3Form 990-T	E	Exempt Organization Bus	sine	ss Income `	Tax Return	)	OMB No 1545-0047
E	ļ.,	(and proxy tax und	er se	ction 6033(e))	1912		2040
77	For ca	lendar year 2019 or other tax year beginning		, and ending	1110		2019
Department of the Treasury Internal Revenue Service	<b></b>	► Go to www.irs gov/Form990T for in Do not enter SSN numbers on this form as it may				_	Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if address changed		Name of organization ( Check box if name c	hanged	and see instructions.)		(Emp	oyer identification number doyees' trust, see uctions)
B Exempt under section	Print	COMMUNITY AID, INC.				2	6-4376213
$\mathbf{X}$ 501(c)(30)3	or	Number, street, and room or suite no. If a P.O. box	x, see ir	nstructions.			ated business activity code instructions )
408(e) 220(e)	Type	10 SKYPORT ROAD				] ,	······································
408A 530(a)		City or town, state or province, country, and ZIP of MECHANICSBURG, PA 170		n postal code		900	099
C Book value of all assets at end of year			<b>&gt;</b>			4 <u> </u>	
16,136,3	50.	G Check organization type ► X 501(c) corp	ooration	501(c) trust	t 401(a)	) trust	Other trust
H Enter the number of the	organiza	tion's unrelated trades or businesses.	2	Descrit	oe the only (or first) ur	related	
trade or business here	<b><u>GA1</u></b>	MING ACTIVITIES		If only on	ie, complete Parts I-V.	If more	e than one,
describe the first in the b	lank spa	ce at the end of the previous sentence, complete Pa	ırts I an	d II, complete a Schedu	ile M for each addition	al trade	or or
business, then complete							
		oration a subsidiary in an affiliated group or a parer	nt-subsi	idiary controlled group?	<b>▶</b> {	Ye	es X No
		ifying number of the parent corporation.		T.1		117	412 7706
		JESSICA GUTIERREZ le or Business Income	_	(A) Income	ohone number > 7		(C) Net
		153,072.	1	(A) Illicome	(B) Expenses	<u> </u>	(o) Net
1a Gross receipts or sale b Less returns and allow		c Balance	10	153,072			
			1c 2	133,072	•		
2 Cost of goods sold (S 3 Gross profit. Subtract			3	153,072		-	153,072.
4a Capital gain net incon			4a			$\overline{}$	
		art II, line 17) (attach Form 4797)	4b				
c Capital loss deduction			4c				
•		thip or an S corporation (attach statement)	5				
6 Rent income (Schedu			6				
7 Unrelated debt-finance	ed incon	ne (Schedule E)	7				
		nd rents from a controlled organization (Schedule F)	8				
		in 501(c)(7), (9), or (17) organization (Schedule G)					
10 Exploited exempt acti			10				
11 Advertising income (S		•	<u> 10</u>				
Other income (See in:			12	153,072			153,072.
13 Total, Combine lines Part II Deductio	ns No	gn 12 ot Taken Elsewhere (See instructions fo	r limits				133,072.
		e directly connected with the unrelated busin			,		
	icers. dir	ectors, and trustees (Schedule K)				14	
15 Salaries and wages	,	rectors, and trustees (Schedule'K)				15	
	ance	Received US Bank - USB				16	
_16 Repairs and mainten		348				17	
Interest (attach sche Taxes and licenses Depreciation (attach	dule) (se	NOV 16 2020				18	
19 Taxes and licenses		MOA 1050=				19	
20 Depreciation (attach		162)		20		<b>-</b>	
•	aimed or	Schedule A and elsewhere on return		21a		21b	
22 Depletion	/.	- •				22	
23 Contributions to defe	,	npensation plans				23_	
<ul><li>24 Employee benefit pfo</li><li>25 Excess exempt experience</li></ul>		hadula IX				25	
<ul><li>25 Excess exempt experience</li><li>26 Excess readership or</li></ul>						26	
27 Other deductions (at				SEE STA	TEMENT 1	27	68,242.
28 Total deductions. A						28	68,242.
,		come before net operating loss deduction. Subtract	t line 28	3 from line 13		29	84,830.
,		oss arising in tax years beginning on or after Januar					
(see instructions)	<b>-</b> •					30	0.
/, ·	axable ır	come. Subtract line 30 from line 29				31	84,830.
		work Reduction Act Notice, see instructions		-			Form <b>990-T</b> (2019)

Schedule A - Cost of Goods	Sold. Enter	method of inve	ntory valuation N	/A				
1 Inventory at beginning of year	1		6 Inventory at end of			6		
2 Purchases	2		7 Cost of goods sold	. Subtract	line 6			
3 Cost of labor	3		from line 5. Enter I	nere and in	Part I,	L		
4a Additional section 263A costs			line 2			7		
(attach schedule)	4a		8 Do the rules of sec	tion 263A (	(with respect to		Yes	No
b Other costs (attach schedule)	4b		property produced	or acquire	d for resale) apply to			
5 Total Add lines 1 through 4b	5		the organization?					
Schedule C - Rent Income (	From Real	Property and	d Personal Propert	y Lease	d With Real Prop	erty)		
(see instructions)				_	<del></del>			
1 Description of property								
(1)								
(2)								
(3)								
(4)								
	2. Rent receiv	ed or accrued						
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	entage of than	of rent for	and personal property (if the perc personal property exceeds 50% o ent is based on profit or income)	entage r if	3(a) Deductions directly columns 2(a) a	, connec nd 2(b) (a	ted with the income in attach schedule)	ı
(1)								
(2)								
(3)							-	
(4)			-			_		
Total	0.	Total		0.				
(c) Total income Add totals of columns 2 here and on page 1, Part I, line 6, column		ter 🕨		0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>		0.
Schedule E - Unrelated Deb	t-Financed	income (see	instructions)					
			2 0		<ol> <li>Deductions directly con to debt-finance</li> </ol>			
1 8			<ol><li>Gross income from or allocable to debt-</li></ol>	(a)	Straight line depreciation	T	(b) Other deduction:	
1 Description of debt-fina	inced property		financed property		(attach schedule)		(attach schedule)	_
(1)				<del>-  </del>	<del></del> .	+		
(2)		<u> </u>			· · · · · · · · · · · · · · · · · · ·	+		
(3)	<u> </u>					+		
	5. 4		0.001.000.4.4.004.4	-	7.0	+-	0.44	
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-fina	adjusted basis illocable to nced property i schedule)	6 Column 4 divided by column 5		7 Gross income reportable (column 2 x column 6)	(4	8. Allocable deducti column 6 x total of col 3(a) and 3(b))	
(1)			9	<del>/</del> 6		$\top$	· · · · · · · · · · · · · · · · · · ·	
(2)			<del>-</del>	6				
(3)			<del></del>	6				
(4)				6				
			<u> </u>		inter here and on page 1,	E	inter here and on page	9 1,
					Part I, line 7, column (A)		Part I, line 7, column (E	
Totals				▶L	0			0.
Total dividends-received deductions and	luded in column	8		_		• <u> </u>		0.

Schedule F - Interest, A	Annuitie	s, Royalti						tions	(see ins	tructions	5)
			<u> </u>		Controlled O	<u> </u>				<del></del>	
Name of controlled organizat	rion	2. Emp identific numb	ation (lo	3 Net unrelated inco (loss) (see instruction		4. Tota payn	Total of specified payments made		t of column 41 ed in the contr ation's gross i	rolling	6. Deductions directly connected with income in column 5
(1)											
(2)							-				
(3)											
(4)	-										
Nonexempt Controlled Organi	zations	-	<u> </u>								
7. Taxable Income	8. Net u	nrelated income ee instructions)		Total o	of specified payr made	nents	10. Part of column the controllingross				ductions directly connected income in column 10
(1)		<del></del>									
(2)	-					1					
(3)	-		-								
(4)											
			· · · · · ·				Add colun Enter here and line 8, c		1, Part I,	Enter he	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals						▶			0.		0.
Schedule G - Investme (see insti		ne of a S	ection 501	(c)(7)	), (9), or (	17) Org	anization		-		<del></del>
1 Desc	ription of inco	me			2 Amount of	income	3. Deduction directly conner (attach schedu	cted	4 Set-a		5. Total deductions and set-asides (col 3 plus col 4)
(1)							· · · · · ·				
(2)					•						
(3)			-	1	_	ĺ					
(4)											
		<u>-</u>			Enter here and o Part I, line 9, co		·		. <u>-</u> .		Enter here and on page 1, Part I, line 9, column (B)
Totals				•		0.	ı	,			0.
Schedule I - Exploited (see instru	-	Activity I	ncome, O	ther	Than Adv	ertisin	g Income	-			
Description of exploited activity	2 G unrelated income trade or t	business e from	3 Expenses directly connec with productio of unrelated business incor	ted on	4 Net incomfrom unrelated business (cominus columingain, compute through	trade or lumn 2 n 3) If a e cols 5	5. Gross inco from activity t is not unrelat business inco	hat ed	6. Exp attributa colum	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)		1									
(2)		<u> </u>									
(3)						1					
(4)											
	Enter her page 1, line 10,	Part I, col (A)	Enter here and page 1, Part I line 10, col (B	,	•	,					Enter here and on page 1, Part II, line 25
Totals ► Schedule J - Advertisin	na Incon	0.∫ ne (see in	structions)	0 • [				<del></del> -			
Part I Income From F				Cons	olidated	Basis					
1 Name of periodical		2. Gross advertising income	3. Dire		4. Advert or (loss) (co col 3) If a ga cols 5 th	ol 2 minus sin, compute	5 Circulat		6. Reade		7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			1		1				<u>-</u>		
(2)					1						
(3)					1				<del></del>		
(4)					1	-					
<u> </u>											
Totals (carry to Part II, line (5))	<b>•</b>	.0		0.	, [						0 . Form <b>990-T</b> (2019)

	(2013) COMMONTIT					<u> 20 - 43 / 021</u>	<u> </u>
Part II	Income From Perio	dicals Report	ed on a Separ	ate Basis (For ea	ch periodical listed	in Part II, fill in	Т
	columns 2 through 7 on a	a line-by-line basis	)				
		2. Gross	3 Durant	4. Advertising gain	5 Consulation	6 Bandarahan	Γ

1. Name of periodical		2. Gross advertising income	3 Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1)								
(2)								
(3)								
(4)								
Totals from Part I	▶	0.	0.	i			0	
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 26	
Totals, Part II (lines 1-5)	▶	0.	0.				0	

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3. Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1 Part II line 14			0.

Form 990-T (2019)

FORM 990-T OTHER	CTIONS STATEMENT 1
DESCRIPTION	AMOUNT
CASH PRIZES OTHER DIRECT EXPENSES	64,800. 3,442.
TOTAL TO FORM 990-T, PAGE 1, LINE 27	68,242.

ENTITY

1

OMB No 1545-0047

## **Unrelated Business Taxable Income from an Unrelated Trade or Business**

For calendar year 2019 or other tax year beginning

Open to Public Inspection for

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990T for instructions and the latest information. ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

501(c)(3) Organizations Only

Employer identification number Name of the organization 26-4376213 COMMUNITY AID, INC. 531120 Unrelated Business Activity Code (see instructions) ► COMMERCIAL RENTAL PROPERTIES Describe the unrelated trade or business **Unrelated Trade or Business Income** (B) Expenses (C) Net (A) Income 1a Gross receipts or sales c Balance b Less returns and allowances 10 2 Cost of goods sold (Schedule A, line 7) 3 Gross profit Subtract line 2 from line 1c 3 4 a Capital gain net income (attach Schedule D) 4a b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 4c c Capital loss deduction for trusts Income (loss) from a partnership or an S corporation (attach 5 5 statement) 140,795. 197,558. -56,763. 6 Rent income (Schedule C) 6 Unrelated debt-financed income (Schedule E) 7 Interest, annuities, royalties, and rents from a controlled organization (Schedule F) R Investment income of a section 501(c)(7), (9), or (17) 9 organization (Schedule G) 9 Exploited exempt activity income (Schedule I) 10 10 11 11 Advertising income (Schedule J) 12 Other income (See instructions, attach schedule) 140,795. 197,558. 13 13 Total. Combine lines 3 through 12 Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Deductions must be directly connected with the unrelated business income.) 14 14 Compensation of officers, directors, and trustees (Schedule K) 15 15 Salaries and wages Repairs and maintenance 16 16 17 Bad debts 17 Interest (attach schedule) (see instructions) 18 18 19 19 Taxes and licenses 20 Depreciation (attach Form 4562) 21b Less depreciation claimed on Schedule A and elsewhere on return 21 22 22 Depletion

For Paperwork Reduction Act Notice, see instructions.

Unrelated business taxable income Subtract line 30 from line 29

Unrelated business taxable income before net operating loss deduction. Subtract line 28 from line 13 Deduction for net operating loss ansing in tax years beginning on or after January 1, 2018 (see

Contributions to deferred compensation plans

Excess exempt expenses (Schedule I)

Excess readership costs (Schedule J)

Total deductions. Add lines 14 through 27

Other deductions (attach schedule)

Employee benefit programs

Schedule M (Form 990-T) 2019

-56,763.

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instructions)

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Form 990-T (2019)

COMMUNITY	AID, I	NC.				26-4376	5213	, ugo
Schedule A - Cost of Good	s Sold. Enter	method of inve	ntory v	aluation			_	
1 Inventory at beginning of year	1		6	Inventory at end of year	ar ar		6	
2 Purchases	2		7	Cost of goods sold S	ubtract	line 6		
3 Cost of labor	3			from line 5. Enter here				
4a Additional section 263A costs				line 2			7	
(attach schedule)	4a		8	Do the rules of section	263A (	with respect to		Yes No
b Other costs (attach schedule)	4b			property produced or a	acquired	I for resale) apply to		
5 Total Add lines 1 through 4b	5			the organization?				
Schedule C - Rent Income	(From Real	Property and	d Per	sonal Property L	.ease	d With Real Prope	erty)	
(see instructions)								
1 Description of property								
(1) SELINSGROVE COMM	ERCIAL F	ENTAL PR	OPE	RTIES				
(2)								
(3)		<u> </u>						
(4)								
		ed or accrued				3(a) Deductions directly	connected with the	Income in
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%)	e than	of rent for	personaí	onal property (if the percenta property exceeds 50% or if ed on profit or income)	ge	columns 2(a) and	d 2(b) (attach sched EMENT 2	dule)
(1)	0.			140,7	95.		1:	97,558.
(2)			·					
(3)								
(4)								
Total	0.	Total		140,7	95.			
(c) Total income. Add totals of columns	2(a) and 2(b). En	ter				(b) Total deductions. Enter here and on page 1,		
here and on page 1, Part I, line 6, column		<u> </u>		140,7	<u>95.</u>	Part I, line 6, column (B)	<u> </u>	<u>97,558.</u>
Schedule E - Unrelated Del	ot-Financed	Income (see	ınstru	ctions)	·			
			2	Gross income from		<ol><li>Deductions directly connected to debt-finance</li></ol>		able
1. Description of debt-fi	nanced property		-	or allocable to debt- financed property	(a)	Straight line depreciation		deductions
				intanced property		(attach schedule)	(attach s	schedule)
			+				<del> </del>	
(1)	<del></del>			<del></del>	l		<del>-</del>	
(2)			+			<del></del>	+	<del></del>
(3)			+		<u> </u>	·	<del> </del>	
(4)			+	<del></del> -			<del> </del>	
<ol> <li>Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)</li> </ol>	of or a debt-fina	adjusted basis illocable to nced property i schedule)	6	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	(column 6 x	ole deductions total of columns and 3(b))
(1)			1	%		<del></del>	1	<del></del>
(2)	<del>                                     </del>		1	%			1	
(3)			†	%				
(4)			1	%				
	<u> </u>		•		Er	nter here and on page 1,	Enter here ar	nd on page 1,
						art I, line 7, column (A)		', column (B)
Totals				▶			<u> </u>	
Total dividends-received deductions in	ncluded in column	8		,		. •		

FORM 990-T (M) DEDUCTIONS CONNECTE	ED WITH RENTAL	INCOME	STATEMENT 2
DESCRIPTION '	ACTIVITY NUMBER	AMOUNT	TOTAL
INTEREST		91,381.	
INSURANCE PROPERTY TAXES		23,920. 33,030.	
DEPRECIATION .		46,713. 2,498.	
REPAIRS AND MAINTENANCE OTHER		16.	
- SUBTO	TAL - 2		197,558.
TOTAL TO FORM 990-T, SCHEDULE C, COI	LUMN 3		197,558.