

Short Form

Form **990-EZ**

**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

**2015**

Department of the Treasury  
Internal Revenue Service

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Information about Form 990-EZ and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Open to Public Inspection

**A For the 2015 calendar year, or tax year beginning** \_\_\_\_\_ **and ending** \_\_\_\_\_

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C Name of organization**  
**DGT FOUNDATION, INC**

**D Employer identification number**  
**47-1353263**

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite **E Telephone number**  
**272 CLINTON AVENUE** **212-913-9433**

City or town, state or province, country, and ZIP or foreign postal code **F Group Exemption Number**  
**BROOKLYN, NY 11205** **▶**

**G Accounting Method:**  Cash  Accrual Other (specify) \_\_\_\_\_ **H Check**  if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

**I Website:** **▶ N/A**

**J Tax-exempt status** (check only one) —  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**K Form of organization:**  Corporation  Trust  Association  Other \_\_\_\_\_

**L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ** **▶ \$ 5,959.**

| <b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (see the instructions for Part I)   |   |
|---|---|
| Check if the organization used Schedule O to respond to any question in this Part I <input checked="" type="checkbox"/>   |   |
| <b>Revenue</b>  | <b>1</b> Contributions, gifts, grants, and similar amounts received <b>1</b> <b>5,959.</b>  |
|   | <b>2</b> Program service revenue including government fees and contracts <b>2</b>   |
|   | <b>3</b> Membership dues and assessments <b>3</b>   |
|   | <b>4</b> Investment income <b>4</b>   |
|   | <b>5a</b> Gross amount from sale of assets other than inventory <b>5a</b>   |
|   | <b>b</b> Less: cost or other basis and sales expenses <b>5b</b>   |
|   | <b>c</b> Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) <b>5c</b>  |
|   | <b>6</b> Gaming and fundraising events  |
|   | <b>a</b> Gross income from gaming (attach Schedule G if greater than \$15,000) <b>6a</b>  |
| <b>b</b> Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) <b>6b</b> |   |
| <b>c</b> Less: direct expenses from gaming and fundraising events <b>6c</b>   |   |
| <b>d</b> Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) <b>6d</b>   |   |
| <b>7a</b> Gross sales of inventory, less returns and allowances <b>7a</b>   |   |
| <b>b</b> Less: cost of goods sold <b>7b</b>   |   |
| <b>c</b> Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) <b>7c</b>   |   |
| <b>8</b> Other revenue (describe in Schedule O) <b>8</b>  |   |
| <b>9 Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 <b>▶ 9 5,959.</b>   |   |
| <b>Expenses</b>   | <b>10</b> Grants and similar amounts paid (list in Schedule O) <b>10</b>  |
|   | <b>11</b> Benefits paid to or for members <b>11</b>   |
|   | <b>12</b> Salaries, other compensation, and employee benefits <b>12 1,500.</b>  |
|   | <b>13</b> Professional fees and other payments to independent contractors <b>13 450.</b>  |
|   | <b>14</b> Occupancy, rent, utilities, and maintenance <b>14</b>   |
|   | <b>15</b> Printing, publications, postage, and shipping <b>15</b>   |
|   | <b>16</b> Other expenses (describe in Schedule O) <b>SEE SCHEDULE O 16 4,966.</b>   |
| <b>17 Total expenses.</b> Add lines 10 through 16 <b>▶ 17 6,916.</b>  |   |
| <b>Net Assets</b>   | <b>18</b> Excess or (deficit) for the year (Subtract line 17 from line 9) <b>18 -957.</b>   |
|   | <b>19</b> Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) <b>19 1,590.</b> |
|   | <b>20</b> Other changes in net assets or fund balances (explain in Schedule O) <b>20 0.</b>   |
|   | <b>21</b> Net assets or fund balances at end of year. Combine lines 18 through 20 <b>▶ 21 633.</b>  |