 3a
Straight Line Depreciation**

Statement #12

Description

Amount

Building

\$1,457

Total

\$1,457

PG01

**990-T - Schedule E - Line 3a
Straight Line Depreciation**

Statement #12

Description

Amount

Building, Roof Top

\$3,550

Total

\$3,550

PG01

**990-T - Schedule E - Line 4
Average Aquisition Debt**

Statement #14

Description

Amount

Mortgage Payable

\$106,252

Total

\$106,252

PG01

**990-T - Schedule E - Line 4
Average Aquisition Debt**

Statement #14

Description

Amount

Mortgage Payable

\$105,177

Total

\$105,177

Federal Supporting Statements**2018 PG01**

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93-1008369

**990-T - Schedule E - Line 5
Average Adjusted Basis**

Statement #15

Description**Amount**

Building and Land

\$150,185**Total**\$150,185**990-T - Schedule E - Line 5
Average Adjusted Basis**PG01
Statement #15**Description****Amount**

Commercial Roof Top

\$105,266**Total**\$105,266**990-T - Schedule E - Line 3b
Other Deductions**PG01
Statement #13**Description****Amount**

Interest Expenses

\$7,301

Property Taxes

\$4,047

Insurance

\$1,323

Business License

\$59

Management Fees

\$580

Legal Expense

\$-3,530

Repairs

\$11,500

Utilities

\$18**Total**\$21,298

Federal Supporting Statements

2018 PG01

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**990-T - Schedule E - Line 3b
Other Deductions**

Statement #13

<u>Description</u>	<u>Amount</u>
Interest Expenses	\$7,353
Property Taxes	\$382
Insurance	\$1,489
State Taxes	<u>\$2,544</u>
Total	<u><u>\$11,768</u></u>