(Rev. January 2020)

CHANGE OF ACCOUNTING PERIOD

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Open to Public

Departm	ent o	the	Treasu	ıη
Internal	Rever	iue S	Service	٠

OMB No. 1545-0047

Interr	al Revenue	Service	► Go to www.irs.gov/Form990 for instructions and the lates	st informa	tion.	1 1	Inspection
A	For the 2	019 calenda	ar year, or tax year beginning 10/01 , 2019, and en	iding 1	2/31	1	, 2019
	Check if app		C		D	Employer i	dentification number
	\neg		AKE WORTH TOWERS, INC.			59-11	49040
	Name o	1-1	L500 LUCERNE AVENUE		E	Telephone	
	H		LAKE WORTH, FL 33461		-		
	Initial re	eam			<u> </u>	201 2	85-7591
	Final retu	rn/terminated					
	Amend	ed return			G	Gross rece	ipts \$ 358,085.
	Applica	ation pending	F Name and address of principal officer ROBERT SPEAR		-		r subordinates? Yes X No
		5	SAME AS C ABOVE	H(b) Ar	e all subo	rdinales inc	cluded? Yes No ee instructions)
1	Tax-exem		X 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527	, 	INO, alla	CII a 1151. (SI	ee instructions)
<u> </u>	Website				OUD AYAM	ption numb	or ►
K		rganization			965		e of legal domicile FL
			X Corporation Trust Association Other L Year of for	rmation I	903	III State	e of legal comicile ET
Pa		Summary		~~~~~			
- [e the organization's mission or most significant activities THE ORG		<u>TON (</u>)PERAT	ES AN APARTMENT
ابو	Bu	TTTDING_	THAT PROVIDES LOW INCOME HOUSING FOR THE EI	LDERLY_		. _	
崩							
اي							. <u> </u>
Governance			If the organization discontinued its operations or disposed of	f more tha	n 25%	of its ne	t assets
			ng members of the governing body (Part VI, line 1a)		•		3 10
প্ত গ			ependent voting members of the governing body (Part VI, line 1b).				4
쁥			of individuals employed in calendar year 2019 (Part V, line 2a)	٠.,	•		5 4
Activities			of volunteers (estimate if necessary)	- Y-W-			6(
Ř			business revenue from Part VIII, column (C), line 12	VΑ			7a 0.
	b Net	t unrelated t	ousiness taxable income from Form 990-T, line 39	U			7b 0.
		· · · · · · · · · · · · · · · · · · ·			Prior	Year	Current Year
	8 Cor	ntributions a	and grants (Part VIII, line 1h).	. —		50,000	0. 100.
Revenue			ce revenue (Part VIII, line 2g)			/	
ye.		_	ome (Part VIII, column (A), lines 3, 4, and 7d)			67	4. 98.
B			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	···		83,94	
			- add lines 8 through 11 (must equal Part VIII, column (A), line 12)			34,61	
-+			nilar amounts paid (Part IX, column (A), lines 1-3)			34,01.	34,332.
			• • • • • • • • • • • • • • • • • • • •				
1			o or for members (Part IX, column (A), line 4).	·			
s l	15 Sal	laries, other	compensation, employee benefits (Part IX, column (A), lines 5-10)		3	77,06	5. 95,338.
Expenses	16a Pro	ofessional fu	indraising fees (Part IX, column (A), line 11e)				
e l	h Tot	al fundraisir	ng expenses (Part IX, column (D), line 25) ►	-			*
盃							
	17 Oth	ier expense	s (Part IX, column (A), lines 11a-11d, RE24)/FD IN COHRES			<u>86,40</u>	
			s Add lines 13-17 (must equal Part IX, column (A), (line 25) 18		4	63,47	0. 115,598.
	19 Rev	venue less e	expenses Subtract line 18 from line 12			71,14	521,066.
5 8			0C1 0 4 2021	Bear		Current Y	
alanc	20 Tot	al assets (P	Part X, line 16)			57,53	
Bal			(D. 1) (1. 05)			86,78	
Ind (OBJEN, OTT				
Z [und balances. Subtract line 21 from line 20		1	70,74	7. 149,681.
Pa	rt II S	Signature	Block				
Unde	r penalties o	of perjury, i decl	are that thave examined this return, including accompanying schedules and statements, an officer) is based on all information of which preparer has any knowledge	d to the best	of my kno	owledge and	d belief, it is true, correct, and
comp	lete Deciar	ation of prepare	er (other than officer) is based on all information of which preparer has any knowledge		-,		
						11141	<i>20</i>
Sig	n	Signature	of officer		Date	77	
Hei		ROBE	RT SPEAR	PRO	OPERT	Y MAN	IAGER
			rint name and title				
		Print/Type pre	eparer's name Preparer's signature / Dato	//	Che	ck T	of PTIN
				3/20	o l	لبا	"
Pai			J. SINNOTT, CPA	5/2	self	-employed	P01233004
	parer	Firm's name	► DIVINE, BLALÓCK, MARTIN & SELLARI, LLC'				
Pai Pre Use	Only	Firm's address	s 580 VILLAGE BLVD, SUITE 110		Firn	n's EIN ►	59-1498723
			WEST PALM BEACH, FL 33409		Pho	ine no 5	61-686-1110
Mav	the IRS	discuss this	return with the preparer shown above? (see instructions)			<u>_</u>	X Yes No
<u>_</u>			duction Act Notice, see the separate instructions.	TEEANION	01/01/01		Form 990 (2019
_~	a ruird	PEIMOIK HE	auction not trouce, see the separate monactions.	TEEA0101L	U1/21/20	J	1 01111 330 (201

	990 (2019) LAKE WORTH TOWERS, IN		59-1149040	Page 2
Par	t III Statement of Program Service A	ccomplishments		·
		or note to any line in this Part III		··_ · _
1	Briefly describe the organization's mission:			
	THE ORGANIZATION OPERATES AN A	APARTMENT BUILDING THAT PROVIDES L	OW INCOME HOUSIN	G FOR
	THE ELDERLY			-
				-
2	Did the organization undertake any significant progr	am services during the year which were not listed on the p	prior	
_				X No
	If "Yes." describe these new services on Schedule (U	
3		significant changes in how it conducts, any program s	services? Yes	X No
5	If "Yes," describe these changes on Schedule O	Significant changes in now it conducts, any program.	JOHNSON 103	Δ
4	· · · · · · · · · · · · · · · · · · ·	amplichments for each of its three largest program so	onuces as measured by a	vnenses
7	Section 501(c)(3) and 501(c)(4) organizations at and revenue, if any, for each program service re	complishments for each of its three largest program se re required to report the amount of grants and allocati eported.	ions to others, the total ex	penses,
4 a			(Revenue \$)
	TO PROVIDE LOW INCOME HOUSING	TO THE ELDERLY		
			- 	
4 b	(Code:) (Expenses \$	including grants of \$)	(Revenue \$)
				
				
				
10	: (Code.) (Expenses \$	including grants of \$	(Revenue Š	
7.	/ (Expenses +		(1010100 +	
		· 		
				
				
4	Other program services (Describe on Schedule	0.)		
7,		ing grants of \$) (Revenue	Ś)
		115,598.	т	<u> </u>
			Form	990 (2019)
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Part IV | Checklist of Required Schedules

			Yes	No
`,1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V .	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
ā	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
Ł	Did the organization report an amount for investments – other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VII	11 b		X
C	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		X
c	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
BAA	TEEA0103L 07/31/19		990	(2019)

' Form 990 (2019) LAKE WORTH TOWERS, INC.

Rate Ve Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III .	22		X
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		X
ŧ	o Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
ŀ	s Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II	26		_ X_
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions)		和過程	The state of the s
ā	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
t	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		X
C	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If</i> Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ł	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 a	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 22		门推	
I	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b 0	10.00		1
(c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	X	
BAA		1		(2019)

Form 990 (2019) LAKE WORTH TOWERS, INC.

[Part V | Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
`2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	4			
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2 b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-		
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3 a		X
	b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule 0	[3Ь		
	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4 a		Х
	b If 'Yes,' enter the name of the foreign country▶				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				<u> </u>
	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5 a		X
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	-	5 b		X
1	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	- 1	5 c		<u> </u>
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	on	6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6 b		
7	Organizations that may receive deductible contributions under section 170(c).	- 1			ŀ
i	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	-	7 a		X
ı	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7 c		Х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d				L
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	L	7 e		X
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7 f		X
	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	-	7 h	• •	
٥	organization have excess business holdings at any time during the year?	<u> </u>	8		X
۵	Sponsoring organizations maintaining donor advised funds.	-	$\stackrel{\circ}{\longrightarrow}$		<u>^</u>
	a Did the sponsoring organization make any taxable distributions under section 4966?	F	9 a		├
	b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	-	9 b		
	Section 501(c)(7) organizations. Enter	F	-		\vdash
	a Initiation fees and capital contributions included on Part VIII, line 12				
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b	-	ļ		
	Section 501(c)(12) organizations. Enter				
	a Gross income from members or shareholders				
Ł	Gross income from other sources (Do not net amounts due or paid to other sources		ł		l
	against amounts due or received from them).				
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	· [12 a		<u> </u>
	of f 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		ĺ		ĺ
	Section 501(c)(29) qualified nonprofit health insurance issuers.	-			
ā	a Is the organization licensed to issue qualified health plans in more than one state?	<u> </u>	13 a		<u> </u>
	Note: See the instructions for additional information the organization must report on Schedule O		į	_	
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans [13b]			,	
	Enter the amount of reserves on hand [13c]		10	<u> </u>	X
	a Did the organization receive any payments for indoor tanning services during the tax year?	-	14 a		
	o If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	Ļ	14Ь		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If 'Yes,' see instructions and file Form 4720, Schedule N.	-	15		X
10		-	16		X
מו	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	<u> </u>	16		 ^ `
AA		_,	<u>l</u> orm	990	<u>(2019)</u>

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b	below,	and	for
a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or ch	anges (on	
Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI			X
Section A. Governing Body and Management			— —
		Yes	No
	10	•	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad			
authority to an executive committee or similar committee, explain on Schedule O			<i>'</i>
b Enter the number of voting members included on line 1a, above, who are independent .	7	٠.	١٠,
officer, director, trustee, or key employee?	2	,	X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		x
4 Did the organization make any significant changes to its governing documents			<u> </u>
since the prior Form 990 was filed?	4		Х
5 Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		X
6 Did the organization have members or stockholders?	6		X
7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7 a		Х
b Are any governance decisions of the organization reserved to (or subject to approval by) members,			
stockholders, or persons other than the governing body?	7 b		Х
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		,	
a The governing body?	8 a	Х	<u> </u>
b Each committee with authority to act on behalf of the governing body?	8 b		X
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O	9		X
Section B. Policies (This Section B requests information about policies not required by the Internal	Reven	ie C	ode.)
		Yes	No
10 a Did the organization have local chapters, branches, or affiliates?	10 a	_	X
b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 Ь	 	
11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE	> <u> </u>	<u> </u>	
12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b		
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c		
13 Did the organization have a written whistleblower policy?	13		Х
14 Did the organization have a written document retention and destruction policy?	14		X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	7		
a The organization's CEO, Executive Director, or top management official	15 a	· ·	X
b Other officers or key employees of the organization	15 b		X
If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a	,	X
b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its	-	·	· ·
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b	·	
Section C. Disclosure	•		
17 List the states with which a copy of this Form 990 is required to be filed ►			
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	n 501(c)((3)s oı	nly)
Own website Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements a	vailable to		
the public during the tax year SEE SCHEDULE O 20 State the name, address, and telephone number of the person who possesses the organization's books and records >			
ROBERT SPEAR 1500 LUCERNE AVENUE LAKE WORTH FL 33461 561 585-7591			
		- 000	(0010)

Form 990 (2019)	LAKE	WORTH	TOWERS,	INC.

59-1149040

Page 7

Part VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - · List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

See instructions for the order in which to list the persons above

[X] Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

	<u> </u>	Ţ		(C))					
(A) Name and tille	(B) Average hours per	than	one both dir	box, an o ector	unles officer /truste		son a	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	week (list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ROBERT SPEAR	50									
ADMINISTRATOR	0				X			27,153.	0.	0.
(2) DR. LAURA CHIN-LENIN DIRECTOR	1	Х						0.	0.	0.
(3) DENNIS MOORE	11									
PRESIDENT	0	X		X			<u> </u>	0.	0.	0.
	1									
SECRETARY	0	X.		Х			ļ	0.	0.	0.
(5) ALTON D. LIN	1	,,		.,				ا م	0	0
VICE PRESIDENT (6) BILL OTIS	0	X		X			<u> </u>	0.	0.	0.
DIRECTOR		X						0.	0.	0.
(7) MARCEL PIZ	1	Λ						0.1		
DIRECTOR	- -	X					İ	0.	0.	0.
(8) JOY BOZICEVIC	1							<u> </u>		
DIRECTOR	0	Х						0.	0.	0.
(9) CHUCK RUSS	1							-		
DIRECTOR	0	Х						_0.	0.	0.
(10) BRIAN WILSON	1									
DIRECTOR	0	X					<u>_</u>	0.	0.	0.
(11) BRAD ZAHN	1									
DIRECTOR	0	Х						0.	0.	<u> </u>
(12)										
(13)										
(14)	_ _			_				-		

Part VII Section A. Officers, Directors, 11	(B)	rtey			C)	es,	ane	Highest Con	ipensateu Emp	toyees (continued)
(A)	Average hours			check		e than		(D) Reportable	(E) Reportable	(F)
Name and title	per week (list any	offi	cer ar	nd a	direct	or/trus	itee)	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from
	hours for related	or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(11 2 (633 (11100)	(** 2 7055 **********************************	the organization and related organizations
	organiza - tions below dotted	or trust	al for		loyee	ompen				
	line)	%	tee			sated	-			
<u>(15)</u>										
(16)										
(17)		}								
(18)		<u> </u>			-					
(19)		<u> </u>			ļ					
					<u></u>					
(20)	 	-								
(21)										
(22)		-								
(23)										
(24)										
(25)										
1 b Subtotal	L				L	L	>	27,153.	0.	0.
c Total from continuation sheets to Part VII, Secti d Total (add lines 1b and 1c)	on A						►	0. 27,153.	0. 0.	0. 0.
2 Total number of individuals (including but not limited	to those I	sted	abov	ve) v	who	recer	ved			
from the organization $ ightharpoonup 0$									- , ,	Yes No
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for suc	tor, truste	e, ke	у ег	mple	oye	e, or	hıgl	hest compensated	l employee	3 X
4 For any individual listed on line 1a, is the sum of	f reportab	le co	mpe	ensa	tion	and	oţh	ner compensation	from	3 43
the organization and related organizations greate such individual										4 X
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e compen s,' <i>comple</i>	isatio	n fro	om <i>lule</i>	aпу J fc	unre r suc	late ch p	ed organization or person	ındıvıdual	5 X
Section B. Independent Contractors 1 Complete this table for your five highest compen	sated inde	epen	deni	t co	ntra	ctors	tha	at received more t	han \$100,000 of	
compensation from the organization Report compensation Report Re		tne c	alen	dar <u>y</u>	year	enai	ng v	(B))	(C)
Name and business add	ress							Description	or services	Compensation
1						_				
2 Total number of independent contractors (including t	out not limi	ted to	tho	se l	ısted	abo	ve)	who received more	than '-	The state of the s
\$100,000 of compensation from the organization	► 0								;	Form 990 (2019)
BAA		TEEAC	108L	07/3	31/19					Form 990 (2019)

Form 990 (2019) LAKE WORTH TOWERS, INC. Part VIII Statement of Revenue

		Check if Schedule O contains	a respo	nse or note to ar	ly line in this Part V	/ III		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
its	1 a	Federated campaigns	1 a					
irar our	b	Membership dues	1 b					
Contributions, Gifts, Grants and Other Similar Amounts	¢	Fundraising events	1 c					
ar.	d	Related organizations	1 d					
S E	e	Government grants (contributions)	1 e					
Fig. 2	f	All other contributions, gifts, grants, and	1 f	100				
돌	١,	similar amounts not included above Noncash contributions included in		100.				
FO	9	lines 1a-1f	1 g					
	h	Total. Add lines 1a-1f		<u></u>	100.		特別的政治	33700000000000000000000000000000000000
Program Service Revenue			ε	Business Code	12年至125日	多型型的 企业的特别	也是他就可以不是	TOTAL STATE OF THE
¥er	2 a							
8	b							
Ž	С			· · · · · · · · · · · · · · · · · · ·				
Ser	d						<u></u>	
am	e	<u></u>						
g	ı	All other program service revenue	e [_			4 . Y.65 . X Y	Subject Of the Subjec	27 277 277 37 32 32
<u> </u>	g	Total. Add lines 2a-2f		·		康纳一次的人类	A CONTRACTOR	
	3	Investment income (including divide other similar amounts)	ends, inte	erest, and	98.	00		
	4	Income from investment of tax-ex	vemnt h	and proceeds ►	98.	98.		
	5	Royalties	xempt b	ond proceeds.				<u>`</u>
		(i) Re	eal	(ii) Personal	Lies and Control	354,6512-6175 131.39	CONTRACTOR CONTRACTOR	Partie 1 State of the State of
	6 a	Gross rents 6a 356,						
	b	Less rental expenses 6b 263,						
	l .		398.					
		Net rental income or (loss)	370.1	-	93,398.	93,398.	STILL CONSCION HOSEIGNESS	ATLA OF FIRE PROPERTY.
	ĺ	Gross amount from (i) Secur	rities	(II) Other		PART TO STATE OF STAT	公司 公司第2000年3	SULT TO LEASE BEEN
	/ a	sales of assets						
	h	other than inventory Less cost or other basis		· 				
		and sales expenses 7b						
	С	Gain or (loss) 7c			14. 多型業績			
	d	Net gain or (loss) .		-				
ō	8a	Gross income from fundraising events						
ä		(not including \$	_					
eve		of contributions reported on line 1c)						
Other Revenu		Sec Part IV, line 18	8a					
je		Less direct expenses	86		CONTRACTOR OF			医原系数数据
δ		Net income or (loss) from fundrai	ising evi	ents	1 . a Mano Trianam was	Harris State	ATHERISTICATES A PRODUCT	Town TVE MOSSON FOR THE
	9 a	Gross income from gaming activities See Part IV, line 19						
			9 a					
		Less: direct expenses	9b		3. 化光型光型气体测量器	医器机结合工业的	A SANTE A SANTE	400000000000000000000000000000000000000
		Net income or (loss) from gaming	activiti	es , 	विभाग का स्वास्थ्य संचारका क्षापालका	Marine Paris 1 2 2 1 2000	CARTELINE TO TRANSPORT	10000 300 00 00 00 00 00 00 00 00 00 00 0
	10 a	Gross sales of inventory, less returns and allowances	102					
		Less cost of goods sold	10a 10b				企业的企业	
		Net income or (loss) from sales of		ony -	10. 中心是近天的	学品を会かしまた。これがままが 。	er sent engantement for	CHARACTER STATE OF THE STATE OF
		The mediae of (loss) from sales of	T	Business Code	TO SECTION			
~	11 a	MISCELLANEOUS			650.	The state Tables & St. Commist of the	The proof by Attach to 1 th	650.
瓦茅	b	LAUNDRY INCOME			286.			286.
Miscellaneous Revenue	c	TTOTAL THOONE			200.			200.
2 66	ď	All other revenue				-		,
Ĕ		Total. Add lines 11a-11d		-	936.	The state of the s	The water of the state of	
		Total revenue. See instructions		>	94,532.	93,496.	0.	936.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX. (D) Do not include amounts reported on lines Total expenses Fundráising Program service Management and 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16. Benefits paid to or for members Compensation of current officers, directors, 27,153 27,153 trustees, and key employees 0 0. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0. U Other salaries and wages 33,136 33,136 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 8,468 8,468 Other employee benefits 21,910 21,910 Payroll taxes 4,671 4,671 Fees for services (nonemployees) a Management **b** Legal 1,548 1,548 c Accounting d Lobbying THE TOTAL PROPERTY. 逐渐渐渐"心影"小 e Professional fundraising services See Part IV, line 17 f Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion Office expenses 3,143 3,143 Information technology Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 160 160. 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Other expenses Itemize expenses not 24 covered above (List miscellaneous expenses on line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a ADMINISTRATIVE RENT FREE UNIT 7,140 7,140 b GRANT WRITING 3,094 3,094 2,551 C MISCELLANEOUS EXPENSES 2,551 d TELEPHONE EXPENSE 2,162 2,162 462 462 e All other expenses 25 Total functional expenses Add lines 1 through 24e 0. 0. 115,598. 115,598. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ If following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

1 Cash - non-interest-bearing 2 Savings and temporary cash investments 268,169, 2 214,036. 3 268,169, 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 268,89 2 214,036. 3 2 2 2 2 2 2 2 2 2			Check if Schedule O contains a response or note to	o any line in this	Part X					
2 Savings and temporary cash investments 268,169, 2 214,036.	•					(A) Beginning of year		(B) End of year		
Pledges and grants receivable, net		1	Cash non-interest-bearing				1			
4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(n)(1)), and persons described in section 4958(n)(3)(8) 6 Loans and other receivables from other disqualified persons (as defined under section 4958(n)(1)), and persons described in section 4958(n)(3)(8) 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis complete Part VI of Schedule D 11 Investments — publicly traded securities 12 Investments — other securities See Part IV, line 11 13 Investments — other securities See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 17 Crants payable and accrued expenses 18 Crants payable and accrued expenses 19 Deferred reverue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% conditional buildings and controlled entity or family member of any of these persons 28 Eucred mortgages and notes payable to unrelated third parties 29 Charla liabilities. Add lines 17 through 25 29 Total liabilities. Add lines 17 through 25 20 Total liabilities. Add lines 17 through 25 20 Total liabilities. Add lines 17 through 25 21 Corganizations that do not follow FASB ASC 958, check here and complete lines 27 through 33. 20 Capatial stock or trust payables to any current funds 29 Capatial stock or trust principal, or current funds 29 Capatial stock or fund balances 29 Capatial stock or fund balances 29 Capatial stock		2	Savings and temporary cash investments		268,169.	2	214,036.			
5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contribution, or 35% contribled entity of rainity member of any of these persons (as defined under section 4958(f())), and persons described in section 4958(c)(3)(8) 7 Notes and loans receivable, net 8 Inventiones for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 10a Land, buildings, and equipment cost or other basis 10 compiler Part VI of Schedule D 1 b Less' accumulated depreciation 11 Investments – publicity traded securities 12 Investments – publicity traded securities 12 Investments – publicity traded securities 13 Investments – publicity traded securities 14 Intangible assets 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 28 Net assets with donor restrictions 29 Total fliabilities, Add lines 17 through 25 29 Crapatizations that follow FASB ASC 958, check here		3	Pledges and grants receivable, net				3			
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Section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 7 1,863.		5	trustee, key employee, creator or founder, substantial	ustee, kev emolovee, creator or founder, substantial contributor, or 35%						
7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 70,082. 9 38,163. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10b 2,344,381. 318,367. 10c 313,827. 11 Investments – publicly traded securities 11 Investments – publicly traded securities 12 Investments – program-related See Part IV, line 11 Intended to 11 Investments – program-related See Part IV, line 11 Intended to 11 Investments – program-related See Part IV, line 11 Intended to 12 Investments – program-related See Part IV, line 11 Intended to 13 Intended to 15 Investments – program-related See Part IV, line 11 Intended to 15 Investments – program-related See Part IV, line 11 Intended to 15 Intended Intende		6		ed under	TO THE PARTY OF TH	11	EFFERENCE.			
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18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21	Ì	16	Total assets. Add lines 1 through 15 (must equal line	33)		657,533.	16	568,954.		
Deferred revenue Tax-exempt bond liabilities Tax-exempt bond liabilities Tax-exempt bond liabilities Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Retained earnings, endowment, accumulated income, or other funds Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 15, 673. 19 3, 177. 20 21 22 23 213, 218. 21 24 25 26 27 28 28 29 29 29 29 29 20 21 20 21 21 22 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 213, 218. 216, 124. 23 216, 124. 23 213, 218. 216, 124. 23 216, 124. 23 213, 218. 216, 124. 23 216, 124. 24 216, 124. 23 216, 124. 24 216, 124. 23 216, 124. 24 216,	一	17	Accounts payable and accrued expenses	90,795.	17	70,269.				
20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 28 Net assets with donor restrictions 29 Capital stock or trust principal, or current funds 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 20 21 21 21 22 22 22 23 213,218. 216,124. 23 213,218. 216,124. 23 213,218. 216,124. 23 213,218. 217,729. 25 100,729. 24 486,786. 26 419,273. 25 129,413. 27 113,579. 41,334. 28 36,102. 41,334. 28 36,102. 41,334. 28 36,102.	٠	18	• •							
Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. Net assets with donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. 29 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 216, 124, 23 213, 218. 216, 124, 23 21, 218. 216, 124, 23 21, 218. 216, 124, 23 21, 218. 216, 124, 23 21, 218. 216, 124, 23 21, 218. 216	ļ					15,673.		3,177.		
Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here And complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions 28 Net assets with donor restrictions 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 170,747. 32 149,681.		20	•							
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24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. 28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 1 149,681.	⊐	23				216 124		213 219		
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here And complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 100, 729. 100, 729. 129 486, 786. 26 419, 273. 129, 413. 27 113, 579. 41, 334. 28 36, 102. 29 Paid-in or capital surplus, or land, building, or equipment fund 30 Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances	ł			•						
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Net assets without donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances 129, 413. 27 113,579. 41,334. 28 36,102. 29 30 31 31 32 149,681.	Š			Δ						
28 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 41,334. 28 36,102.	<u>a</u>	27	Net assets without donor restrictions			129,413.	27			
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 31 31 31 32 149, 681. Total liabilities and net assets/fund balances 657,533. 33 568,954.	m	28	Net assets with donor restrictions	_	<u>.</u>	41,334.	28	36,102.		
29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 4 170,747. 32 149,681.	Fund			ck here ►						
30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 467,533.33 568,954.	5	29	-		THE PERSON IS IN MICHIGARY	29	The same of the second course			
31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 31 149,681.	\$									
32 Total net assets or fund balances 170,747. 32 149,681. 33 Total habilities and net assets/fund balances 657,533. 33 568,954.	88		-							
2 33 Total liabilities and net assets/fund balances 657,533, 33 568,954.	₹					170.747	<u> </u>	149.681		
	ş									

· Forn	n 990 (2019) LAKE WORTH TOWERS, INC.	9-1149040	Page 12		
Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		· 🗆		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	94,532.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	115,598.		
3	Revenue less expenses Subtract line 2 from line 1 .	. 3	-21,066.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	170,747.		
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	149,681.		
Pa	rt'XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
			Yes No		
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	<u> </u>			
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2 a	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis				
ŀ	were the organization's financial statements audited by an independent accountant?		2 b X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both X Separate basis				
(of 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the arreview, or compilation of its financial statements and selection of an independent accountant?	udit,	2c X		
_	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O				
3 a	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing Audit Act and OMB Circular A-133?.	le	3a X		
i	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why on Schedule O and describe any steps taken to undergo such audits	audit	3 b X		
ВАА	TEEA0112L 01/21/20		Form 990 (2019)		

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SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Name of the organization	Name of the organization					Employer identific	Employer identification number		
LAKE WORTH TO						59-114904			
			organizations must				tions.		
Č-	•		(For lines 1 through 12,		-		_ a		
<u></u>			churches described in sec	-		(1).	$\mathcal{D}_{\mathcal{A}}$		
2 A school de	scribed in section	170(b)(1)(A)(ii). (Attach	Schedule E (Form 990 o	r 990-EZ))		U 1		
3 A hospital	or a cooperative	hospital service organ	nization described in se	ction 170)(b)(1)(A	۸)(iii).			
	-	ation operated in conj	unction with a hospital	describe	d in sec	ction 170(b)(1)(A)(iii) E	Inter the hospital's		
name, city,	and state.	-							
5 An organiz	atıon operated fo 0(b)(1)(A)(ıv). (C	or the benefit of a collo omplete Part II)	ege or university owned	or opera	ated by	a governmental unit de	escribed in		
6 A federal, s	state, or local go	vernment or governm	ental unit described in s	section 1	70(b)(1)	(Α)(ν).			
7 An organiza	tion that normally 170(b)(1)(A)(vi).	receives a substantial (Complete Part II)	part of its support from a	governm	ental un	it or from the general pul	blic described		
8 A commun	ity trust describer	d in section 170(b)(1)	(A)(vi). (Complete Part	li)					
			ction 170(b)(1)(A)(ix) oper e (see instructions) Ente						
			33-1/3% of its support fi						
from activit investment	ies related to its income and unre	exempt functions—su	bject to certain exception le income (less section	ons. and	(2) no i	more than 33-1/3% of i	ts support from aross		
		, , , , , ,	ely to test for public saf	ety See	section	ı 509(a)(4).			
or more pu	blicly supported of	organizations describe	ely for the benefit of, to ed in section 509(a)(1) o	r sectio	n 509(a	X2). See section 509(a	ut the purposes of one)(3). Check the box in		
			supporting organization				the supported		
organization complete P	pporting organizations (s) the power to repart IV, Sections	egularly appoint or elec A and B.	ed, or controlled by its sup t a majority of the directo	rs or trus	tees of t	he supporting organization	on You must		
managemer	supporting organi it of the supporting lete Part IV, Sec	organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organizat	having control or ion(s) You		
c Type III fund organizatio	tionally integrated	d. A supporting organizations) You must com	tion operated in connection plete Part IV, Sections	n with, ar A, D, an d	nd functiond E.	onally integrated with, its	supported		
d Type III non functionally	functionally integrated The	grated. A supporting organization generally	ganization operated in col y must satisfy a distribu is A and D, and Part V.	nnection tion requ	with its s Jiremen	supported organization(s t and an attentiveness) that is not requirement (see		
e Check this	box if the organiz	zation received a writt	ten determination from supporting organization	the IRS					
	ber of supported		supporting organization	•					
		on about the supporte							
(i) Name of supported	organization	(II) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) li organizat in your g docum	ion listed overning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
				103		-			
(A)	<u> </u>								
(B)					_				
(C)_									
(D)									
(E)									
Total				•	, `				
Total		1	i •	1 1	٠.		1		

Part II: Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 (c) 2017 (d) 2018 (e) 2019 (f) Total (b) 2016 Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants') Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ► **(b)** 2016 (a) 2015 (c) 2017 (d) 2018 (e) 2019 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. Add lines 7 through 10 Gross receipts from related activities, etc (see instructions) 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)). 14 % 15 Public support percentage from 2018 Schedule A, Part II, line 14 15 % 16a 33-1/3% support test-2019. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33-1/3% support test-2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Part III

LAKE WORTH TOWERS, INC.

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support	· · · · · · · · · · · · · · · · · · ·			 		
Calen	dar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')				50,000.		50,000.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	1 270 260	1 212 701	1 242 604		257 007	
3	Gross receipts from activities that are not an unrelated trade or business under section 513	1,2/8,308.	1,312,781.	1,342,664.	1,411,932.	357,987.	<u>5,703,752.</u> 0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	1,278,368.	1,312,781.	1,342,684.	1,461,932.	357,987.	5,753,752.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0.	0.	0.	0.	0.	0.
С	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8	Public support. (Subtract line 7c from line 6)		7	11.57 KM 12.5			_5,753,752.
Sec	tion B. Total Support	· · · · · · · · · · · · · · · · · · ·					
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6	1,278,368.	1,312,781.	1,342,684.	1,461,932.	357,987.	5,753,752.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	142.	69.	99.	674.	98.	1,082.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	142.	69.	99.	674.	98.	1,082.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			1			0.
	Total support. (Add lines 9, 10c, 11, and 12)		1,312,850.			358,085.	5,754,834.
	First five years. If the Form 990 organization, check this box and	stop here		nd, third, fourth, o ———	or fifth tax year as 	a section 501(c)(i	▶ 🗌
	tion C. Computation of Pul						
	Public support percentage for 20	• •	• • • •	ne 13, column (f))	. 15	99.98 %
	Public support percentage from 2					16	99.98 %
	tion D. Computation of Inv						
17	Investment income percentage for	or 2019 (line 10c,	column (f), divide	ed by line 13, colu	umn (f))	17	0.02 %
	Investment income percentage fa					. 18	0.02 %
	33-1/3% support tests—2019. If t is not more than 33-1/3%, check	this box and stop	o here. The organ	ization qualifies a	as a publicly supp	orted organization	. ► X
	33-1/3% support tests—2018. If t line 18 is not more than 33-1/3%	, check this box a	and stop here. The	e organızatıon qu	alifies as a public	y supported orgai	1/3%, and nization ►
20	Private foundation. If the organiz	zation did not che	ck a box on line 1	14, 19a, or 19b, c	heck this box and	see instructions	▶

· Schedule A '(Form 990 or 990-EZ) 2019 LAKE WORTH TOWERS, INC.

Supporting Organizations (Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		l
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		<u></u>
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	: Substitutions only. Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If 'Yes,' provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7° If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI	9c		
10 a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below	10a	_	
b	DIDID THE ORGANIZATION HAVE ANY EXCESS BUSINESS HOLDINGS IN THE TAX YEAR? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

[, 0	it iv Supporting Organizations (continued)			
.11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the	44		
	governing body of a supported organization?	11a		
	b A family member of a person described in (a) above?	11b 11c		ļ
_	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI. ction B. Type I Supporting Organizations	110		<u> </u>
<u> </u>	cuon B. Type i Supporting Organizations	_	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	··. 2		
Sec	ction C. Type II Supporting Organizations			
	ſ		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		:
Sec	ction D. All Type III Supporting Organizations			
	F		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	,	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		-
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard	3		į
Sec	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
;	The organization satisfied the Activities Test Complete line 2 below			
	b The organization is the parent of each of its supported organizations Complete line 3 below			
	c 🗍 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struc	tions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
;	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a	***************************************	
1	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b	,	
3	Parent of Supported Organizations Answer (a) and (b) below.		٠, ا	
i	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	За		
	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard	3b		

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	anizat	ions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on No	ov 20, 1970 (explain in it complete Sections A	n Part VI). See through E
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
7	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)			
a	Average monthly value of securities	1a		
Ŀ	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
C	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
_ 7	Recoveries of prior-year distributions	7		
_ 8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5	_	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	· · · · · · · · · · · · · · · · · · ·	
	Check here if the current year is the organization's first as a non-functionally integrated (see instructions)	egrated ———		<u> </u>
RΔΔ	_		Schedule A (F	orm 990 or 990-F7) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Section D — Distributions	Supporting Organiza	tions (continuea)	Current Year
1 Amounts paid to supported organizations to accomplish exempt p	ourposes		
2 Amounts paid to perform activity that directly furthers exempt purpose in excess of income from activity),	
3 Administrative expenses paid to accomplish exempt purposes of	supported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)	-		
6 Other distributions (describe in Part VI) See instructions			
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to which the organization Part VI). See instructions	ation is responsive (provide	details	
9 Distributable amount for 2019 from Section C, line 6	,		
10 Line 8 amount divided by line 9 amount			
Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 ,Distributable amount for 2019 from Section C, line 6		建筑建筑建筑	
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required — explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2019		高级的现在分词	第三条数据数据等以图 :
a From 2014 .	DESTRUCTION		MANAGEM TO THE STATE OF THE STA
b From 2015	學、如果是於於西方	第一次基本公司	是自然發展的概念。如
c From 2016	是學家的學家	是自己的智慧的思想是	20年代制 是 100%
· d From 2017		DIFFERENCE OF THE PARTY OF THE	企业的证明的
e From 2018	1000000000000000000000000000000000000		
f Total of lines 3a through e		問題問題的可以	於於於於於於於於於於於於於於於於於於於於於於於於於於於於於於於於於於於於
g Applied to underdistributions of prior years	是是此是多是的		了一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个
h Applied to 2019 distributable amount	温度影響學家		
i Carryover from 2014 not applied (see instructions)		河流道社通过	
j Remainder Subtract lines 3g, 3h, and 3i from 3f			1055-1988
4 Distributions for 2019 from Section D, line 7 \$			
a Applied to underdistributions of prior years			以外外的基础
b Applied to 2019 distributable amount		ALL THE STATE OF T	hat a link against second at a lateral
c Remainder Subtract lines 4a and 4b from 4	N LUCY STATE OF OUNTER OF JAMES A.	法部門的問題	
5 Remaining underdistributions for years prior to 2019, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2019 Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2020. Add lines 3 _j and 4c			
8 Breakdown of line 7			
a Excess from 2015	THE REPORT OF	对如同点或是	
b Excess from 2016	是是更多的。	是正确的基础的	
c Excess from 2017			TANK THE RESERVE THE PROPERTY OF THE PROPERTY
d Excess from 2018			
e Excess from 2019 ,		過熱病質問題言意	
BAA			rm 990 or 990-EZ) 2019

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59-1149040 Part VIV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D (Form.990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

_	LAKE WORTH TOWERS, INC.			59-1149040
Par	t I Organizations Maintaining Dono	or Advised Funds or Other S	Similar Funds or Ac	counts.
	Complete if the organization ans	wered 'Yes' on Form 990, P	art IV, line 6.	
		(a) Donor advised fund	ls (b)	Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dor are the organization's property, subject to the	nor advisors in writing that the ass organization's exclusive legal con	ets held in donor advise trol?	d funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing the of the donor or donor advisor, or	nat grant funds can be u for any other purpose co	ised only onferring Yes No
Par	t II Conservation Easements.			
	Complete if the organization ansi			
1	Purpose(s) of conservation easements held by	the organization (check all that a	pply)	
	Preservation of land for public use (for examp	ole, recreation or education)		torically important land area
	Protection of natural habitat		Preservation of a cer	tified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization hast day of the tax year	neld a qualified conservation contribu	tion in the form of a conse	
	Total a colonia (consequente		-	Held at the End of the Tax Year
-	Total number of conservation easements		2a	
	Total acreage restricted by conservation ease		2 b 2 c	
	Number of conservation easements on a certif	•	·	
c	Number of conservation easements included in structure listed in the National Register		2 d	
3	Number of conservation easements modified, transtax year ►	sferred, released, extinguished, or te	rminated by the organizat	on during the
4	Number of states where property subject to conse	rvation easement is located 🟲		
5	Does the organization have a written policy re		spection, handling of vio	
_	and enforcement of the conservation easemer			∐Yes ∐No
6	Staff and volunteer hours devoted to monitoring, i	nspecting, handling of violations, and	d enforcing conservation e	asements during the year
7	Amount of expenses incurred in monitoring, inspe	cting, handling of violations, and enf	orcing conservation easen	nents during the year
8	Does each conservation easement reported or and section $170(h)(4)(B)(u)$?	n line 2(d) above satisfy the require	ements of section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization rep include, if applicable, the text of the footnote to conservation easements	orts conservation easements in its of the organization's financial state	revenue and expense sements that describes th	statement and balance sheet, and e organization's accounting for
Par	III Organizations Maintaining Colle	ctions of Art, Historical Tre	asures, or Other Si	milar Assets.
	Complete if the organization ansi	wered 'Yes' on Form 990, P	art IV, line 8	
1 a	If the organization elected, as permitted under historical treasures, or other similar assets her Part XIII the text of the footnote to its financial	d for public exhibition, education,	or research in furtheran	nd balance sheet works of art, ce of public service, provide in
b	If the organization elected, as permitted under historical treasures, or other similar assets held for following amounts relating to these items	FASB ASC 958, to report in its report public exhibition, education, or reso	evenue statement and ba earch in furtherance of pul	alance sheet works of art, blic service, provide the
	(i) Revenue included on Form 990, Part VIII,	line 1		► \$
	(ii) Assets included in Form 990, Part X			► \$
2	If the organization received or held works of art, h amounts required to be reported under FASB	istorical treasures, or other similar as ASC 958 relating to these items.	ssets for financial gain, pr	ovide the following
а	Revenue included on Form 990, Part VIII, line	-		► \$
ь	Assets included in Form 990, Part X			► \$

					
Schedule D (Form 990) 2019 LAKE	морти томгрс	TNC		59-1149	9040 Page 2
Part III Organizations Maintai			al Treasures, or C		
3 Using the organization's acquisition, items (check all that apply)	accession, and other	records, check any of	the following that make	e significant use of its o	collection
a Public exhibition		d Loan or ex	change program		
b Scholarly research		e Other	5 , 5		
c Preservation for future genera	ations	Ш			
Provide a description of the organiza Part XIII	ation's collections and	explain how they furth	ner the organization's e	xempt purpose in	
5 During the year, did the organizat to be sold to raise funds rather th	an to be maintained	as part of the organ	ization's collection?	{	Yes No
Part IV Escrow and Custodial line 9, or reported an a	Arrangements. 6 amount on Form	Complete if the og 990, Part X, line	organization answ 21.	ered 'Yes' on For	m 990, Part IV,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodian or oth	er intermediary for c	ontributions or other	assets not included	Yes No
b If 'Yes,' explain the arrangement	in Part XIII and comp	olete the following ta	ble.		
				[Amount
c Beginning balance				1 c	
d Additions during the year				1 d	
e Distributions during the year				1 e	
f Ending balance				1 f	
2 a Did the organization include an ai	mount on Form 990,	Part X, line 21, for e	scrow or custodial ac	count liability?	Yes No
b If 'Yes,' explain the arrangement	in Part XIII Check he	ere if the explanation	n has been provided o	on Part XIII	
Part V Endowment Funds. Co	omplete if the org	janization answe	red 'Yes' on Forn	n 990, Part IV, lin	e 10.
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
b Contributions					
C Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance .					
2 Provide the estimated percentage	of the current year	end balance (line 1g	, column (a)) held as		
a Board designated or quasi-endowme	ent ►	%			
b Permanent endowment ►					
	0.				

c Term endowment 🟲

The percentages on lines 2a, 2b, and 2c should equal 100%

3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) Unrelated organizations

(ii) Related organizations

b If 'Yes' on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

Rart VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land.		194,880.	- 44	194,880.
b Buildings .		2,094,973.	2,094,973.	0.
c Leasehold improvements		338,041.	224,721.	113,320.
d Equipment		6,801.	3,467.	3,334.
e Other		23,513.	21,220.	2,293.
Total. Add lines 1a through 1e (Column (d)	must equal Form 990, Part X, c	olumn (B), line 10c)	•	313,827.

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Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 LAKE WORTH TOWERS,	INC.	59-	-1149040 Pa	age 3
Part VII Investments - Other Securities.		N/A		
Complete if the organization answered				<u>: 12.</u>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or	end-of-year market value	
(1) Financial derivatives				
(2) Closely held equity interests .				
(3) Other				
(A)				
(B)		<u> </u>		
(C) (D)				
(E)				
(F)				
(G)	···		······································	
(H)				
<u>(i)</u>			· · · · · · · · · · · · · · · · · · ·	
Total (Column (b) must equal Form 990, Part X, column (B) line 12)		14 - 17 2	· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments — Program Related.	· · · · · · · · · · · · · · · · · · ·	N/A		<u> </u>
Complete if the organization answered				
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or	end-of-year market val	lue
(1)			<u> </u>	
(2)				
(3)		· · · · · · · · · · · · · · · · · · ·		
<u>(4)</u> <u>(5)</u>				
(6)				
(9)				
(8)				
(9)	·			
(10)				
Total (Column (b) must equal Form 990, Part X, column (B) line 13)		TARREST TO THE STATE OF	- 2 es 12 1 1 1 1	7
Part IX Other Assets. Complete if the organization answered	N/A	Dart IV June 11d See For	m 000 Part V lina	. 15
(a) Des		b, raitiv, line itu See i or	(b) Book value	
(1)			(3/=3	
(2)				
(3)				
(4)				
<u>(5)</u> (6)			- 	
(0)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, column (B) line 15)		•	
Part X : Other Liabilities.	. 000 D. LIV L. 1	1 11(O F 000 P+ V I	- 05	
Complete if the organization answered 'Yes' on Fo	otion of liability	ie or 111. See Form 990, Part X, iin	(b) Book value	
1. (a) Description (1) Federal income taxes	otion of hability		(b) Book value	
(2) TENANT DEPOSITS	· · · · · · · · · · · · · · · · · · ·		100,7	29.
(3)				
(4)				
(5)				
<u>(6)</u>		· · · · · · · · · · · · · · · · · · ·		
(7)				
(8)				
<u>(9)</u> (10)				
(11)				
Total (Column (b) must equal Form 990, Part X, column (B) line 25)			► 100,7°	29
2. Liability for uncertain tax positions In Part XIII, provide the text of the fool	tnote to the organization's fi	nancial statements that reports the organiza		<u> </u>
tax positions under FASB ASC 740 Check here if the text of the footnote has		, and a state ments that reports the organiza	, , ,	
RAA	TEE 433031 8/33/10		Schedule D (Form 990) 2	<u> </u>

Part XI Reconciliation of Revenue per Audited Financial State	ements With Revenue po	er Return. N/A	•
Complete if the organization answered 'Yes' on Form 9	90, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		-	
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	2 d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	1 . 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a	1	
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b	<u> </u>	4 c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Part XII Reconciliation of Expenses per Audited Financial Stat	ements With Expenses	per Return. N/A	
Complete if the organization answered 'Yes' on Form 9	90, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements			
		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		1	
·	2a		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	2 a 2 b		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities			
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments 	2 b		
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses 	2 b 2 c		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII)	2 b 2 c		
2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d	2 b 2 c	2 e	
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 	2 b 2 c	2 e	
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 	2 b 2 c 2 d	2 e	
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 	2 b 2 c 2 d	2e 3	
 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) 	2 b 2 c 2 d	2e 3	

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

BAA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for the latest information.

LAKE WORTH TOWERS, INC

Employer identification number 59-1149040

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE PRESIDENT AND THE TREASURER REVIEW THE FORM 990 AS WELL AS THE REVIEWED FINANCIAL STATEMENT.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE DOCUMENTS ARE AVAILABLE DURING BUSINESS HOURS AT THE ADMINISTRATIVE OFFICE OF THE ORGANIZATION.