Case 6:17-bk-05561 Doc 1 Filed 08/21/17 Page 1 of 18

Fill in this information to identify your case:
United States Bankruptcy Court for the:
Middle District of Florida
Chapter you are filing under
Chapter 7 Chapter 11
Chapter 12 Chapter 13

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

12/15

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1.	Debtor's name	Dale M. Williams, Ir	10.				
2.	All other names debtor used in the last 8 years	Williams Amuseme	nts				
	Include any assumed names, trade names, and doing business as names						
3.	Debtor's federal Employer Identification Number (EIN)	59-2120822		_			
4.	Debtor's address	Principal place of busi	ness		Mailing address, if of business	different from	principal place
		1614 Camerbur Dri	ive		P.O. Box 61814	-5	
		Number Street			Number Street		
			· · · · · · · · · · · · · · · · · · ·		P.O. Box		
		Orlando	FL	32805	Orlando	FL	32861-8 ⁻
		City	State	ZIP Code	City	State	ZIP Code
		Orange County			Location of principal principal place of	pal assets, if dif business	ferent from
		County			Number Street		
						<u> </u>	
					City	State	ZIP Code
5.	Debtor's website (URL)			·			
6.	Type of debtor	☑ Corporation (includin ☐ Partnership (excludin ☐ Other. Specify:	_	bility Company ((LLC) and Limited Liabilit	y Partnership (Li	LP))

De	btor Dale M. Williams, Inc	Case number (# known)
	Name	
7.	Describe debtor's business	A. Check one:
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
		☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
		Railroad (as defined in 11 U.S.C. § 101(44))
		☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
		Commodity Broker (as defined in 11 U.S.C. § 101(6))
		Clearing Bank (as defined in 11 U.S.C. § 781(3))
		☑ None of the above
		B. Check all that apply:
		_
		☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
		Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
		☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))
		C. NAME (Name to Appendix and Appendix Classification Contains) A digit code that book describes debter
		 NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See http://www.naics.com/search/.
		<u>713100</u>
8.	Under which chapter of the	Check one:
-	Bankruptcy Code is the	
	debtor filing?	Chapter 7
		Chapter 9
		Chapter 11. Check all that apply.
		Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
		The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
		☐ A plan is being filed with this petition.
		Acceptances of the plan were solicited prepetition from one or more classes of creditors,
		in accordance with 11 U.S.C. § 1126(b).
		□ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
		☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
		☐ Chapter 12
9.	Were prior bankruptcy cases	☑ No
	filed by or against the debtor	
	within the last 8 years?	Yes. District When Case number
	if more than 2 cases, attach a separate list.	District When Case number
		MM / DD / YYYY
10.	Are any bankruptcy cases	☑ No
	pending or being filed by a business partner or an	☐ Yes. Debtor Retationship
	affiliate of the debtor?	
	List all cases. If more than 1,	District When MM / DD /YYYY
	attach a separate list.	Case number, if known
	· · · · · · · · · · · · · · · · · · ·	

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Debtor	Dale M. Williams, Inc	•	Case number (# knox	мт)
	Name			
11. Why i	s the case filed in <i>this</i> ct?	Check all that apply:	nrincinal place of husiness or princi	ipal assets in this district for 180 days
		immediately preceding the district.	date of this petition or for a longer pa	rt of such 180 days than in any other
		A bankruptcy case concern	ing debtor's affiliate, general partner,	or partnership is pending in this district.
posse prope	the debtor own or have ession of any real rty or personal property eeds immediate		n property that needs immediate atter	ntion. Attach additional sheets if needed.
attent	10111	•	·	dentifiable hazard to public health or safety.
		_	1?sically secured or protected from the	
		☐ It includes perisha	ble goods or assets that could quickly ple, livestock, seasonal goods, meat	
		·		
		Where is the propert	y? Number Street	
			City	State ZIP Code
		Is the property insur	ed?	
		□ No		
		Yes. Insurance agei	ncy	
		Contact name		
		Phone		_
	Statistical and adminis	trative information		
	or's estimation of able funds	Check one:		
avalla	ible fullus		distribution to unsecured creditors. penses are paid, no funds will be avai	ilable for distribution to unsecured creditors.
14. Estim	ated number of	☑ 1-49	1,000-5,000	25,001-50,000
credit		□ 50-99 □ 100-199 □ 200-999	☐ 5,001-10,000 ☐ 10,001-25,000	☐ 50,001-100,000 ☐ More than 100,000
15. Estim	ated assets	☑ \$0-\$50,000 □ \$50,000	\$1,000,001-\$10 million	\$500,000,001-\$1 billion
		\$50,001-\$100,000 \$100,001-\$500,000	\$10,000,001-\$50 million \$50,000,001-\$100 million	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
		□ \$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion

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Debtor	Dale M. Williams, Ind).	Case numbe	' (if known)
16. Estimat	ed liabilities	□ \$0-\$50,000 □ \$50,001-\$100,000 ☑ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
R	equest for Relief, Dec	laration, and Signatures		
WARNING			tement in connection with a bankr I8 U.S.C. §§ 152, 1341, 1519, and	uptcy case can result in fines up to d 3571.
	tion and signature of ed representative of	The debtor requests relie petition.	of in accordance with the chapter of	of title 11, United States Code, specified in this
		I have been authorized to	o file this petition on behalf of the	debtor.
		I have examined the info correct.	rmation in this petition and have a	reasonable belief that the information is true and
		I declare under penalty of pe	rjury that the foregoing is true and	correct.
		Executed on 08/21/20 MM / DD / Y	<u>17</u>	
		x Dale an well	n D	ale m. w.? (ion
		Signature of authorized repre	esentative of debtor Pri	nted name
		Title Prosid	et	
18. Signatu	re of attorney	x 4. 1 tu		08/21/2017
		Signature of attorney for deb	otor	MM / DD / YYYY
		Peter N. Hill		-
		Herron Hill Law G	iroup, PLLC	
		Firm name 135 W. Central B	lvd. Suite 650	
		Number Street Orlando		FL 32801
		City		State ZIP Code
		4076480058		peter@herronhilllaw.com
		Contact phone		Email address
		368814		FL
		Bar number		State

Form 1120S

Department of the Treasury

teternal Revenue Service

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U.S. Income Tax Return for an S Corporation
Do not file this form unless the corporation has filed or is

attaching Form 2553 to elect to be an S corporation.

▶ Information about Form 1120S and its separate instructions is at www.irs.gov/form1120s.

EXTENSION GRANTED TO 09/15/16

OMB No. 1545-0123

2015

Ĵſ	cale	endar year 2015 or tax	x year beginning		, and ending				
		ction effective date	Name				D	Employ	er identification number
	_	/31/1981	DALE M. WIL						
		ness activity							-2120822
	see	instructions)	8 Number, street, and room or		nstructions.		E		corporated
_		713100	P.O. BOX 61				4		7/31/1981
	Chec attacl	it ii Ooii. W O	only or town, outloor province		in postal code			Total as	ssets (see instructions)
_			ORLANDO, FL				\$		8,896.
G			g to be an S corporation beginni	ing with this tax year?	Yes LX No I	t "Yes," attach Fo	rm 25:	os it not	already filed
H		eck if: (1) Final		ge (3) Address cha					
<u></u>			eholders who were shareholders						
_	$\overline{}$		trade or business income an	a expenses on lines la ti	nrough 21. See the	Instructions ic	rmore		1,114,168.
_	1	1 a Gross receipts or sales	1,114,168. b Reta	wances	G Bal. Subtract lin	e 1b from line 1a	·· •	1c	513,262.
Income	1		old (attach Form 1125-A)				1	3	600,906.
20		•						4	000,300.
_			rom Form 4797, line 17 (attach					5	
			oss) (attach statement)					6	600,906.
	+		oss). Add lines 3 through 5					7	3,150.
ns)			of officers (see instrs attach Fo					8	186,847.
ij			ges (less employment credits)					9	1,465.
Ę.			intenance					10	1,1030
Ξ	1							11	8,849.
9		2 Taxes and licens	ses		STATE	MENT 1	······	12	25,103.
tions for limitations)	1 1							13	67,211.
-4	1		t claimed on Form 1125-A or els					14	0.,122
<u>.</u> '	1	·	not deduct oil and gas depletio					15	
.E	1		double on una gue depiene					16	35.
Deductions (See in.			sharing, etc., plans					17	
ns			it programs					18	
왍	1	9 Other deductions	s (attach statement)		STATE	MENT 2	·····	19	150,334.
ą	1 1		ons. Add lines 7 through 19					20	442,994.
å	1		ess income (loss). Subtract line					21	157,912.
_	┿		sive income or LIFO recapture tax			***************************************			
	-		ule D (Form 1120S)						
	1		nd 22b		·····			22c	
ဟ	1 2		tax payments and 2014 overpay					1. 40 1.4	
ent		b Tax deposited wi		,	23b				
톳	1	c Credit for federal	il tax paid on fuels (attach Fori	m 4136)	23c				
Pa	l		rough 23c					23d	
ano	2		enalty (see instructions). Check i				ן כ	24	
Tax and Paym	2	5 Amount owed. I	If line 23d is smaller than the to	tal of lines 22c and 24, enter	amount owed		[25	
-	2	6 Overpayment.	If line 23d is larger than the tota	l of lines 22c and 24, enter a	mount overpaid		[26	
	2		om line 26 Credited to 2016 est			Refunded	▶	27	
		Under penalties of perjury belief, it is true, correct, a	ry, I declare that I have examined this and complete. Declaration of preparer	return, including accompanying s	chedules and statements, all information of which pro	and to the best of reparer has any kno	ny know wledge.	ledge and	d
Si	gn			,			J		May the IRS discuss this return with the preparer shown
He	ere				PRESID	ENT			below (see instr.)?
		Signature of office	cer	Date	Title				X Yes No
-	Pri	int/Type preparer's name		Preparer's signature	In:	ate	-		PTIN
Paid	L				"		Check it self-	ʻ	200460101
Paid	R.		EK, P.A.	<u> </u>	i		employ		P00469121
e Only	,	K.2			<u> </u>		Firm's E		59-3761263
•	Fin		1 N. FERNCREEK LANDO, FL 3280	•	J		Phone r		7-894-5050
JW								±0/	Form 1120S (2015)
511		•	uction Act Notice, see separate	maduodolla.					10m 1 1200 (2010)
12-2	J- 13	•							

Form 1120S (2015) DALE M. WILL	IAMS, INC			59-212	<u> 2082</u>	2 P	Page 2
	e instructions)					Yes	No
• • • • • • • • • • • • • • • • • • • •	X Accrual (c)	Other (specify)					
2 See the instructions and enter the:			NATE OF				
(a) Business activity ►RECREATION		Product or service GZ					
3 At any time during the tax year, was any shareholder						di Sin	X
nominee or similar person? If "Yes," attach Schedule	D-1, Illiormation on Gertain	Shareholders of all 5 col	שנים ווטוים ביים אינים			an silic	75
 4 At the end of the tax year, did the corporation: a Own directly 20% or more, or own, directly or indire 	othy 50% or more of the tota	ol etack iccurat and autota	nding of any				lia -
foreign or domestic corporation? For rules of constr	• •					ine area	х
	(ii) Employer	(iii) Cou	<u> </u>	(iv) Percentage of Stock	(v) if Perc	entage in	
(i) Name of Corporation	Identification Number (if any)	incorpo	ration	Owned	(v) if Perc 100% . Ente Qualified Subsidiary E	I Subchap lection W	iter S /as Made
				ļ			
				·			
	_						
b Own directly an interest of 20% or more, or own, dir	ectly or indirectly, an interes	t of 50% or more in the n	rofit loss or	,L		944	
capital in any foreign or domestic partnership (include	•	-					Historia Listania
trust? For rules of constructive ownership, see instru						loudes site	X
(i) Name of Entity	(ii) Employer Identification Number	(iii) Type of Entity		untry of	, .	(v) Maxi ercentage	
(I) Name of Endty	(if any)	(iii) Type of Endig	Orgar	nization			or Capital
1							
5a At the end of the tax year, did the corporation have a	ny outstanding shares of res	stricted stock?					X
If "yes" complete lines (i) and (ii) below	, outburning on a co						
## T			_				. Alle Li
bAt the end of the tax year, did the corporation have a	ny outstanding stock option	s, warrants, or similar insi	truments?				X
If "yes" complete lines (i) and (ii) below						an Sub	
(i) Total shares of stock outstanding at the end of the						ikidati	1,53
(ii) Total shares of stock outstanding if all instrumen						1127	
6 Has this corporation filed, or is it required to file, For					n?	SIES TON	Х
7 Check this box if the corporation issued publicly offe					▶└─		
If checked, the corporation may have to file Form 82	•			ients.			
8 If the corporation: (a) was a C corporation before it with a basis determined by reference to the basis of	elected to be an S corporation the asset (or the basis of any	on or the corporation acqu other property) in the ha	nds of a C				li iii
corporation and (b) has net unrealized built-in gain i the net unrealized built-in gain reduced by net recog	n excess of the net recognize	ed built-in gain from prior	years, enter				
9 Enter the accumulated earnings and profits of the co					—		
10 Does the corporation satisfy both of the following co			Ψ				
a The corporation's total receipts (see instructions) for		\$250.000					
bThe corporation's total assets at the end of the tax ye							X
If "Yes," the corporation is not required to complete		***************************************					Kilos.
1 During the tax year, did the corporation have any no	n-shareholder debt that was	cancelled, was forgiven, o	or had the				
terms modified so as to reduce the principal amount	of the debt?	•••••				L	Х
If "Yes," enter the amount of principal reduction		•••••	\$				dark
2 During the tax year, was a qualified subchapter S sul	osidiary election terminated	or revoked? If "Yes," see in	nstructions				X
3a Did the corporation make any payments in 2015 that		ı(s) 1099?				X	
b If "Yes." did the corporation file or will it file all require	ed Forms 1099?					X	1

Form **1120S** (2015)

Case 6:17-bk-05561 Doc 1 Filed 08/21/17 Page 7 of 18 Form 1120S (2015) 59-2120822 Page 3 DALE M. WILLIAMS, INC. Total amount Schedule K | Shareholders' Pro Rata Share Items 157,912. 1 Ordinary business income (loss) (page 1, line 21) 1 2 Net rental real estate income (loss) (attach Form 8825) 2 3a Other gross rental income (loss) b Expenses from other rental activities (attach statement) 3b c Other net rental income (loss). Subtract line 3b from line 3a 3с 4 4 Interest income 5 Dividends: a Ordinary dividends 5a b Qualified dividends 5b 6 7 7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S)) 8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S)) b Collectibles (28%) gain (loss) 8b c Unrecaptured section 1250 gain (attach statement) 8c 9 Net section 1231 gain (loss) (attach Form 4797) 9 Other income (loss)

Type 10 179,910. 11 Section 179 deduction (attach Form 4562) 11 Deductions 12a 12a Charitable contributions 12b b Investment interest expense Section 59(e)(2) expenditures (1) Type 12c(2) (2) Amount Other deductions (see instructions) Type 12d 13a 13a Low-income housing credit (section 42(j)(5)) 13b b Low-income housing credit (other) 13c c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468) d Other rental real estate credits (see instructions) Type 13d e (See instructions) Type 13e f Biofuel producer credit (attach Form 6478) Other credits
(see instructions) Type 14a Name of country or U.S. possession b Gross income from all sources c Gross income sourced at shareholder level Foreign gross income sourced at corporate level 14d d Passive category Foreign Transactions e General category f Other (attach statement) Deductions allocated and apportioned at shareholder level 14g g Interest expense 14h h Other Deductions allocated and apportioned at corporate level to foreign source income **14i** i Passive category 14i j General category k Other (attach statement) Other information I Total foreign taxes (check one): ▶ ☐ Paid Accrued 141 mReduction in taxes available for credit (attach statement) n Other foreign tax information (attach statement) 15a Post-1986 depreciation adjustment 15a 15b b Adjusted gain or loss c Depletion (other than oil and gas) 15c d Oil, gas, and geothermal properties - gross income 15d

e Oil, gas, and geothermal properties - deductions

16a Tax-exempt interest income

b Other tax-exempt income

c Nondeductible expenses STATEMENT 3

d Distributions (attach statement if required)

f Other AMT items (attach statement)

e Repayment of loans from shareholders

15e 15f

16a

16b

16c

16d

8,066.

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59-2120822 DALE M. WILLIAMS, INC. Form 1120S (2015) Page 4 Schedule K | Shareholders' Pro Rata Share Items (continued) Total amount 17a 17a Investment income 17b b Investment expenses c Dividend distributions paid from accumulated earnings and profits 17c dOther items and amounts (attach statement) 18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. -21,998. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l Schedule L End of tax year Balance Sheets per Books Beginning of tax year Assets (a) (b) (c) (d) -3. 1 Cash _____ 832. 2 a Trade notes and accounts receivable b Less allowance for bad debts 832. 2,495. 2,495. 3 Inventories U.S. government obligations 5 Tax-exempt securities 2,000. STATEMENT 4 0. Other current assets (att. stmt.) 6 7 Loans to shareholders Mortgage and real estate loans 8 Other investments (att. stmt.) 1,190,563. 1,370,473. 10 a Buildings and other depreciable assets 1,187,628. 2,935 1,367,538. 2,935. b Less accumulated depreciation 11 a Depletable assets b Less accumulated depletion 12 Land (net of any amortization) 13 a Intangible assets (amortizable only) b Less accumulated amortization STATEMENT 5 634. 634. 14 Other assets (att. stmt.) 6,061. 8,896. Liabilities and Shareholders' Equity 40,615. 55,389. Accounts payable 16 70,000. 72,806. 17 Mortgages, notes, bonds payable in less than 1 year 42,487. STATEMENT 6 45,666. Other current liabilities (att. stmt.) 18 Loans from shareholders 19 336,327. 360,437. 20 Mortgages, notes, bonds payable in 1 year or more Other liabilities (att. stmt.) 21 500. 500. 22 Capital stock 15,954. 15,954. 23 Additional paid-in capital -505,807.-535,871. STATEMENT 24 Retained earnings 25 Adjustments to shareholders' equity (att. stmt.) 26 Less cost of treasury stock 8,896.

27

JWA

Total liabilities and shareholders' equity

6,061

Form 1120S (2015)

59-2120822 Form 1120S (2015) DALE M. WILLIAMS, INC. Page 5 Reconciliation of Income (Loss) per Books With Income (Loss) per Return Schedule M-1 Note: The corporation may be required to file Schedule M-3 (see instructions) -30,064. Net income (loss) per books 5 Income recorded on books this year not included on Schedule K, lines 1 through Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 10 (itemize): 6, 7, 8a, 9, and 10, not recorded on books this year a Tax-exempt interest \$ (itemize): 3 Expenses recorded on books this year not 6 Deductions included on Schedule K, lines 1 included on Schedule K, lines 1 through 12 through 12 and 14l, not charged against and 14I (itemize): book income this year (itemize): a Depreciation \$ a Depreciation \$ 3,862 **b** Travel and entertainment S <u>8,066.</u> 4,204 7 Add lines 5 and 6 STMT 8 -21,998. -21,998. 4 Add lines 1 through 3 8 Income (loss) (Schedule K, line 18). Line 4 less line 7 Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Schedule M-2 Shareholders' Undistributed Taxable Income Previously Taxed (see instructions) (b) Other adjustments (a) Accumulated (c) Shareholders' undistributed adjustments account account taxable income previously taxed -505,807. 1 Balance at beginning of tax year 157,912. Ordinary income from page 1, line 21 Other additions Loss from page 1, line 21 Other reductions STATEMENT 9 187,976 -535,871. Combine lines 1 through 5 Distributions other than dividend distributions

-535,871

Form 1120S (2015)

JWA

Balance at end of tax year. Subtract line 7 from line 6

Form 1125-A

(Rev. December 2012)

Department of the Treasury

Cost of Goods Sold

► Attach to Form 1120, 1120-C, 1120-F, 1120S, 1065, or 1065-B.

▶ Information about Form 1125-A and its instructions is at www.irs.gov/form1125a.

OMB No. 1545-2225

me		1	Employer Identification number
DALE M. WILLIAMS, INC.			59-2120822
1 Inventory at beginning of year		1	2,495.
		2	191,707.
		3	
4 Additional section 263A costs (attach schedule)		4	
5 Other costs (attach schedule)	SEE STATEMENT 10	5	321,555.
		6	515,757.
		7	2,495.
8	and on Form 1120, page 1, line 2 or the	8	513,262.
9 a Check all methods used for valuing closing inventory: (i) Cost (ii) X Lower of cost or market (iii) Other (Specify method used and attach explana	ntion)▶		
b Check if there was a writedown of subnormal goods			▶ □
	ear for any goods (if checked, attach Form 970)		▶ □
d If the LIFO inventory method was used for this tax year, entunder LIFO	ter amount of closing inventory computed	94	
	of Section 263A apply to the corporation?		Yes X No
	aluations between opening and closing inventory?		
For Paperwork Reduction Act Notice, see separate instruction	ns.		Form 1125-A (Rev. 12-2012)

Form 1125-E

Compensation of Officers

(Rev. December 2013)

Department of the Treasury

► Attach to Form 1120, 1120-C, 1120-F, 1120-REIT, 1120-RIC, or 1120S.

▶ Information about Form 1125-E and its separate instructions is at www.irs.gov/form1125e.

OMB No. 1545-2225

Employer Identification number 59-2120822

DALE M. WILLIAMS, INC.

Note. Complete Form 1125-E only if total receipts are \$500,000 or more. See instructions for definition of total receipts.

(a) Name of officer (b) Social security number (c) Percent of time devoted to business (d) Common				tock owned (e) Preferred	(f) Amount of compensation	
					2 1 5 0	
DALE M. WILLIAMS		100%	100.00%		3,150	
			<u> </u>			
		 				
			<u> </u>			
		!				
Total compensation of officers				2	3,150	
Compensation of officers claimed on Form 1125-A or els	ewhere on return			3		
Subtract line 3 from line 2. Enter the result here and on Feappropriate line of your tax return	orm 1120, page 1, line 12 or th	е			3,150	

 $\label{lem:construction} \textbf{For Paperwork Reduction Act Notice, see separate instructions.}$

Form 1125-E (Rev. 12-2013)

4562

nternal Revenue Service

(99)

Depreciation and Amortization (Including Information on Listed Property)

Attach to your tax return.

▶ Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

Sequence No. 179

Business or activity to which this form relates Identifying number 59-2120822 DALE M. WILLIAMS, INC. OTHER DEPRECIATION Part | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 500,000. 1 Maximum amount (see instructions) 179,910. 2 2 Total cost of section 179 property placed in service (see instructions) 2,000,000. 3 3 Threshold cost of section 179 property before reduction in limitation 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-500,000. Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions 5 (b) Cost (business use only) (a) Description of property 6 FURNITURE AND EQUIPMENT 179,910. GAMES. 7 Listed property. Enter the amount from line 29 179,910. 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 179,910. Tentative deduction. Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2014 Form 4562 10 500,000. 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 179,910 12 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2016. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during 14 Property subject to section 168(f)(1) election 15 6 Other depreciation (including ACRS) 16 Part III MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2015 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2015 Tax Year Using the General Depreciation System (c) Basis for depreciation (business/investment use (b) Month and (d) Recovery (e) Convention (a) Depreciation deduction (a) Classification of property year placed in service only - see instructions) 19a 3-year property b 5-year property 7-year property C d 10-year property 15-year property e 20-year property f 25 yrs. S/L 25-year property g S/L MM 27.5 yrs. h Residential rental property 27.5 yrs. MM S/L MM S/L 39 vrs. i Nonresidential real property MM S/L Section C - Assets Placed in Service During 2015 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12-year 12 yrs. S/L b 40-vear 40 yrs. MM S/L C Part IV | Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21.

23 For assets shown above and placed in service during the current year, enter the

portion of the basis attributable to section 263A costs

Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr.

22

23

For	m 4562 (2015)	DAL	E M. W	ILLIA	MS.	INC.							59-	2120	822	Page 2
	art V Listed Proper							raft, ce	ertain	comp	outers, a	nd prop				
	recreation, or a	amusement.)	ı													
	Note: For any (a) through (c)	venicle for w of Section A	nich you are , all of Section	using the n B, and :	standa Section	C if app	ge rate d licable.	ir deal	Jenig	, leas	e expen	se, com	piete cit	ıy 24a, 2	-4D, COIU	111115
7	Section A -	Depreciation	on and Other	Informa	tion (Ca	aution: S	See the i	nstruc	tions	for lir	nits for p	passeng	er auton	nobiles.)		
248	Do you have evidence to s										es," is th					No
	(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business investmen use percenta	it of	(d) Cost or her basis	l /bus	(e) sis for depre siness/inve use only	stment	Reco	f) overy iod	Met	g) hod/ ention	Depre	h) ciation iction	Elec section	(i) cted in 179 ist
<u></u>	Special depreciation alle	l		<u> </u>	, placed	in soni			22 40	ar an	L	T			e in the sa	
25	used more than 50% in		•		•			-	-			25				
26	Property used more that					<u></u>		• • • • • • • • • • • • • • • • • • • •		•••••		1 20			<u> </u>	
_	HICLES	: :	 		0,59	5.			5 3	/RS	200D	B-HY			T	
				% = -	-,	-										
			-	%												
27	Property used 50% or le	ess in a qual													·	
	1 Toporty about 5070 OF I	: :	l da Baoirioc	%					I		S/L·					
			<u> </u>	%							S/L·					
_				%							S/L·			·		
28	Add amounts in column		through 27		e and or	n line 21	page 1					28				
	Add amounts in column													29		
	7 tad arribarito ili obiariti	. (7,		Section											1	
Cor	mplete this section for ve	hicles used									or related	i person	. If you i	orovideo	t vehicle:	s
	our employees, first ans															
,	our compleyees, met and	420			, .					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
				Τ (a)	(b)		(c)		(0	i)	(4	9)	(1)
30	Total business/investment	miles driven d	luring the	· ·	nicle		hicle	l۷	/ehicle	;	Veh	•		icle	Veh	icle
-	year (do not include com		•				-	†				*****				
31	Total commuting miles							 							<u> </u>	
	Total other personal (no															
,	driven							l								
33	Total miles driven during							†								
	Add lines 30 through 32	• •														
34	Was the vehicle availab			Yes	No	Yes	No	Yes		No	Yes	No	Yes	No	Yes	No
	during off-duty hours?	•							丁			-				
35	Was the vehicle used p								Т							
	than 5% owner or relate				1											
36	Is another vehicle availa	•	onal		†				丁							
	use?	•							- 1				1			
			- Questions	for Emp	lovers V	Vho Pro	vide Vel	hicles	for U	se by	y Their E	mploye	es			
Ans	swer these questions to			-	-									re not m	ore than	5%
	ners or related persons.		•	•							_	-				
37	Do you maintain a writte	en policy sta	tement that p	orohibits a	all perso	nal use	of vehicl	es, inc	ludin	g con	nmuting	by you	r		Yes	No
	employees?		•		•					-	-				. 🗀	
38	Do you maintain a writte	en policy sta	tement that p	rohibits i	personal	use of \	vehicles,	excep	ot con	nmut	ing, by y	our				
	employees? See the ins		-												. l	
39	Do you treat all use of v															
	Do you provide more th															
	the use of the vehicles,														. L	
41	Do you meet the require															
	Note: If your answer to															Agistic
P	art VI Amortization															
	(a)	facate		(b)		(c)	hla			(d)		(e)		Α.	(f)	
	Description of	COSIS	Da	te amortization begins		Amortizat amoun	t		Se	ode ection		Amortiza period or per		A.	mortization or this year	
-	Amortization of costs th	nat begins du	ring your 20	15 tax ye	ar:											
,			II II		1											

43

43 Amortization of costs that began before your 2015 tax year

44 Total. Add amounts in column (f). See the instructions for where to report

FORM 1120S	TAXES AND LICENSES	STATEMENT 1
DESCRIPTION		AMOUNT
OTHER TAXES AND LICENSES		2,529.
PAYROLL TAXES		22,474.
TENNESSEE TAXES - OTHER		100.
TOTAL TO FORM 1120S, PAGE	1, LINE 12	25,103.
FORM 1120S	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
		2,849
BANK AND SERVICE CHARGES BUSINESS GIFTS		50
DUES AND SUBSCRIPTIONS		673
EXTERMINATING		350
FILING FEES		1,857
FREIGHT AND INSPECTION		10,848
INSURANCE		9,648
MEALS AND ENTERTAINMENT		3,863.
OFFICE SUPPLIES		10,500.
OF SIDE SERVICES		2,528
PA IS		52,233
POSTAGE		185
PROFESSIONAL FEES		7,184 704
SECURITY SUPPLIES		531
TOKENS/CD'S		6,787
TRAVEL		3,784
UTILITIES AND TELEPHONE		7,027
VEHICLE EXPENSE		28,733
TOTAL TO FORM 1120S, PAGE	1, LINE 19	150,334.
SCHEDULE K	NONDEDUCTIBLE EXPENSES	STATEMENT
DESCRIPTION		AMOUNT
DESCRIPTION		
LIFE INSURANCE		4,204
EXCLUDED MEALS AND ENTERTA	INMENT EXPENSES	3,862
TOTAL TO SCHEDULE K, LINE	16C	8,066

SCHEDULE L OTHER CURRENT ASSETS	5	STATEMENT
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
EMPLOYEE ADVANCE	0.	2,000
TOTAL TO SCHEDULE L, LINE 6	0.	2,000
SCHEDULE L OTHER ASSETS		STATEMENT
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
DEPOSITS	634.	634
TOTAL TO SCHEDULE L, LINE 14	634.	634
SCHEDULE L OTHER CURRENT LIABILIT	IES	STATEMENT
DESCRIPTION	BEGINNING OF TAX YEAR	END OF TAX YEAR
CREDIT CARDS PAYABLE SALES TAX PAYABLE STATE ACCRUED TAXES	36,220. 9,446. 0.	32,941 9,446 100
TOTAL TO SCHEDULE L, LINE 18	45,666.	42,487
SCHEDULE L ANALYSIS OF TOTAL RETAINED EARNIN	NGS PER BOOKS	STATEMENT
DESCRIPTION		AMOUNT
BALANCE AT BEGINNING OF YEAR NET INCOME PER BOOKS DISTRIBUTIONS OTHER INCREASES (DECREASES)		-505,807 -30,064 0
BALANCE AT END OF YEAR - SCHEDULE L, LINE 24, COI	LUMN (D)	-535,871

SCHEDULE M-1				BOOKS THIS SCHEDULE I		STATEMENT	8
DESCRIPTION						AMOUNT	
LIFE INSURANCE						4,204.	
TOTAL TO SCHEDULE	M-1, LINE 3					4,2	04.
SCHEDULE M-2 ACCU	MULATED ADJU:	STMENTS A	ACCOT	INT- OTHER	REDUCTIONS	STATEMENT	9
DESCRIPTION						AMOUNT	
SECTION 179 EXPENSE DEDUCTION NONDEDUCTIBLE EXPENSES					179,9 8,0		
TOTAL TO SCHEDULE	M-2, LINE 5	- COLUMN	(A)			187,9	76.
FORM 1125-A		OTHER	COST			STATEMENT	10
DECRIPTION						AMOUNT	
GAME LEASES LESSEE NET ROUTE REVENUE SHARING - REVENUE SHARING-UN REVENUE SHARING-WD	IVERSAL						70. 64. 50.
TOTAL TO LINE 5						321,5	55.

Schedule K-1 (Form 1120S) 2015		Final K-1	Amended K-1	_	OMB No. 1545-0123	
		Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items				
partment of the Treasury Internal Revenue Service For calendar year 2015, or tax		Ordinary bu	business income (loss)	13 Credits		
year beginning		,	157,912.			
ending	2	Net rental re	al estate inc (loss)			
Shareholder's Share of Income, Deductions, Credits, etc. See separate instructions.			ntal income (loss)			
Part I Information About the Corporation		Interest inco	eme			
A Corporation's employer identification number 59-2120822		Ordinary div	idends			
B Corporation's name, address, city, state, and ZIP code		Qualified dividends		14	Foreign transactions	
DALE M. WILLIAMS, INC. P.O. BOX 618145		Royalties				
ORLANDO, FL 32861		Net short-term capital gain (loss)				
C IRS Center where corporation filed return E-FILE		Net long-ter	m capital gain (loss)			
Part II Information About the Shareholder	8b	Collectibles	(28%) gain (loss)			
D Shareholder's identifying number	8c	Unrecapture	ed sec 1250 gain			
E Shareholder's name, address, city, state and ZIP code	9	Net section	1231 gain (loss)			
DALE M. WILLIAMS P.O. BOX 768		Other incom	e (loss)	15	Alternative min tax (AMT) items	
WINDERMERE, FL 34786						
F Shareholder's percentage of stock ownership for tax year						
	_					
	11	Section 179	deduction 179,910.	16 C*	Items affecting shareholder basis 8,066.	
	12	Other deduc	ctions			
For IRS Use Only						
R S S S S S S S S S S S S S S S S S S S						
Fg.				17	Other information	
· 						
		L			Idial and information	
511271 10-26-15 JWA For Paperwork Reduction Act Notice, see Instructions for Form 112	08.		ee attached statement .gov/form1120s	tor ac	dditional information. Schedule K-1 (Form 1120S) 2015	

SCHEDULE K-1 NONDEDUCTIBLE EXPENSES, BOX 16, CODE C								
DESCRIPTION	AMOUNT	SHAREHOLDER FILING INSTRUCTIONS						
EXCLUDED MEALS AND ENTERTAINMENT EXPENSES LIFE INSURANCE	3,862. 4,204.	SEE SHAREHOLDERS INSTRUCTIONS						
TOTAL	8,066.	•						