

Form **990-T**

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

OMB No. 1545-0687

2014

Department of the Treasury
Internal Revenue Service

For calendar year 2014 or other tax year beginning _____, and ending _____
 ▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.
 ▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

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

A Check box if address changed

B Exempt under section
 501(c) (**C**) (**3**)
 408(e) 220(e)
 408A 530(a)
 529(a)

C Book value of all assets at end of year
686,262

Name of organization (Check box if name changed and see instructions.)
LAKE AREA YOUTH SERVICE BUREAU, INC.

Number, street, and room or suite no. If a P.O. box, see instructions.
244 NORTH LAKE STREET

City or town, state or province, country, and ZIP or foreign postal code
FOREST LAKE MN 55025

F Group exemption number (See instructions.) ▶

G Check organization type ▶ 501(c) corporation 501(c) trust 401(a) trust Other trust

D Employer identification number (Employees' trust, see instructions.)
****-***2058**

E Unrelated business activity codes (See instructions.)
713200 | 511110

H Describe the organization's primary unrelated business activity.
 ▶ **YOUTH PAGE ADVERTISING & PULLTAB GAMBLING**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ▶ Yes No
 If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of ▶ **JEANNE WALZ** Telephone number ▶ **651-464-3685**

| Part I Unrelated Trade or Business Income | | (A) Income | (B) Expenses | (C) Net |
|---|----------------|----------------|--------------|----------------|
| 1a Gross receipts or sales | 761,656 | | | |
| b Less returns and allowances | | | | |
| c Balance | | 761,656 | | |
| 2 Cost of goods sold (Schedule A, line 7) | | | | |
| 3 Gross profit. Subtract line 2 from line 1c | | 761,656 | | 761,656 |
| 4a Capital gain net income (attach Schedule D) | | | | |
| b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | | | | |
| c Capital loss deduction for trusts | | | | |
| 5 Income (loss) from partnerships and S corporations (attach statement) | | | | |
| 6 Rent income (Schedule C) | | | | |
| 7 Unrelated debt-financed income (Schedule E) | | | | |
| 8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F) | | | | |
| 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) | | | | |
| 10 Exploited exempt activity income (Schedule I) | | | | |
| 11 Advertising income (Schedule J) | | 7,380 | | 7,380 |
| 12 Other income (See instructions; attach schedule) | | | | |
| 13 Total. Combine lines 3 through 12 | | 769,036 | | 769,036 |

| 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 | |
| 15 Salaries and wages | | 15 | 10,158 |
| 16 Repairs and maintenance | | 16 | |
| 17 Bad debts | | 17 | |
| 18 Interest (attach schedule) | | 18 | |
| 19 Taxes and licenses | | 19 | 813 |
| 20 Charitable contributions (See instructions for limitation rules) | | 20 | |
| 21 Depreciation (attach Form 4562) | 21 | | |
| 22 Less depreciation claimed on Schedule A and elsewhere on return | 22a | 22b | 0 |
| 23 Depletion | | 23 | |
| 24 Contributions to deferred compensation plans | | 24 | |
| 25 Employee benefit programs | | 25 | 1,295 |
| 26 Excess exempt expenses (Schedule I) | | 26 | |
| 27 Excess readership costs (Schedule J) | | 27 | 3,816 |
| 28 Other deductions (attach schedule) | See Statement 1 | 28 | 693,220 |
| 29 Total deductions. Add lines 14 through 28 | | 29 | 709,302 |
| 30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13 | | 30 | 59,734 |
| 31 Net operating loss deduction (limited to the amount on line 30) | | 31 | |
| 32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 | | 32 | 59,734 |
| 33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions) | | 33 | 1,000 |
| 34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32 | | 34 | 58,734 |

Form 990-T (2014) LAKES AREA YOUTH SERVICE

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here See instructions and:
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):
(1) \$ (2) \$ (3) \$
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750)
(2) Additional 3% tax (not more than \$100,000)
c Income tax on the amount on line 34
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: Tax rate schedule or Schedule D (Form 1041)
37 Proxy tax. See instructions
38 Alternative minimum tax
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies

Part IV Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)
b Other credits (see instructions)
c General business credit. Attach Form 3800 (see instructions)
d Credit for prior year minimum tax (attach Form 8801 or 8827)
e Total credits. Add lines 40a through 40d
41 Subtract line 40e from line 39
42 Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (att. sch.)
43 Total tax. Add lines 41 and 42
44a Payments: A 2013 overpayment credited to 2014
b 2014 estimated tax payments
c Tax deposited with Form 8868
d Foreign organizations: Tax paid or withheld at source (see instructions)
e Backup withholding (see instructions)
f Credit for small employer health insurance premiums (Attach Form 8941)
g Other credits and payments: Form 2439 Form 4136 Other Total
45 Total payments. Add lines 44a through 44g
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid
49 Enter the amount of line 48 you want: Credited to 2015 estimated tax Refunded

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

1 At any time during the 2014 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$

Schedule A - Cost of Goods Sold. Enter method of inventory valuation

1 Inventory at beginning of year
2 Purchases
3 Cost of labor
4a Additional sec. 263A costs (attach schedule)
b Other costs (attach schedule)
5 Total. Add lines 1 through 4b
6 Inventory at end of year
7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2
8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?

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.

Sign Here: Signature of officer: Joanne Walsh, Date: 13/27/15, Title: EXECUTIVE DIRECTOR
Preparer: NICHOLE FAIRBANKS, HARRINGTON LANGER & ASSOCIATES, 563 PHALEN BLVD, SAINT PAUL, MN 55130, Firm's EIN: ** - ***2347, Phone no. 651-481-1128

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

Form 990-T (2014) **LAKES AREA YOUTH SERVICE**

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

| | | |
|---|---|---|
| 1. Description of property | | |
| (1) N/A | | |
| (2) | | |
| (3) | | |
| (4) | | |
| 2. Rent received or accrued | | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) |
| (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| Total | | (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶ |
| (c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶ | | |

Schedule E – Unrelated Debt-Financed Income (see instructions)

| | | | | |
|---|---|---|--|---|
| 1. Description of debt-financed property | | 2. Gross income from or allocable to debt-financed property | 3. Deductions directly connected with or allocable to debt-financed property | |
| | | | (a) Straight line depreciation (attach schedule) | (b) Other deductions (attach schedule) |
| (1) N/A | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6. Column 4 divided by column 5 | 7. Gross income reportable (column 2 x column 6) | 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) |
| (1) | | % | | |
| (2) | | % | | |
| (3) | | % | | |
| (4) | | % | | |
| | | | Enter here and on page 1, Part I, line 7, column (A). | Enter here and on page 1, Part I, line 7, column (B). |

Totals

Total dividends-received deductions included in column 8

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

| | | | | | |
|------------------------------------|---|---|--|---|---|
| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations | | | |
| | | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 5. Part of column 4 that is included in the controlling organization's gross inc. | 6. Deductions directly connected with income in column 5 |
| (1) N/A | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| Nonexempt Controlled Organizations | | | | | |
| 7. Taxable income | 8. Net unrelated income (loss) (see instructions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 | |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). | Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). |

Totals

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach schedule) | 4. Set-asides (attach schedule) | 5. Total deductions and set-asides (col. 3 plus col. 4) |
|--------------------------|---|--|---------------------------------|---|
| (1) N/A | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| Totals | Enter here and on page 1, Part I, line 9, column (A). | | | Enter here and on page 1, Part I, line 9, column (B). |

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7. | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4). |
|--------------------------------------|---|---|--|---|--------------------------------------|--|
| (1) N/A | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals | Enter here and on page 1, Part I, line 10, col. (A). | Enter here and on page 1, Part I, line 10, col. (B). | | | | Enter here and on page 1, Part II, line 26. |

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated 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, 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) YOUTH PAGE ADVER | 7,380 | | | | 3,816 | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | 7,380 | | 7,380 | | 3,816 | 3,816 |

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line 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, 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) N/A | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | 7,380 | | | | | 3,816 |
| Totals, Part II (lines 1-5) | 7,380 | | | | | 3,816 |

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) N/A | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| Total. Enter here and on page 1, Part II, line 14 | | | |

Form **2220**

Underpayment of Estimated Tax by Corporations

2014

Department of the Treasury
Internal Revenue Service

▶ Attach to the corporation's tax return.
▶ Information about Form 2220 and its separate instructions is at www.irs.gov/form2220.

Employer identification number
****-***2058**

Name **LAKES AREA YOUTH SERVICE
BUREAU, INC.**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

Part I Required Annual Payment

| | | | |
|----|--|-----------|--------------|
| | | 1 | 9,684 |
| 1 | Total tax (see instructions) | | |
| 2a | Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 | | |
| b | Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method | | |
| 2c | Credit for federal tax paid on fuels (see instructions) | | |
| d | Total. Add lines 2a through 2c | 2d | |
| 3 | Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty | 3 | 9,684 |
| 4 | Enter the tax shown on the corporation's 2013 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 | 4 | 725 |
| 5 | Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 | 5 | 725 |

Part II Reasons for Filing—Check the boxes below that apply. If any boxes are checked, the corporation must file Form 2220 even if it does not owe a penalty (see instructions).

- 6 The corporation is using the adjusted seasonal installment method.
- 7 The corporation is using the annualized income installment method.
- 8 The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

| | (a) | (b) | (c) | (d) |
|----|----------|----------|----------|----------|
| 9 | 04/15/14 | 06/15/14 | 09/15/14 | 12/15/14 |
| 10 | 181 | 181 | 181 | 182 |
| 11 | | | | |
| 12 | | | | |
| 13 | | | | |
| 14 | | 181 | 362 | 543 |
| 15 | 0 | 0 | 0 | 0 |
| 16 | | 181 | 362 | |
| 17 | 181 | 181 | 181 | 182 |
| 18 | | | | |

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 (2014) **LAKES AREA YOUTH SERVICE**

Part IV Figuring the Penalty

| | (a) | (b) | (c) | (d) |
|--|-----|---------------|-----|-----------|
| 19 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 | See Worksheet | | |
| 20 Number of days from due date of installment on line 9 to the date shown on line 19 | 20 | | | |
| 21 Number of days on line 20 after 4/15/2014 and before 7/1/2014 | 21 | | | |
| 22 Underpayment on line 17 x $\frac{\text{Number of days on line 21}}{365} \times 3\%$ | 22 | \$ | \$ | \$ |
| 23 Number of days on line 20 after 6/30/2014 and before 10/1/2014 | 23 | | | |
| 24 Underpayment on line 17 x $\frac{\text{Number of days on line 23}}{365} \times 3\%$ | 24 | \$ | \$ | \$ |
| 25 Number of days on line 20 after 9/30/2014 and before 1/1/2015 | 25 | | | |
| 26 Underpayment on line 17 x $\frac{\text{Number of days on line 25}}{365} \times 3\%$ | 26 | \$ | \$ | \$ |
| 27 Number of days on line 20 after 12/31/2014 and before 4/1/2015 | 27 | | | |
| 28 Underpayment on line 17 x $\frac{\text{Number of days on line 27}}{365} \times 3\%$ | 28 | \$ | \$ | \$ |
| 29 Number of days on line 20 after 3/31/2015 and before 7/1/2015 | 29 | | | |
| 30 Underpayment on line 17 x $\frac{\text{Number of days on line 29}}{365} \times \%$ | 30 | \$ | \$ | \$ |
| 31 Number of days on line 20 after 6/30/2015 and before 10/1/2015 | 31 | | | |
| 32 Underpayment on line 17 x $\frac{\text{Number of days on line 31}}{365} \times \%$ | 32 | \$ | \$ | \$ |
| 33 Number of days on line 20 after 9/30/2015 and before 1/1/2016 | 33 | | | |
| 34 Underpayment on line 17 x $\frac{\text{Number of days on line 33}}{365} \times \%$ | 34 | \$ | \$ | \$ |
| 35 Number of days on line 20 after 12/31/2015 and before 2/16/2016 | 35 | | | |
| 36 Underpayment on line 17 x $\frac{\text{Number of days on line 35}}{366} \times \%$ | 36 | \$ | \$ | \$ |
| 37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36 | 37 | \$ | \$ | \$ |
| 38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 33; or the comparable line for other income tax returns | 38 | \$ | | 17 |

*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.

Form 2220 Worksheet

2014

Form **2220**

For calendar year 2014, or tax year beginning _____, and ending _____

Employer Identification Number

Name

**LAKES AREA YOUTH SERVICE
BUREAU, INC.**

**** - ***2058**

| | 1st Quarter | 2nd Quarter | 3rd Quarter | 4th Quarter |
|-------------------------------|-----------------|-----------------|-----------------|-----------------|
| Due date of estimated payment | <u>04/15/14</u> | <u>06/15/14</u> | <u>09/15/14</u> | <u>12/15/14</u> |
| Amount of underpayment | <u>181</u> | <u>181</u> | <u>181</u> | <u>182</u> |

Prior year overpayment applied _____

| | 1st Payment | 2nd Payment | 3rd Payment | 4th Payment | 5th Payment |
|-------------------|-------------|-------------|-------------|-------------|-------------|
| Date of payment | _____ | _____ | _____ | _____ | _____ |
| Amount of payment | _____ | _____ | _____ | _____ | _____ |

| Qtr | From | To | Underpayment | #Days | Rate | Penalty |
|----------------------|----------|---------|--------------|-------|------|-----------|
| 1 | 4/15/14 | 5/16/15 | 181 | 396 | 3.00 | 6 |
| 2 | 6/15/14 | 5/16/15 | 181 | 335 | 3.00 | 5 |
| 3 | 9/15/14 | 5/16/15 | 181 | 243 | 3.00 | 4 |
| 4 | 12/15/14 | 5/16/15 | 182 | 152 | 3.00 | 2 |
| Total Penalty | | | | | | 17 |

Federal Statements

FYE: 12/31/2014

Statement 1 - Form 990-T, Part II, Line 28 - Other Deductions

| <u>Description</u> | <u>Amount</u> |
|---------------------------------|-------------------|
| Travel | \$ 286 |
| Cash Prizes | 644,326 |
| Rent and Facility Costs | 15,619 |
| Other Direct Fundraising/Gaming | 32,989 |
| Total | \$ <u>693,220</u> |

**LAKES AREA YOUTH SERVICE
BUREAU, INC.**

****--***2058 Form 990-T Estimates**

Form **990-W**
(Worksheet)
Department of the Treasury
Internal Revenue Service

**Estimated Tax on Unrelated Business Taxable
Income for Tax-Exempt Organizations**
(and on Investment Income for Private Foundations)
(Keep for your records. Do not send to the Internal Revenue Service.)

OMB No. 1545-0976

2015

| | | | |
|-----|---|-----|--------|
| 1 | Unrelated business taxable income expected in the tax year | 1 | 58,734 |
| 2 | Tax on the amount on line 1. See instructions for tax computation | 2 | 9,684 |
| 3 | Alternative minimum tax (see instructions) | 3 | |
| 4 | Total. Add lines 2 and 3 | 4 | 9,684 |
| 5 | Estimated tax credits (see instructions) | 5 | |
| 6 | Subtract line 5 from line 4 | 6 | 9,684 |
| 7 | Other taxes (see instructions) | 7 | |
| 8 | Total. Add lines 6 and 7 | 8 | 9,684 |
| 9 | Credit for federal tax paid on fuels (see instructions) | 9 | |
| 10a | Subtract line 9 from line 8. Note. If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions | 10a | 9,684 |
| b | Enter the tax shown on the 2014 return (see instructions). Caution. If zero or the tax year was for less than 12 months, skip this line and enter the amount from line 10a on line 10c | 10b | 9,684 |
| c | 2015 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount from line 10a on line 10c | 10c | 9,684 |

| | (a) | (b) | (c) | (d) | |
|--|-----|----------|----------|----------|----------|
| 11 Installment due dates (see instructions) | 11 | 04/15/15 | 06/15/15 | 09/15/15 | 12/15/15 |
| 12 Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization" (see instructions) | 12 | 2,421 | 2,421 | 2,421 | 2,421 |
| 13 2014 Overpayment (see instructions) | 13 | | | | |
| 14 Payment due (Subtract line 13 from line 12) | 14 | 2,421 | 2,421 | 2,421 | 2,421 |

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2015)

Federal Statements**Taxable Interest on Investments**

| <u>Description</u> | <u>Amount</u> | <u>Unrelated Business Code</u> | <u>Exclusion Code</u> | <u>Postal Code</u> | <u>Acquired after 6/30/75</u> | <u>US Obs (\$ or %)</u> |
|--------------------|-----------------|------------------------------------|---------------------------|------------------------|-----------------------------------|-----------------------------|
| INVESTMENT INCOME | \$ 3,443 | | | 14 MN | | |
| Total | \$ <u>3,443</u> | | | | | |

411322058 LAKES AREA YOUTH SERVICE
_*2058
FYE: 12/31/2014

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

| Description | Total Expenses | Program Service | Management & General | Fund Raising |
|-------------|----------------|-----------------|----------------------|--------------|
| | \$ 35,192 | \$ 12,807 | \$ 538 | \$ 21,847 |
| Total | \$ 35,192 | \$ 12,807 | \$ 538 | \$ 21,847 |

411322058 LAKES AREA YOUTH SERVICE
-*2058
FYE: 12/31/2014

Federal Statements

Schedule A, Part II, Line 1(e)

| Description | Amount |
|--------------------------------------|-------------------|
| UNITED WAY | |
| Cash Contribution | 39,024 |
| JAN MEHLHOFF | |
| Cash Contribution | 50,000 |
| INITIATIVE FOUNDATION | |
| Cash Contribution | 10,000 |
| ANDERSEN CORPORATE FOUNDATION | |
| Cash Contribution | 4,500 |
| MYTECH PARTNERS INC. | |
| SERVER INSTALL | |
| FRED & KATHERINE B ANDERSEN FOUNDATI | |
| Cash Contribution | 7,000 |
| OTTO BREMER FOUNDATION | |
| Cash Contribution | 25,000 |
| JOHNSON / TURNER | |
| TELEPHONE SYSTEM | |
| PACE DEVELOPMENT | |
| Cash Contribution | 5,000 |
| TASTE EVENT | |
| Cash Contribution | 6,342 |
| BTBJ BALL | |
| Cash Contribution | 4,983 |
| Total | <u>\$ 201,849</u> |

Federal Statements**Schedule A, Part II, Line 5 - Excess Gifts**

| <u>Donor Name</u> | <u>Total</u> | <u>Excess</u> |
|-------------------------------------|-------------------|-------------------|
| ANDERSEN CORPORATE | \$ 12,000 | \$ |
| FRED & KATHERINE B ANDERSEN FOUNDAT | 35,000 | 14,552 |
| OTTO BREMER FOUNDATION | 85,000 | 64,552 |
| HALLBERG FAMILY | 5,000 | |
| JAN MEHLHOFF | 50,000 | 29,552 |
| PACE DEVELOPMENT | 5,000 | |
| INITIATIVE FOUNDATION | 10,000 | |
| ANDERSON CORPORATION | 4,500 | |
| Total | <u>\$ 206,500</u> | <u>\$ 108,656</u> |

411322058 LAKES AREA YOUTH SERVICE
_*2058
FYE: 12/31/2014

Federal Statements

Schedule A, Part II, Line 8(e)

| Description | Amount |
|-------------------|----------|
| INVESTMENT INCOME | \$ 3,443 |
| Total | \$ 3,443 |

Schedule A, Part II, Line 9(e)

| Description | Amount |
|------------------------|-----------|
| MISCELLANEOUS | \$ 2,349 |
| YOUTH PAGE ADVERTISING | 3,564 |
| TASTE EVENT | 5,815 |
| BTBJ BALL | 14,828 |
| CHARITABLE GAMBLING | 56,170 |
| Less: Deductions | -1,000 |
| Total | \$ 81,726 |

Schedule A, Part II, Line 12

| Description | Amount |
|------------------------|------------|
| GOVERNMENT GRANTS | \$ 184,240 |
| CLIENT FEES | 53,024 |
| YOUTH PAGE ADVERTISING | |
| SHRED EVENT | |
| Total | \$ 237,264 |

Federal Statements

FYE: 12/31/2014

CHARITABLE GAMBLING**Other Direct Fundraising or Gaming Expenses**

| <u>Description</u> | <u>Amount</u> |
|------------------------|------------------|
| TAXES | \$ 21,609 |
| OTHER GAMBLING RELATED | 11,380 |
| Total | <u>\$ 32,989</u> |