BAA For Paperwork Reduction Act Notice, see instructions.

	orm 990-T	LXC	empt Organization E				ix Return		OMB No 1545 0047	
′ F	Form 990- I (and proxy tax under section 6033(e)) For calendar year 2019 or other tax year beginning, 2019, and ending,							2019		
							10		2013	
Depa	rtment of the Treasury nal Revenue Service		o to www.irs.gov/Form990T for				itormation.	12	Open to Public Inspection for	
		► Do not	enter SSN numbers on this form as it						Open to Public Inspection for 501(c)(3) Organizations Only	
ΑL	Check box if address changed	Check box if name changed and see instructions) D Employees' trust, see								
	xempt under section	Print NORTHERN HILLS AREA CASA PROGRAM								
]	X 501(c) (3)	or 741 NORTH 5TH ST Type SPEARFISH, SD 57783							16-0399483	
ļ	408(e) 220(d	5)	(See instructions)							
- }	408A	a)								
	529(a)		<u> </u>					5	531120	
C B	ook value of all assets t end of year	<u> </u>	exemption number (See instru		<u> </u>					
	571,810	. G Check	k organization type 🔝 🟲 🗓	501(0	c) corporation	501	(c) trust	401(a)	trust Other trust	
		_	on's unrelated trades or busine	sses.	<u>1</u>	D	escribe the only	-	•	
	trade or business he			4					ie, complete Parts I-V.	
			in the blank space at the end	or the	previous sentence	e, con	ipiete Parts I an	d II, co	mplete a Schedule M	
			ss, then complete Parts III-V. ration a subsidiary in an affiliate	ed ara	un or a narent-su	hsidia	ry controlled ara	un?	► Yes X No	
	-	•	ying number of the parent corp	-			.y co oca g. c			
			HERN HILLS CASA	- Ci atio	·· <u>·</u>	Т	elephone numbe	r► 60	05-722-4558	
			Business Income		(A) Income		(B) Expens		(C) Net	
	Gross receipts or s		- I	Τ	()		ASTOMETRIAN	N.L.	59 A 1973 0 A 1973 1 A 19	
	b Less returns and allowa		c Balance▶	1 c					表面是更深深	
	Cost of goods sold			2				300 CAN	CHCSTY'S GEST	
	Gross profit. Subtr			3	<u> </u>		2 12/2001		Service Service Mark Nove 4	
-	· · ·			4a			275			
	4 a Capital gain net income (attach Schedule D). b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797). 4b								<u> </u>	
	c Capital loss deduction for trusts									
	Income (loss) from		or an S corporation			_				
	(attach statement)			5			《《公》《《 》			
	Rent income (Sche	•		6	12,	<u>5′40.</u>	5,	<u>485.</u>	7,155.	
7	Unrelated debt-fina		•	7						
8	•		m a controlled organization (Schedule F)	8						
9			(9), or (17) organization (Schedule 0)	9			ļ		-	
10	•		(Schedule I)	10						
11	•	•	· · · · · · · · · · · · · · · · · · ·	11			C. Cardamedia . sueta	• \$777K t.	· · - · - · - · - · - · - · · - · · - ·	
12										
								7 156		
	3 Total. Combine lines 3 through 12							485.	7,155.	
Pa	directly co	nnected wi	th the unrelated busines	s inc	ome)	112 01	i deductions.) (Dec	auctions must be	
14			rs, and trustees (Schedule,K)	<u> </u>				14		
15	Salaries and wage		·					15		
16	Repairs and mainte							16		
17	Bad debts				•			17		
18	Interest (attach sch	nedule) (see in	structions)					18		
19	Taxes and licenses							19		
20	Depreciation (attac	h Form 4562)	/		20	İ	4,407	. Thi		
21			nedule A and elsewhere on retu	ırn .	. 21a		-	21b	4,407.	
22	Depletion .		. <i></i>			14.	<u> </u>	22		
23	Contributions to de		nsation plans		.		- "	23		
24	Employee benefit p		<i>[</i> .		ALIM	Ψ.V.	า กกาง:	24		
25	Excess exempt exp		ule I)	. · '.	AUG	30	Zaci i	25		
26	Excess readership	costs (Schedu	íle J)	٠			and the second	26		
27	Other deductions (a	attach schedul	e)	•	RECEIVED	ENI	114 7571	27		
28	Total deductions.	Add lines 1/4 th	rough 27	• • •				28	4,407.	
29	Unrelated business	taxable incom	ne before net operating loss de	ductio	n. Subtract line 28	s trom		29 30	2,748.	
30			tax years beginning on or after January					31	2,748.	
31			ne. Subtract line 30 from line 29	•				131	Form 990-T (2019)	
RAA	Lear Panerwork Rei	BUCTION ACT NO	tice, see instructions.						1 01111 000-1 (2010)	

TEEA0201L 9/19/19

ı		1 990-T (2019) NORTHERN HILLS AREA CASA PROGRAM 46 1 IV Total Unrelated Business Taxable Income	-0399483	Page 2
. !				
	32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	7	0 740
		instructions)	32	2,748.
	33	Amounts paid for disallowed fringes	33	
	34	Charitable contributions (see instructions for limitation rules)	34	
	35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction. Subtract line 34 from		
		the sum of lines 32 and 33	35	2,748.
	36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instr.)	36	
	37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35.	37	2,748.
	38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,000.
. 1	39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37.		
11		enter the smaller of zero or line 37.	39	1,748.
	Pai	Tax Computation		
	40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	40	367.
	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	
		Alternative minimum tax (trusts only)	43	
		Tax on Noncompliant Facility Income. See instructions	44	
11		Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45	367.
" 1		t 🗸 Tax and Payments		
		Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 46 a		· · · · · · · · · · · · · · · · · · ·
		O Other credits (see instructions)		
		General business credit Attach Form 3800 (see instructions)		
		d Credit for prior year minimum tax (attach Form 8801 or 8827) 46 d		
		· · · · · · · · · · · · · · · · · · ·	46 e	0
		- · · · · · · · · · · · · · · · · · · ·	47	<u> </u>
	47	Subtract line 46e from line 45	4/	307.
	40		48	
	40	Other (attach schedule)	49	367.
	50	l i	50.	307.
		2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	30	
		Payments: A 2018 overpayment credited to 2019		
		2019 estimated tax payments		
		: Tax deposited with Form 8868		
		Foreign organizations: Tax paid or withheld at source (see instructions) 51 d		
		Backup withholding (see instructions) 51 e Credit for small employer health insurance premiums (attach Form 8941) 51 t		
	ξ	Other credits, adjustments, and payments. Form 2439	11	
		□ Form 4136 □ Other □ Total . ► 51 g	4	
	52	Total payments. Add lines 51a through 51g	52	0.
	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	367.
	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 ► Refunded ►	56	
1	Par	t VI Statements Regarding Certain Activities and Other Information (see instructions)	***	
		At any time during the 2019 calendar year, did the organization have an interest in or a signature or other author	rity over a	Yes No
		financial account (bank, securities, or other) in a foreign country? If 'Yes,' the organization may have to file FinCEN F	form 114,	
		Report of Foreign Bank and Financial Accounts If 'Yes,' enter the name of the foreign country here		Х
	60	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a	foreign trust?	$\frac{1}{x}$
	58	If 'Yes,' see instructions for other forms the organization may have to file.	orong	 ^-
	59	Enter the amount of tax-exempt interest received or accrued during the tax year > \$ 0.	of my knowledge and	
	c:~	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has an	knowledge	
	Sig: Her	Director Town	May the IRS discuss the preparer shown burnstructions)?	elow (see
	Her	Signature of officer Date Title	instructions)? XY	es No
		Print/Type preparer's name Preparer's signature Date Check if	PTIN	
	Paid	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		:1
	Pre	Amanda Tipton CPA Capanda Vitotoni (UPA) II-16-10 ser-employed	P0222606	
	pare	JI	82-2958895	
	Use		10001040	4477
	Onl		(605) 642-	
	BAA	TEEA0202L 02/21/20	rorm s	990-T (2019)

1 Description of debt-financed property		2 Gross income from or allocable to debt-	3 Deductions directly connected with or allocable to debt-financed property				
i Description of debt-infanced property		financed property	(a) Straight line depreciation (attach sch)	(b) Other deductions (attach schedule)			
(1)							
(2)							
(3)							
(4)							
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))			
(1)		do		,			
(2)		0/0					
(3)		9/0					
(4)		%					
			Enter here and on page 1, Part I, line 7, column (A).				
Totals		. . •					
Total dividends-received deduction	ons included in column 8		· · · · · · · · · · · · · · · · · · ·				
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Schedule,F.—Interest,	J				trolled Or			٠٠٠٠		• • • • • • • • • • • • • • • • • • • •			
		2 Employer -identification number		3 Net unrelated income (loss) (see instructions)		,	4,Tótal of spêcif payments mad				in c	6 Deductions directly connected with income in column 5	
(1),				· ·				1					
(2).						Ι							
(3),													
(4)						Ι							
Nonexempt Controlled Organiz	ations												
inci				Tótal of specified payments made		d ,	10 Part of colure included in the organization's gro		ie controlling		11 Deductions directly connected with income in column 10		
(j)			1			-		 					
(2)	<u> </u>		1										
(3)				·			· · · · · · · · · · · · · · · · · · ·						
(4)			i							1			
Totals						i	Add column here and on a 8, co	s 5 and pagé 1 olumn/	: Part I, line	Add here	d columns and on p 8, col	6 and 11 Enter age 1, Part I, line timn (B).	
Schedule G - Investme	nt Inco	me of a Se	ction	n 501	(c)(7), (9)).	or (17) Orga	aniza	tion (see)	nstruction	nns).	,	
1 Description of income		.2 Amount of income		3 Deductions directly connected (attach schedule)		4 Set-asides (attach schedule		es	5 Total deduction				
(1)					, , , , , , , , , , , , , , , , , , ,								
(2)											-		
(3)					L.		· · ·						
(4)		,											
Totals	". ►	Enter here an Part I, line 9,	colúm	ιὑ (ϡ)		in	Advertising	Inco	m e (see ii	structio	Parţ'i, li	re and on page. I ne-9, column (B)	
1 Description of exploited activity		2'Gross unrelate busines, income fro trade, ôr busines	Gross 3 Experience of the confidence of the conf		enses directly nected with oduction		Net income (loss) im unrelated trade business (column ninus column 3). a gain, compute urins 5 through 7.	'5 Gross income from activity that is not unrelated business income		6 Ex	pensès utable to umn 5	7 Excess exempt expenses (column 6 minus column 5, bu not more than column 4),	
(1)		1					'						
(2)						-						<u> </u>	
(3)											**		
(4)		1											
Totals		Enter here on page Part I, line column (e 1, oʻn'r ne, 10, Part, l		here and page 1, 1, line 10, imn (B).							Enter here and on page 1, Part II, line 25.	
Schedule J - Advertisir	na Inco	me (see inst	ruction	ns)				COPPENS VINERA	THE COMPANY OF SAME AND CO.	AND RAME OF TAXABLE	000.00 PAR. 0. 7 HER. 0. 100	·	
Partil Income From Pe					nsolida	ite	d Basis				•	·	
1 Name of periodical		2 Gross 3 advertising adv		3 D adve	Direct 4		Advertising gain or oss), (col. 2 minus col. 3) If a gain, compute cols5	5 Circulation income,		6 Readership costs		7 Excess readership costs (col. 6 minus, col. 5, but not more	
							through`7.					'than col. 4).	
(1)										·			
(2)						綴							
(3)`		 							"-		-		
(4)			+			12	encense entropy					or or managed and the last	
Totals (carry to Part II; line (5))	ì _{gtere} ▶												
RAA			,	TE	EA0204 L. (29/1	9/19				F	orm 990-T (2019)	

Form 990-T (2019) NORTHERN HILI	S AREA CASA	PROGRAM			46-0399483	Page 5
Part III Income From Periodica 7 on a line-by-line basis)			Basis (For each	periodical listed in	Part II, fill in colo	umns 2 through
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5 Circulation income	6 Readership costs	7 Excess readership costs (col. 6 minus col 5, but not more than col 4)
(1)						
(2)						
(4)						
Totals from Part I ▶				DEPARTY.	記述は認	
	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B).				Enter here and on page 1, Part II, line 26.
Totals, Part II (lines 1 – 5)	Officers Div	alawa and Tu	1. hand on 77 15 75 15	Refer to the second	MAN SHAPE	
Schedule K - Compensation of	Officers, Dire	ctors, and ir	ustees (see insi	ructions)		
1 Name			2 Title	3 Percent of time devote to business	d to únrela	ition attributable ted business
					ક્ષ	
					8	

TEEA0204 L 09/19/19

Form **990-T** (2019)

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No 1545-0172

2019

Attachment 179

Name(s) shown on return

Identifying number

46-0399483 NORTHERN HILLS AREA CASA PROGRAM Business or activity to which this form relates Form 990-T Rart 182 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 2 3 3 Threshold cost of section 179 property before reduction in limitation (see instructions). . . Reduction in limitation, Subtract line 3 from line 2. If zero or less, enter -0-........... 5 Dollar limitation for tax year, Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property 6 7 Listed property Enter the amount from line 29. Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 10 Carryover of disallowed deduction from line 13 of your 2018 Form 4562 Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instrs. 11 12 13 Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12...... 13 Note: Don't use Part II or Part III below for listed property. Instead, use Part V Părt'Il Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the 15 15 Property subject to section 168(f)(1) election 16 16 Other depreciation (including ACRS) ... Rart III MACRS Depreciation (Don't include listed property. See instructions) 4,407 17 MACRS deductions for assets placed in service in tax years beginning before 2019. 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 2019 Tax Year Using the General Depreciation System (b) Month and (C) Basis for depreciation (d) (e) (g) Depreciation (a)
Classification of property (business/investment use only — see instructions) year placed in service Recovery period 19 a 3-year property **b** 5-year property c 7-year property d 10-year property. e 15-year property f 20-year property. S/L 25 yrs g 25-year property.... 27.5 yrs S/L MM h Residential rental 27.5 yrs MM S/L property 39 yrs MM S/L i Nonresidential real MM \$/L Section C - Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System WHAT TO THE S/L 20 a Class life S/L 12 yrs b 12-year. . S/L MM .30 yrs c 30-year... S/L d 40-year.

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

Total: Add amounts from line 12, lines 14 through 17; lines 19 and 20 in column (g), and line 21. Enter here and on

Part IV & Summary (See instructions)

21

2019	Federal Statements						
	NORTHERN HILLS AREA CASA PROGRAM	46-0399483					
COMMERCIAL RENTA Cleaning and Repairs. Taxes	/ Connected with Income	1,490. 1,849.					

`>