/ 990-T	E	EXTENDED TO NOVI	EMBE sine:	R 16, 2020 SS Income T	ax Return	L	OMB No 1545-0047
1 diii		(and proxy tax und	er se	ction 6033(e))	1912		0040
	Forcal	lendar year 2019 or other tax year beginning		, and ending	4 (12	_	2019
Department of the Treasury	ł	► Go to www irs gov/Form990T for in				L	Open to Public Inspection for
Internal Revenue Service		Do not enter SSN numbers on this form as it may				5	01(c)(3) Organizations Only
A Check box if		Name of organization (Check box if name of				Emplo (yer identification number byees' trust, see
address changed	dress changed COMMUNITY ACTION PARTNERSHIP OF					instructions)	
B Exempt under section	Print						5-2580774 ted business activity code
X = 501(c)/3	Type	Number, street, and room or suite no. If a P.O. bo					structions)
408(e) 220(e)	1,700	P.O. BOX 9059, 1200 GL					
408A 530(a)		City or town, state or province, country, and ZIP o	r foreig	n postal code			
529(a)	L	WAUKEGAN, IL 60085				9000	199
C Book value of all assets at end of year	00	F Group exemption number (See instructions.)	<u> </u>	504())	104/->		
		G Check organization type ► X 501(c) cor	-		401(a)		Other trust
	_	tion's unrelated trades or businesses.	1		the only (or first) unr		
trade or business here					complete Parts I-V. I		·
		ice at the end of the previous sentence, complete Pa	arts I an	d II, complete a Schedule	M for each additiona	i trade ()I
business, then complete			-	Occupant and annual and annual and annual			X No
		poration a subsidiary in an affiliated group or a parei	nt-subsi	ulary controlled group?	▶ ∟	Yes	, <u>A</u> 190
		Infying number of the parent corporation. MARY LOCKHART-WHITE		Talanh	one number > 8	47-2	249-4330
		de or Business Income		(A) Income	(B) Expenses	<u>- </u>	(C) Net /
1a Gross receipts or sale			Т	(1.)	ئے ہے	- =	
b Less returns and allo		c Balance ▶	1c		OFILE	,) ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	┑ /
2 Cost of goods sold (S			2	7	CCLIV	- 3	
3 Gross profit. Subtrac		· · · · ·	3				
			4a		OCT 2 0 2020	1 1	기 /
	•	Part II, line 17) (attach Form 4797)	4b		F C C C C C C C C C C C C C C C C C C C		
			4c		SEN	·	<u>¥i/</u>
•		ship or an S corporation (attach statement)	5		J. JEN, L		
• •		ship of an 3 corporation (attach statement)	6	Year and the second			7
6 Rent income (Schedum)7 Unrelated debt-finance	•	ma (Schadula E)	7			/	<u>,</u>
		nd rents from a controlled organization (Schedule F)	8			-/	
		on 501(c)(7), (9), or (17) organization (Schedule G)	$\overline{}$			/	·
10 Exploited exempt acti			10				
11 Advertising income (•	'	11				
12 Other income (See in		·	12	82.	12		
13 Total. Combine lines			13	82.			82.
Part II Deduction	ns No	ot Taken Elsewhere (See instructions for					
		pe directly connected with the unrelated busin					
14 Compensation of of	ficers, di	rectors, and trustees (Schedule K)				14	
15 Salaries and wages		,				15	
16 Repairs and mainter	nance					16	
17 Bad debts	-					17	
18 Interest (attach sche	edule) (s	ee instructions)				18	
19 Taxes and licenses	, (-				Ī	19	
20 Depreciation (attach	Form 4	562)		20		-	
·		n Schedule A and elsewhere on return		21a		21b	
22 Depletion						22	
23 Contributions to def	erred co	mpensation plans				23	
24 Employee benefit pr						24	
25 Excess exempt expe		chedule I)				25	
26 Excess readership c						26	
27 Other deductions (a						27	
28 Total deductions Add lines 14 through 27						28	0.
29 Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13						29	82.
30 Deguction for net operating loss arising in tax years beginning on or after January 1, 2018							
(see instructions)	J	-				30	0.
	taxable ı	ncome. Subtract line 30 from line 29				31	82.
		work Reduction Act Notice, see instructions.					Form 990-T (2019)

Form 99	0-T (2019) COMMUNITY ACTION PARTNERSHIP OF LAKE COUNTY	36-2580774 Page 2
Part		
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32 82.
33	Amounts paid for disallowed fringes	38
34	Charitable contributions (see instructions for limitation rules)	3,4 0.
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 337	35 82.
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36 82.
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	377
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1,000.
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	
•	enter the smaller of zero or line 37	39 0.
Part	IV. Tax Computation	<u> </u>
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	40 0.
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:	
	Tax rate schedule or Schedule D (Form 1041)	41
42	Proxy tax. See instructions	42
43	Alternative minimum tax (trusts only)	43
44	Tax on Noncompliant Facility Income. See instructions	44
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45 0.
Parl		
	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 46a	
b	Other credits (see instructions) 46b	
c	General business credit Attach Form 3800 46c	
	Credit for prior year minimum tax (attach Form 8801 or 8827)	
	Total credits. Add lines 46a through 46d	46e
47	Subtract line 46e from line 45	47 0.
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule)	48
49	Total tax. Add lines 47 and 48 (see instructions)	49 0.
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50 0.
	Payments: A 2018 overpayment credited to 2019	-
	2019 estimated tax payments 51b	Î Li
	Tax deposited with Form 8868 51c	-
	Foreign organizations: Tax paid or withheld at source (see instructions) 51d	-
	Backup withholding (see instructions) 51e	4 4
	Credit for small employer health insurance premiums (attach Form 8941) 51f	
	Other credits, adjustments, and payments Form 2439	
٠	☐ Form 4136 ☐ Other Total ▶ 51g	
52	Total payments. Add lines 51a through 51g	52
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	56
Part		
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority	Yes No
	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 >	X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?	x
	If "Yes," see instructions for other forms the organization may have to file.	£ # # #
59	Enter the amount of tax exempt interest received or accrued during the tax year > \$	
	Under penalties of derjury, Ideclare that I have examined this return perfuding accompanying schedules and statements, and to the best of my knowled correct and complete Deglaration of prepare figure than toxperson be based on all information of which preparer has any knowledge	ige and belief, it is true,
Sign		1
Here	the () I I I I I I I I I I I I I I I I I I	ay the IRS discuss this return with a preparer shown below (see
	Signature of Officer Date / Title ins	structions)? X Yes No
	Profit/Type preparer's name Preparer's signature Date Check if	PTIN
Paic	MEANUED DOMIERC DERMUED DONIERC self-amplesed	
	Darer CPA 10/13/20	P01711657
-	Only Firm's name SIKICH LLP Firm's EIN	36-3168081
<u> </u>	1415 W. DIEHL RD. SUITE 400	
	Firm's address ► NAPERVILLE, IL 60563-2349 Phone no. (630)566-8400
022711	01-27-20	Form 990-T (2019)

FORM 990-T	OTHER INCOME	STATEMENT 1		
DESCRIPTION		AMOUNT		
T-SHIRT COMMISSIONS		82.		
TOTAL TO FORM 990-T, PAGE 1, L	INE 12	82.		

FORM 990-T	NET OPERATING LOSS DEDUCTION			STATEMENT 2	
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/10 12/31/11	14,094. 33,612.	14,094. 23,440.	0. 10,172.	0. 10,172.	
NOL CARRYOV	VER AVAILABLE THIS	YEAR	10,172.	10,172.	