

U.S. Corporation Income Tax Return

For calendar year 2016 or tax year

beginning _____, ending _____

2016

Department of the Treasury
Internal Revenue Service

Information about Form 1120 and its separate instructions is at www.irs.gov/form1120.

- A Check if:**
- 1a Consolidated return (attach Form 851)
 - b Life/nonlife consolidated return
 - 2 Personal holding co. (attach Sch. PH)
 - 3 Personal service corp. (see instructions)
 - 4 Schedule M-3 attached

TYPE OR PRINT

Name
DGT ALUMNI ASSOCIATION, INC

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

City or town, state, or province, country, and ZIP or foreign postal code
BROOKLYN, NY 11205

B Employer identification number
46-2057153

C Date incorporated
10/16/1973

D Total assets (see instructions)
\$ 156,382.

E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change

Income	1a Gross receipts or sales	1a	
	b Returns and allowances	1b	
	c Balance. Subtract line 1b from line 1a	1c	
	2 Cost of goods sold (attach Form 1125-A)	2	
	3 Gross profit. Subtract line 2 from line 1c	3	
	4 Dividends (Schedule C, line 19)	4	
	5 Interest	5	
	6 Gross rents	6	74,525.
	7 Gross royalties	7	
	8 Capital gain net income (attach Schedule D (Form 1120))	8	
	9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9	
10 Other income (attach statement) SEE STATEMENT 1	10	1,173.	
11 Total income. Add lines 3 through 10	11	75,698.	
Deductions (See instructions for limitations on deductions.)	12 Compensation of officers (attach Form 1125-E)	12	
	13 Salaries and wages (less employment credits)	13	
	14 Repairs and maintenance	14	4,500.
	15 Bad debts	15	
	16 Rents	16	
	17 Taxes and licenses SEE STATEMENT 2	17	18,750.
	18 Interest	18	10,923.
	19 Charitable contributions SEE STATEMENT 3 AND SEE STATEMENT 4	19	349.
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20	5,002.
	21 Depletion	21	
	22 Advertising	22	276.
	23 Pension, profit-sharing, etc., plans	23	
	24 Employee benefit programs	24	
	25 Domestic production activities deduction (attach Form 8903)	25	
	26 Other deductions (attach statement) SEE STATEMENT 5	26	32,756.
	27 Total deductions. Add lines 12 through 26	27	72,556.
	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28	3,142.
Tax, Refundable Credits, and Payments	29a Net operating loss deduction (see instructions)	29a	
	b Special deductions (Schedule C, line 20)	29b	
	c Add lines 29a and 29b	29c	
30 Taxable income. Subtract line 29c from line 28. See instructions	30	3,142.	
31 Total tax (Schedule J, Part I, line 11)	31	471.	
32 Total payments and refundable credits (Schedule J, Part II, line 21)	32	960.	
33 Estimated tax penalty. See instructions. Check if Form 2220 is attached <input type="checkbox"/>	33		
34 Amount owed. If line 32 is smaller than the total of lines 31 and 33, enter amount owed	34	0.	
35 Overpayment. If line 32 is larger than the total of lines 31 and 33, enter amount overpaid	35	489.	
36 Enter amount from line 35 you want: Credited to 2017 estimated tax 480. Refunded 9.	36	9.	

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: _____ Date: _____ **PRESIDENT**

May the IRS discuss this return with the preparer shown below? Yes No

Paid Preparer Use Only

Print/Type preparer's name: **JOHN SATTLER, CPA, P.C.** Preparer's signature: _____ Date: **02/21/17** Check if self-employed PTIN: **P00184892**

Firm's name: **JOHN SATTLER, CPA, P.C.** Firm's EIN: **26-4119270**

Firm's address: **100 CROSSWAYS PARK WEST, SUITE 100 WOODBURY, NY 11797** Phone no.: **516-364-9393**