#### **Exempt Organization Business Income Tax Return** OMB No. 1545-0687 Form 990-T (and proxy tax under section 6033(e)) For calendar year 2013 or other tax year beginning JUL 1, 2013 and ending JUN 30, 2014 ▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t. Department of the Treasure internal Revenue Service ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3). Name of organization ( Check box if name changed and see instructions.) ... Check box if (Employees trust, see address changed 25-1156265 Print COMMUNITY ACTION, INC. 8 Exempt under section : F Unrelated business activity codes X = 501(C)(3)Number, street, and room or suite no. If a P.O. box, see instructions. Type 105 GRACE WAY 220(e) 408(e): City or town, state or province, country, and ZIP or foreign postal code 530(a) 408A 541519 541519 PUNXSUTAWNEY, PA 15767-1209 529(a) C Book value of all assets F Group exemption number (See instructions.) at end of year 2, 295, 523. G Check organization type ► X 501(c) corporation 401(a) trust Other trust \_\_\_\_ 501(c) trust SEE STATEMENT H Describe the organization's primary unrelated business activity. X No 1 During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? if "Yes," enter the name and identifying number of the parent corporation. Telephone number $\triangleright$ 814-938-3302 The books are in care of ERNEST E. CERTO, JR. (B) Expenses (A) Income Part I Unrelated Trade or Business Income 172,747. 1 a Gross receipts or sales 172,747. 1c **b** Less returns and allowances c Balance 2 2 Cost of goods sold (Schedule A, line 7) 172,747. 172,747. 3 Gross profit. Subtract line 2 from line 1c 4a 4 a Capital gain net income (attach Form 8949 and Schedule D) b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) 4b 40 c Capital loss deduction for trusts Income (loss) from partnerships and S corporations (attach statement) 5 Rent income (Schedule C) 7 7 Unrelated debt-financed income (Schedule E) 8 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)... Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) 9 g Exploited exempt activity income (Schedule I) 10 11 11 Advertising income (Schedule J) 12 12 Other income (See instructions; attach schedule.) 172,747. 172,747. 13 Total. Combine lines 3 through 12 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.) 14 Compensation of officers, directors, and trustees (Schedule K) 14 82,463. 15 15 Salaries and wages 16 16 Repairs and maintenance 17 17 Bad debts 18 Interest (attach schedule) 18 11,739. 19 19 Taxes and licenses 20 Charitable contributions (See instructions for limitation rules.) 20 21 Depreciation (attach Form 4562) 22b 22a 22 Less depreciation claimed on Schedule A and elsewhere on return 23 23 24 Contributions to deferred compensation plans 24 $1,\overline{078}.$ 25 25 Employee benefit programs 26 Excess exempt expenses (Schedule I) 26 27 27 Excess readership costs (Schedule J) 42,128. 28 28 Other deductions (attach schedule) 137,408. 29 29 Total deductions. Add lines 14 through 28 35,339. Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 30 30 31 Net operating loss deduction (limited to the amount on line 30)

LHA For Paperwork Reduction Act Notice, see instructions. 323701

Unrelated business taxable income before specific deduction. Subtract line 31 from line 30

Specific deduction (Generally \$1,000, but see instructions for exceptions.)

31

32

33

34

Form 990-T (2013)

32

33

35,339.

34,3<u>39.</u>

1,000.

Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or

Part II	I Tax Computation								
	Organizations Taxable as Corpora								
	Controlled group members (section								
а	Enter your share of the \$50,000, \$2	5,000, and \$9,	925,000 taxable i	ncome bracket	s (in that order	):			
	(1) \$	(2) \$		(3)	\$				
	Enter organization's share of: (1) A								
	(2) Additional 3% tax (not more that	an \$100,000)			\$				e 151
C	Income tax on the amount on line 3	4		·				35c	5,151.
36	Trusts Taxable at Trust Rates. See	instructions fo	or tax computation	n. Income tax o	n the amount of	on line 34 fro	om:		
	Tax rate schedule or	Schedule D (Fo	orm 1041)	************				36	
37	Proxy tax. See instructions							37	
								38	F 151
39	Total. Add lines 37 and 38 to line 3	5c or 36, which	never applies		peroussemm:		·····	39	5,151.
Part I	/ Tax and Payments							[00000000]	
40a	Foreign tax credit (corporations atta	ach Form 1118	trusts attach For	m 1116)	ommuniiii.	40a			
b	Other credits (see instructions)					40h			
	General business credit. Attach For					40c			
d	Credit for prior year minimum tax (	attach Form 88	01 or 8827)			40d			
е	Total credits. Add lines 40a throug	h 40d	**********					40e	5 151
41	Subtract line 40e from line 39							41	5,151.
42	Other taxes. Check if from: Fo	rm 4255	Form 8611	Form 8697	Form 886	66 Oth	18r (attach schedule)	42	F 151
43	Total tax. Add lines 41 and 42							43	5,151.
44 a	Payments: A 2012 overpayment cr	redited to 2013	2220			448	2,086.		
b	2013 estimated tax payments					44b	6,428.		
C	Tax deposited with Form 8868		NIII III III III III III III III III II			44c			
d	Foreign organizations: Tax paid or	withheld at sou	rce (see instruction	ons)	************	440			
9	Backup withholding (see instruction	ns)				448			
f	Credit for small employer health ins	surance premiu	ims (Attach Form	8941)		441			
g	Other credits and payments:	F	orm 2439 Other			11(			
	Form 4136		Other		Total -	44g			0 514
45	Total payments. Add lines 44a thro	ough 44g						45	8,514.
46	Estimated tax penalty (see instructi							46	
47	Tax due. If line 45 is less than the t							47	2 262
48	Overpayment. If line 45 is larger th				verpaid			48	3,363. 3,363.
49	Enter the amount of line 48 you wa	nt: Credited to	2014 estimated	tax 🕨	1. (		Refunded >	49	3,303.
Part \	Statements Regardi	ng Certair	1 Activities	and Other	intormati	on (see ins	structions)		
1 At a	ny time during the 2013 calendar ye	ear, did the org	anization have an	interest in or a	signature or o	her authorit	y over a financial ac	count (ban	k, Yes No
	rities, or other) in a foreign country			ave to file Forr	n TD F 90-22.1	Report of F	oreign Bank and Fir	iancial	X
Acc	ounts. If YES, enter the name of the	foreign countr	y here	ntor of or transfe	or to, a foreign tru	st7			X
2 Duri	ng the tax year, did the organization received, see instructions for other forms the organization.	anization may hav	e to file.						A
3 Ente	er the amount of tax-exempt interest	received or ac	crued during the	tax year ►\$	▶ N/A				
	ule A - Cost of Goods S	old. Enter n	nethod of invent						
1 Inve	intory at beginning of year	1		1	ry at end of yea			6	
	chases	2			goods sold. S			7	
3 Cos	t of labor	3		-	e 5. Enter here			1	Yes No
4 a Add	tional section 263A costs (att schedule)	4a		-	rules of section				Yes No
b Oth	er costs (attach schedule)	4b		1			resale) apply to		
5 Tota	II. Add lines 1 through 4b	5	Same and the same		anization?	tatamente an	d to the best of my kee	wledge and l	nelief it is true
0:	Under penalties of perjury, I declare to correct, and complete. Declaration of	hat I have examin preparer (other th	ed this return, including taxpayer) is base	d on all information	on of which prepar	er has any kno	owiedge.		
Sign	Danila da	1	11111		EXECUTI		N		scuss this return with nown below (see
Here	The amann		1/6/13		itle	VE DI		structions)?	
	Signature of officer		Date			to.	1	if PTIN	21 163   100
	Print/Type preparer's name		Preparer's sign	nature	Da	ie.	self- employed	FUN	
Paid	CEEDWANTE A		Stechan	1. A Sh	hon 10112	/02/1		PO	1231282
Prepa		CHICARI				/ VE/ L	*		
	stephanie A.	STOHON		PAS	- qui		Firm's FINI	25.	-1390233
Use C	Firm's name WESSE	EL & CO	MPANY, C	PAS	- qui		Firm's EIN	25-	-1390233
Use C	Firm's name WESSE	L & CO	MPANY, C STREET		- July			7 1 - W	-1390233 536-7864

Form 990-T (2013) COMMUNITY Schedule C - Rent Income	Y ACTION, e (From Real	INC.	d Personal F	Property	Lease	25-119 d With Real Pro		
1. Description of property	T			•				
(1) (2) (3)								
(4)	2. Rent receiv	ed or accrued						
(a) From personal property (if the prent for personal property is month of the prent for but not more than 50	ore than	of rent for	and personal property personal property exc ent is based on profit of	eeds 50% or if	age	<b>3(a)</b> Deductions direct columns 2(a)	tly connectand 2(b) (a	oted with the income in attach schedule)
(1)								
(3)								
(4)	0.	Total			0.			
(c) Total income. Add totals of column here and on page 1. Part I, line 6, column	s 2(a) and 2(b). En	ter <b>&gt;</b>			(	b) Total deductions. Inter here and on page 1, Part I, line 6, column (8)	<b>.</b>	0.
Schedule E - Unrelated De	ebt-Financec	Income (see	instructions)					
						<ol> <li>Deductions directly control to debt-final</li> </ol>		
1. Description of debt-	-financed property		2. Gross inco or allocable financed p	to debt-	(a) s	traight line depreciation (attach schedule)	nced prop	(b) Other deductions (attach schedule)
(1)			-					
(1)								
(2)								
(3)								
_(4)								
Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis allocable to inced property n schedule)	6. Column 4 by colum	divided nn 5		7. Gross income reportable (column 2 x column 6)	(	Allocable deductions column 6 x total of columns     3(a) and 3(b))
(1)				%				
10)				%				
(0)				%				
(3)				%	ļ			
(4)					Ent	er here and on page 1,		Inter here and on page 1,
Totals				<b>&gt;</b>		rt I, line 7, column (A).		Part I, line 7, column (B).
Totals Total dividends-received deductions	included in column	n R					<b>&gt;</b>	0.
Schedule F - Interest, Ann	uities Royal	ties and Re	nts From Co	ntrolled	Organ	izations (see in:	structio	ns)
Schedule F - Interest, Ann	iuities, Hoyai	Evom	pt Controlled Or	nanizations		,		
1. Name of controlled organization	Employer id	entification Net	3. unrelated income ) (see instructions)	4 Total of s	pecified	5. Part of column 4 included in the controrganization's gross in	olling	6. Deductions directly connected with income in column 5
	110111	(1949)	, (000	' '				
/4)								
(1)								
(2)								
_(3)								
_(4)								
Nonexempt Controlled Organization	ons							
7. Taxable Income 8	. Net unrelated incon (see instructions		Total of specified payn made	nents 10	Part of coin the contragre	lumn 9 that is included olling organization's oss income		eductions directly connected in income in column 10
(1)								
(1)				-				
(2)								
(3)								
(4)					A	W		nd columns 6 and 11
					Enter here a	lumns 5 and 10. nd on page 1, Part i, 3, column (A).		dd columns 6 and 11. here and on page 1, Part I, line 8, column (B).
<b>.</b>						0.		0.
Totals								Form <b>990-T</b> (2013)
323721 12-12-13								101111 330-1 (2013)

Schedule G - Investment (see instru		section 501(c)	(7), (9), or (17) Or	ganization			
1. Descri	ption of income		2. Amount of income	<ol> <li>Deductions directly connecte (attach schedule</li> </ol>	ed 4. Si	et-asides h schedule)	<ol> <li>Total deductions and set-asides (col. 3 plus col. 4)</li> </ol>
(1)							
(2)							
(3)							-
(4)			# 17 Co. 1				Enter here and on page 1,
			Enter here and on page 1, Part I, line 9, column (A).				Part I, line 9, column (B).
Totals			0.				0.
Schedule I - Exploited I (see instru		Income, Othe	r Than Advertisi	ng Income			
1 - Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross incomfrom activity that is not unrelated business incom	attrib	Expenses outable to olumn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)							
(2)							
(3)							
(4)							Enter here and
	Enter here and on page 1, Part I, line 10, col. (A)	Enter here and on page 1, Part I, line 10, col. (B).					on page 1, Part II, line 26.
Totals	0.	0.					0.
Schedule J - Advertisir	ng Income (see in	nstructions)					
Part I Income From F	Periodicals Repo	orted on a Cor	nsolidated Basis				
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, compu cols. 5 through 7.			eadership osts	Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)							
(2)							
(3)							
(4)							
							0
Totals (carry to Part II, line (5))	▶	0.	).				0.
Part II Income From F	Periodicals Report 7 on a line-by-line ba	orted on a Sep sis.)	parate Basis (For	each periodical	listed in Part	II, fill in	
Name of periodical	2. Gross advertising income	3. Direct advertising costs	4 · Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compu cols. 5 through 7.	5. Circulatio income		eadership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)					11 1		
(2)				11			
(3)							
(4)							
Totals from Part I		0.	0.				0.
	Enter here and o page 1, Part I, line 11, col. (A).	page 1, Part I, line 11, col. (B).					Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5)			O .	inetructions)			0.
Schedule K - Compens		s, Directors, a	2. Title	3.	Percent of devoted to business		pensation attributable nrelated business
	W. W. L.				%		
(1)					%		
(2)					%		
(3)					%		
(4)	art II line 14		TO THE RESERVE AND THE STATE OF				0.
Total. Enter here and on page 1, P	att II, lille 14	**********************					Form <b>990-T</b> (2013)

# Approved of the Treasury

### **Alternative Minimum Tax - Corporations**

Attach to the corporation's tax return.

•	Time on to the corporation a law ton	
► Information about Form	4626 and its separate instructions	is at www.irs.gov/form4626.

OMB No. 1545-0175

interna	A Revenue Service Information about Form 4020 and its separate instru	CHOILS IS ALM		
Name	COMMUNITY ACTION, INC.			Employer identification number 25-1156265
	The state of the s			23 1130200
	Note: See the instructions to find out if the corporation is a small corporation exempt			
	from the alternative minimum tax (AMT) under section 55(e).			
	Taxable income or (loss) before net operating loss deduction		1	34,339.
1				
2	Adjustments and preferences:		2a	
	Depreciation of post-1986 property  Amortization of certified pollution control facilities			
b	•			
	Amortization of mining exploration and development costs  Amortization of circulation expenditures (personal holding companies only)			
d				
e	, ,			
1	Long-term contracts			
g	Merchant marine capital construction funds			
h	Section 833(b) deduction (Blue Cross, Blue Shield, and similar type organizations only)			27/2 AM (2017)
i	Tax shelter farm activities (personal service corporations only)			
j	Passive activities (closely held corporations and personal service corporations only)			
k	Loss limitations			
1	Depletion			
	n Tax-exempt interest income from specified private activity bonds			
	Intangible drilling costs			
0	Other adjustments and preferences			34,339.
3	Pre-adjustment alternative minimum taxable income (AMTI). Combine lines 1 through 20		3	34/337.
4	Adjusted current earnings (ACE) adjustment:	1.1	24 220	
	ACE from line 10 of the ACE worksheet in the instructions	4a	34,339.	
þ	Subtract line 3 from line 4a. If line 3 exceeds line 4a, enter the difference as a	1		
	negative amount (see instructions)	46	0.	
	Multiply line 4b by 75% (.75). Enter the result as a positive amount	4c		
d	Enter the excess, if any, of the corporation's total increases in AMTI from prior			
	year ACE adjustments over its total reductions in AMTI from prior year ACE			
	adjustments (see instructions). Note: You must enter an amount on line 4d			
	(even if line 4b is positive)	4d		
е	ACE adjustment.	`		
	<ul> <li>If line 4b is zero or more, enter the amount from line 4c</li> </ul>			0.
	• If line 4b is less than zero, enter the smaller of line 4c or line 4d as a negative amount	<u> </u>	4e	34,339.
5	Combine lines 3 and 4e. If zero or less, stop here; the corporation does not owe any AMT		5	34,337.
6	Alternative tax net operating loss deduction (see instructions)			
7	Alternative minimum taxable income. Subtract line 6 from line 5. If the corporation held a			34,339.
	interest in a REMIC, see instructions			34,337.
8	Exemption phase-out (if line 7 is \$310,000 or more, skip lines 8a and 8b and enter -0- on	line 8c):		
а	Subtract \$150,000 from line 7 (if completing this line for a member of a controlled	1 - 1	0	
	group, see instructions). If zero or less, enter -0-		0.	
b	Multiply line 8a by 25% (.25)	8b	0.	
C	Exemption. Subtract line 8b from \$40,000 (if completing this line for a member of a control			40 000
	group, see instructions). If zero or less, enter -0-			40,000.
9	Subtract line 8c from line 7. If zero or less, enter -0-			0.
10	Multiply line 9 by 20% (.20)		10	U •
11	Alternative minimum tax foreign tax credit (AMTFTC) (see instructions)			0.
12	Tentative minimum tax. Subtract line 11 from line 10		12	0.
13	Regular tax liability before applying all credits except the foreign tax credit		13	
14	Alternative minimum tax. Subtract line 13 from line 12. If zero or less, enter -0 Enter he	re and on		0.
	Form 1120, Schedule J, line 3, or the appropriate line of the corporation's income tax return	rn	14	<u> </u>
JWA	For Paperwork Reduction Act Notice, see separate instructions.			Form <b>4626</b> (2013

A	djusted Current Earning:  See ACE Worksheet li			
				34,339.
<ol> <li>Pre-adjustment AMTI. Enter the amount from lin</li> </ol>	e 3 of Form 4626		1	34,339.
2 ACE depreciation adjustment:		1 . 1		
a AMT depreciation		2a		
b ACE depreciation:				
(1) Post-1993 property	2b(1)			
(2) Post-1989, pre-1994 property	2b(2)			
(3) Pre-1990 MACRS property	2b(3)			
(4) Pre-1990 original ACRS property	2h(4)			
(5) Property described in sections				
168(f)(1) through (4)	2b(5)			
(6) Other property	2b(6)			
(7) Total ACE depreciation. Add lines 2b(1) the	nrough 2b(6)	2b(7)		
c ACE depreciation adjustment. Subtract line 2b(7	) from line 2a		2c	
3 Inclusion in ACE of items included in earnings a	nd profits (E&P):			
		3a		
b Death benefits from life insurance contracts		3b		
c All other distributions from life insurance contra	cts (including surrenders)	3c		
d Inside buildup of undistributed income in life ins		1 1		
e Other items (see Regulations sections 1.56(g)-1				
•		3e		
f Total increase to ACE from inclusion in ACE of it			3f	
4 Disallowance of items not deductible from E&P:				
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	4a		
b Dividends paid on certain preferred stock of pub				
		4b		
c Dividends paid to an ESOP that are deductible u				
d Nonpatronage dividends that are paid and deduc				
1382(c)		4 d		
e Other items (see Regulations sections 1.56(g)-1	(d)(3)(i) and (ii) for a			
		4e		
Total increase to ACE because of disallowance of the control	if items not deductible from E&P. Ad	ld lines 4a through 4e	41	
5 Other adjustments based on rules for figuring E		·		
a Intangible drilling costs		5a		
b Circulation expenditures		5b		
· · · · · · · · · · · · · · · · · · ·				
<ul><li>e Installment sales</li><li>f Total other E&amp;P adjustments. Combine lines 5a</li></ul>			5f	
		1		
			-	
	com sale or exchange of pre-1994 or	······································		
	on sale of exchange of pie-1994 pi	result here and on line 4a of		
			10	34,339.
Form 4626				

FORM	990-T	DESCRIPTION	OF ORGANIZA	TION'S	PRIMARY	UNRELATED	STATEMENT	1
			BUSINESS	ACTIVIT	ΓY			

### SOFTWARE DEVELOPMENT AND TECHNOLOGY CONSULTATION

TO FORM 990-T, PAGE 1

FORM 990-T	OTHER DEDUCTIONS	STATEMENT 2
DESCRIPTION		AMOUNT
LOCAL TRAVEL OFFICE SPACE TELEPOHNE POSTAGE PRINTING/COPIES INSURANCE/BOND INFO TECH EXPENSE FISCAL SERVICES HUMAN RESOURCE SERVICES PROFESSIONAL SERVICE FRINGE BENEFITS MISCELLANEOUS		2,496. 2,995. 2,867. 24. 352. 1,263. 6,831. 9,269. 3,706. 1,490. 9,206. 1,629.
TOTAL TO FORM 990-T, PAGE 1, LII	NE 28	42,128.

#### 2220 Form

Department of the Treasury

COMMUNITY ACTION, INC.

## **Underpayment of Estimated Tax by Corporations**

► Attach to the corporation's tax return.

FORM 990-T

OMB No. 1545-0142

25-1156265

2013

nternal Revenue Service

Name

► Information about Form 2220 and its separate instructions is at www.irs.gov/lorm2220.

Employer identification number

Not	le: Generally, the corporation is not required to file Form 2220 corporation. However, the corporation may still use Form 2: penalty line of the corporation's income tax return, but do n	220 t	o figure the penalty. If so, e	nter the amount from	page 2, line 38 on the esti	mated tax
F	Part I Required Annual Payment					
						5,151.
1	Total tax (see instructions)				1	5,151.
2 2	a Personal holding company tax (Schedule PH (Form 1120), lin	e 26'	included on line 1	2a		
	a Look-back interest included on line 1 under section 460(b)(2)					
	contracts or section 167(g) for depreciation under the income			2b		
	(g) s.p					
C	Credit for federal tax paid on fuels (see instructions)			20		
			.,.,		<b>2</b> d	
3	Subtract line 2d from line 1. If the result is less than \$500, do	not o	complete or file this form. T	he corporation		- 1-1
	does not owe the penalty				3	5,151.
4	Enter the tax shown on the corporation's 2012 income tax ret					0 040
	or the tax year was for less than 12 months, skip this line at	nd er	iter the amount from line 3	on line 5	4	9,840.
5	Required annual payment. Enter the smaller of line 3 or line				_	5,151.
7. TE	enter the amount from line 3					5,151.
- 1	Part II Reasons for Filing - Check the boxes belower if it does not owe a penalty (see instructions).		at apply. If any boxes are cr	iecked, the corporation	i must nie Form 2220	
6	The corporation is using the adjusted seasonal installi	ment	method.			
7	X The corporation is using the annualized income instal					
8	The corporation is a "large corporation" figuring its firs			the prior year's tax.		
F	Part III Figuring the Underpayment					
			(a)	(b)	(c)	(d)
9	Installment due dates. Enter in columns (a) through					
	(d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the		10/15/10	10/15/10	00/15/14	06/15/14
	corporation's tax year	9	10/15/13	12/15/13	03/15/14	06/15/14
10	Required installments. If the box on line 6 and/or line 7					
	above is checked, enter the amounts from Sch A, line 38. If					
	the box on line 8 (but not 6 or 7) is checked, see instructions	1				
	for the amounts to enter. If none of these boxes are checked,	1			3,863.	
	enter 25% of line 5 above in each column.	10			3,003.	
11	Estimated tax paid or credited for each period (see					
	instructions). For column (a) only, enter the amount	11	2,086.		3,594.	2,834.
	from line 11 on line 15  Complete lines 12 through 18 of one column before		2/0001		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	going to the next column.					
12	Enter amount, if any, from line 18 of the preceding column	12		2,086.	2,086.	1,817
	Add lines 11 and 12	13		2,086.	5,680.	4,651
14		14			·	
15		15	2,086.	2,086.	5,680.	4,651
16	If the amount on line 15 is zero, subtract line 13 from line					
	14. Otherwise, enter -0-	16		-	0.	
17	Underpayment. If line 15 is less than or equal to line 10,					
	subtract line 15 from line 10. Then go to line 12 of the next					
	column. Otherwise, go to line 18	17				
18	Overpayment. If line 10 is less than line 15, subtract line 10		2 226	2 000	1 017	
	from line 15. Then no to line 12 of the next column	18	2,086.	2,086.	1,817.	

For Paperwork Reduction Act Notice, see separate instructions. JWA

from line 15. Then go to line 12 of the next column ...

Form 2220 (2013)

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.

Form 2220 (2013) COMMUNITY ACTION, INC.

Part IV Figuring the Penalty

			(a)	(b)	(c)	(d)
9	Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions) (Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)	19				
	Number of days from due date of installment on line 9 to the date shown on line 19	20				
	Number of days on line 20 after 4/15/2013 and before 7/1/2013	21				
	Underpayment on line 17 x Number of days on line 21 x 3%	22	\$	\$	\$	\$
	Number of days on line 20 after 06/30/2013 and before 10/1/2013	23				
	Underpayment on line 17 x Number of days on line 23 x 3%	24	\$	\$	\$	\$
	Number of days on line 20 after 9/30/2013 and before 1/1/2014	25		-		
	Underpayment on line 17 x Number of days on line 25 x 3%	26	\$	\$	\$	\$
	Number of days on line 20 after 12/31/2013 and before 4/1/2014	27				
	Underpayment on line 17 x Number of days on line 27 x 3%	28	\$	\$	\$	\$
	Number of days on line 20 after 3/31/2014 and before 7/1/2014	29				
	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
	Number of days on line 20 after 6/30/2014 and before 10/01/2014	31				
	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
	Number of days on line 20 after 9/30/2014 and before 1/1/2015	33				
	Underpayment on line 17 x Number of days on line 33 x *% 365	34	\$	\$	\$	\$
	Number of days on line 20 after 12/31/2014 and before 2/16/2015	35				
	Underpayment on line 17 x Number of days on line 35 x *% 365	36	\$	\$	\$	\$
7	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$

<sup>\*</sup> Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

JWA

Form 2220 (2013)

Form 2220 (2013)

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method (see instructions)

Form 1120S filers: For lines 1, 2, 3, and 21, below, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.

	rt I - Adjusted Seasonal Installment Met 6 consecutive months is at least 70%. See instructions.)		(a)	(b)	(c)	(d)
dily	o consecutive months is at least 70 %. See instructions.)	-	First 3	First 5	First 8	First 11
	e to the following and de-			10.000	months	months
1	Enter taxable income for the following periods:	+	months	months	months	Invitato
	Tax year beginning in 2010	1a				
d	Tax year beginning in 2010	14				
b	Tax year beginning in 2011	1b				-
	Tan Jan augment and the second and t					
C	Tax year beginning in 2012	10				
2	Enter taxable income for each period for the tax year beginning in					
	2013 (see instructions for the treatment of extraordinary items)	2			m	
		-	First 4	First 6	First 9	Entire year
3	Enter taxable income for the following periods:	-	months	months	months	
а	Tax year beginning in 2010	3a				
-	Z	21-				
b	Tax year beginning in 2011	3b				
	Tay year heginging in 2012	3c				
	Tax year beginning in 2012 Divide the amount in each column on line 1a by the	06				
	The state of the s	4				
	amount in column (d) on line 3a Divide the amount in each column on line 1b by the	-				
5		5				
c	Divide the amount in each column on line 1c by the					
6		6				
	amount in column (d) on line 3c	0				
7	Add lines 4 through 6	7				
1	nou into 4 univegii o					
8	Divide line 7 by 3.0	8				
	Divide line 2 by line 8	9a				
	Extraordinary items (see instructions)	9b				
	Add lines 9a and 9b	9c				
-	Figure the tax on the amt on In 9c using the instr for Form					
	1120, Sch J, In 2 (or comparable in of corp's return)	10				
1a	Divide the amount in columns (a) through (c) on line 3a					
. 4	by the amount in column (d) on line 3a	11a				
b	Divide the amount in columns (a) through (c) on line 3b					
	by the amount in column (d) on line 3b	11b				
C	Divide the amount in columns (a) through (c) on line 3c	17.1				
	by the amount in column (d) on line 3c	110				
2	Add lines 11a though 11c	12				
3	Divide line 12 by 3.0	13				
4	Multiply the amount in columns (a) through (c) of line 10					
	by columns (a) through (c) of line 13. In column (d), enter					
	the amount from line 10, column (d)	14				
5	Enter any alternative minimum tax for each payment					
	period (see instructions)	15				
		100				
16	Enter any other taxes for each payment period (see instr)	16				
7	Add lines 14 through 16	17		-		
8	For each period, enter the same type of credits as allowed					
	on Form 2220, lines 1 and 2c (see instructions)	18	-		-	
9	Total tax after credits. Subtract line 18 from line 17. If	40				
	zero or less, enter -0-	19				Form <b>2220</b> (2

Form 2220 (2013) \*\* Part II - Annualized Income Installment Method

		(a)	(b)	(c)	(d)
		First 2	First 3	First 6	First 9
20 Annualization periods (see instructions)	20	months	months	months	months
21 Enter taxable income for each annualization period (see					
instructions for the treatment of extraordinary items)	21			33,780.	
22 Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000	1.333330
22 yilliadiissiidii siinediito jood illottooteiloy					
23a Annualized taxable income. Multiply line 21 by line 22	23a			67,560.	
b Extraordinary items (see instructions)	23b			67.560	
c Add lines 23a and 23b	23c			67,560.	
24 Figure the tax on the amount on line 23c using the					
instructions for Form 1120, Schedule J, line 2				11 000	
(or comparable line of corporation's return)	24			11,890.	
25 Enter any alternative minimum tax for each payment					
period (see instructions)	25				
26 Enter any other taxes for each payment period (see instr)	26				
Enter they offer taxes for seen payment person (see them)					
27 Total tax. Add lines 24 through 26	27			11,890.	
28 For each period, enter the same type of credits as allowed					
on Form 2220, lines 1 and 2c (see instructions)	28				
29 Total tax after credits. Subtract line 28 from line 27. If	ŀ			11 000	
zero or less, enter -0-	29			11,890.	
30 Applicable percentage	30	25%	50%	75%	100%
*				0.010	
31 Multiply line 29 by line 30	31			8,918.	
Part III - Required Installments					
Note: Complete lines 32 through 38 of one column before		1st	2nd	3rd	4th
completing the next column.		installment	installment	installment	installment
32 If only Part I or Part II is completed, enter the amount in	Ì				
each column from line 19 or line 31. If both parts are					
completed, enter the <b>smaller</b> of the amounts in each				0.010	0.
column from line 19 or line 31	32	0.	0.	8,918.	<u> </u>
33 Add the amounts in all preceding columns of line 38	-00				
(see instructions)	33				
34 Adjusted seasonal or annualized income installments.	24			8,918.	
Subtract line 33 from line 32. If zero or less, enter -0-	34			0/3200	
35 Enter 25% of line 5 on page 1 of Form 2220 in each					
column. <b>Note</b> : "Large corporations," see the instructions	35	1,288.	1,288.	1,287.	1,288
for line 10 for the amounts to enter  36 Subtract line 38 of the preceding column from line 37 of		= 7 = 5 5			
the preceding column	36		1,288.	2,576.	
the preceding column					
<b>37</b> Add lines 35 and 36	37	1,288.	2,576.	3,863.	1,288
38 Required installments. Enter the smaller of line 34 or					
line 37 here and on page 1 of Form 2220. line 10				2 062	^
(see instructions)	38	0.	0.	3,863.	O . Form <b>2220</b> (2013

Form **2220** (2013)

\*\* ANNUALIZED INCOME INSTALLMENT METHOD USING STANDARD OPTION

## Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return. ▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

-	re filing for an Automatic 3-Month Extension, comple	_				<u> </u>	
• If you a	ire filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)			
Do not c	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previou	sly filed Fo	rm 8868.		
Electroni	c filing (e-file) You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of ti	me to file (	3 months f	or a corporation	
	o file Form 990-T), or an additional (not automatic) 3-mo						
of time to	file any of the forms listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for	Transfers	Associated	d With Certain	
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the elec	ctronic filin	g of this form,	
visit www	irs.gov/efile and click on e-file for Charities & Nonprofits	ì.					
Part I	Automatic 3-Month Extension of Time	. Only s	submit original (no copies ne	eded).			
A corpora	tion required to file Form 990-T and requesting an autor	matic 6⋅mo	onth extension - check this box and	complete			
Part I only	,						
All other o	orporations (including 1120-C filers), partnerships, REM	IICs, and t	trusts must use Form 7004 to reque	st an exter	sion of tim	е	
to file inco	me tax returns.			Enter file	er's identi	fying number	
Type or	or Name of exempt organization or other filer, see instructions.			Employe	Employer identification number (EIN) or		
print							
	COMMUNITY ACTION, INC.				25-1156265		
File by the due date for filing your	te for Number, street, and room or suite no. If a P.O. box, see instructions.			Social se	Social security number (SSN)		
return See instructions							
	Return code for the return that this application is for (file	0.000000	to application for each return)			0 1	
Enter the	Return code for the return that this application is for the	e a separa	tte application for each fetom)				
Application		Return	Application			Return	
ls For		Code	ls For			Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 4720 (individual)		03	Form 4720 (other than individual)			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above)		06	Form 8870			12	
	ERNEST E. CERTO  oks are in the care of > 105 GRACE WAY -  one No > 814-938-3302			7-120	9		
<ul><li>If the o</li></ul>	rganization does not have an office or place of business					aroup shock this	
	s for a Group Return, enter the organization's four digit of the group, check this box						
oox ► L					ers the exi	terision is ior.	
	uest an automatic 3-month (6 months for a corporation $FEBRUARY\ 15$ , $2015$ , to file the exemp				The extens	sion	
is fo	r the organization's return for:						
▶∟	calendar year or		7777 20 0014				
▶ _	X tax year beginning JUL 1, 2013	, an	d ending JUN 30, 2014	:	- ·		
2 If the	e tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retur	n		
	Change in accounting period						
3a If th	If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					^	
*****	nonrefundable credits. See instructions.				\$	0.	
	If this application is for Forms 990.PF, 990.T, 4720, or 6069, enter any refundable credits and					^	
	estimated tax payments made. Include any prior year overpayment allowed as a credit.				\$	0.	
	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,					^	
by u	sing EFTPS (Electronic Federal Tax Payment System). 9	See instru	ctions.	3c	\$	0.	
Caution. I	f you are going to make an electronic funds withdrawal s.	(direct de	bit) with this Form 8868, see Form 8	3453-EO ar	nd Form 88	379-EO for payment	

Form 8868 (Rev. 1-2014)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

COMMUNITY ACTION, INC. 105 GRACE WAY PUNXSUTAWNEY, PA 15767-1209

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0027

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