

Form 990-T

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

OMB No 1545-0687

2018

For calendar year 2018 or other tax year beginning and ending 12/31

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury Internal Revenue Service

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

Section A: Check box if address changed; Section B: Exempt under section 501(c)(3); Name of organization: COMMUNITY LEGAL SERVICES; Address: 305 S 2ND AVE, PHOENIX, AZ 85003; Employer identification number: 86-0166615; Unrelated business activity code: 900099

Section C: Book value of all assets at end of year: 2,694,802; Section F: Group exemption number; Section G: Check organization type: 501(c) corporation

Section H: Enter the number of the organization's unrelated trades or businesses: SEE STATEMENT 1

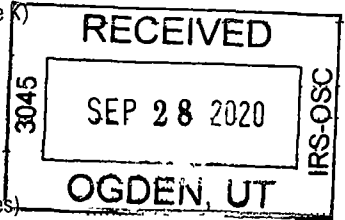
Section I: During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? No

Section J: The books are in care of: LEESA BOWMAN; Telephone number: 602-258-3434

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows 1a-13. Total income 0.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income)

Table with 4 columns: Line number, Description, (A) Income, (B) Expenses. Rows 14-32. Total deductions 0.



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Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, Amount. Includes lines 33-38 for unrelated business taxable income calculation.

Part IV Tax Computation

Table with 3 columns: Line number, Description, Amount. Includes lines 39-44 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, Amount. Includes lines 45a-51 for tax and payments, and lines 52-55 for tax due and overpayment.

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

Table with 3 columns: Line number, Description, Yes/No. Includes questions 56-58 regarding foreign activities and tax-exempt interest.

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer: Lela Bowman, Date: 9-22-2020, Title: FINANCE DIRECTOR

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

Table with 5 columns: Print/Type preparer's name, Preparer's signature, Date, Check self-employed, PTIN. Includes line 54 and 55 information.

FORM 990-T	DESCRIPTION OF ORGANIZATION'S PRIMARY UNRELATED BUSINESS ACTIVITY	STATEMENT 1
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TAXPAYER HAD NO UBI. FILING FOR REFUND OF EXTENSION PAYMENT MADE.

TO FORM 990-T, PAGE 1

FOOTNOTES

STATEMENT 2

THIS AMENDED RETURN IS TO CLAIM A REFUND OF TAXES ORIGINALLY PAID ON QUALIFIED TRANSPORTATION EXPENSES UNDER IRC SECTION 512(A)(7), WHICH HAS BEEN RETROACTIVELY REPEALED.

FORM 990-T

OTHER CREDITS AND PAYMENTS

STATEMENT 3

DESCRIPTION

AMOUNT

OVERPAYMENT AS REPORTED ON ORIGINALLY FILED RETURN

-1,141.

TOTAL INCLUDED ON FORM 990-T, PAGE 2, PART V, LINE 50G

-1,141.