

EXTENDED TO NOVEMBER 15, 2018

Form 990-T

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

OMB No 1545-0087

For calendar year 2017 or other tax year beginning and ending 03 90509

2017

Department of the Treasury Internal 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)

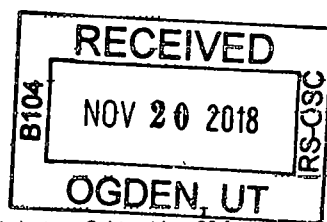
Open to Public Inspection for 501(c)(3) Organizations Only

Header section containing organization name (COMMUNITY ACTION AGENCY OF COLUMBIANA COUNTY, INC.), address (7880 LINCOLN PLACE, LISBON, OH 44432), EIN (34-6565185), and exemption type (501(c)(3) corporation).

Section I: Describe the organization's primary unrelated business activity (SEE STATEMENT 1). Section J: The books are in care of MARSHA TSANGARIS, Telephone number 330-424-7221.

Table for Part I: Unrelated Trade or Business Income. Columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13. Total income 7,500, total net 7,500.

Table for Part II: Deductions Not Taken Elsewhere. Rows 14-34. Total deductions 1,188. Unrelated business taxable income before net operating loss deduction 6,312. Net operating loss deduction 3,233. Unrelated business taxable income before specific deduction 3,079. Specific deduction 1,000. Unrelated business taxable income 2,079.



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8 94

COMMUNITY ACTION AGENCY OF COLUMBIANA
COUNTY, INC.

Form 990-T (2017)

34-6565185

Page 2

Part III Tax Computation

35 Organizations Taxable as Corporations See instructions for tax computation.
Controlled group members (sections 1561 and 1563) check here See instructions and.

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):
(1) \$ _____ (2) \$ _____ (3) \$ _____

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____
(2) Additional 3% tax (not more than \$100,000) \$ _____

c Income tax on the amount on line 34 ▶ 35c 312.

36 Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount on line 34 from.
 Tax rate schedule or Schedule D (Form 1041) ▶ 36

37 Proxy tax See instructions ▶ 37

38 Alternative minimum tax ▶ 38

39 Tax on Non-Compliant Facility Income See instructions ▶ 39

40 Total Add lines 37, 38 and 39 to line 35c or 36, whichever applies ▶ 40 312.

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) ▶ 41a

b Other credits (see instructions) ▶ 41b

c General business credit Attach Form 3800 ▶ 41c

d Credit for prior year minimum tax (attach Form 8801 or 8827) ▶ 41d

e Total credits Add lines 41a through 41d ▶ 41e

42 Subtract line 41e from line 40 ▶ 42 312.

43 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) ▶ 43

44 Total tax Add lines 42 and 43 ▶ 44 312.

45a Payments A 2016 overpayment credited to 2017 ▶ 45a

b 2017 estimated tax payments ▶ 45b

c Tax deposited with Form 8868 ▶ 45c

d Foreign organizations: Tax paid or withheld at source (see instructions) ▶ 45d

e Backup withholding (see instructions) ▶ 45e

f Credit for small employer health insurance premiums (Attach Form 8941) ▶ 45f

g Other credits and payments: Form 2439 Form 4136 Other ▶ 45g

46 Total payments Add lines 45a through 45g ▶ 46

47 Estimated tax penalty (see instructions) Check if Form 2220 is attached ▶ 47

48 Tax due If line 46 is less than the total of lines 44 and 47, enter amount owed ▶ 48 312.

49 Overpayment If line 46 is larger than the total of lines 44 and 47, enter amount overpaid ▶ 49

50 Enter the amount of line 49 you want Credited to 2018 estimated tax ▶ 50 Refunded ▶ 50

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

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority 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 ▶

	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>

52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. ▶

	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>

53 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$

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: David J. Blasko Date: 11/9/18 Title: CHIEF EXECUTIVE OFFICER

May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Print/Type preparer's name DAVID J. BLASKO	Preparer's signature DAVID J. BLASKO	Date 11/09/18	Check <input type="checkbox"/> if self-employed	PTIN P00045667
Firm's name HILL, BARTH & KING LLC			Firm's EIN 34-1897225	
Firm's address 6603 SUMMIT DRIVE CANFIELD, OH 44406			Phone no. (330) 758-8613	

FORM 990-T DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY STATEMENT 1

CONSTRUCTING AND DEVELOPING LOW-INCOME APARTMENT HOUSING

TO FORM 990-T, PAGE 1

FORM 990-T PARENT CORPORATION'S NAME AND IDENTIFYING NUMBER STATEMENT 2

CORPORATION'S NAME	IDENTIFYING NO
COMMUNITY ACTION AGENCY OF COLUMBIANA CO MARKET STREET LOFTS	81-1512064

FORM 990-T NET OPERATING LOSS DEDUCTION STATEMENT 3

TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR
12/31/16	3,233.	0.	3,233.	3,233.
NOL CARRYOVER AVAILABLE THIS YEAR			3,233.	3,233.