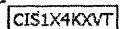


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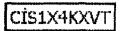
## SCHEDULE A (Form 990 or 990-EZ)

## **Public Charity Status and Public Support**

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

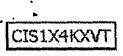
OMB No. 1545-0047

Department of the Treasury Internal Revenue Service				itsch to Form 990 or Form 990-EZ. > See separate instructions.					į (į	Open to Public Inspection		
Name of the organization									Employ		tion number	
REGION 2 ARTS COUNCIL									41		1390021	
	rt I	_	_							ee Instru	ctions)	
The 1 2 3 4 5 6 7 8 9	<ul> <li>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii).</li> <li>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)</li> <li>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)</li> <li>A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:</li> <li>An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)</li> <li>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</li> <li>An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)</li> <li>A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)</li> </ul>											
10 11	_	An organization organization organization of the colonial of the colonial organization organization of the colonial organization organizat	tion organized a tion organized a cone or more purheck the box the by this box, I cere are then foundation section 509(a)(2)	nd operated exclusive and operated exclusive billion supported organist describes the type of Type II that the organization managers and other	ely to tes vely for ti- nizations of suppo- ;  Tyr, tion is no r than on ion from  epted any either alo	t for pub he beneficiescribe rating orgonalification to an in-function or more the IRS  r gift or cone	ic safety. It of, to in sectionalization actionally illed direct publicly that it is contribution without with without without without without without without without with without wi	See second perform in the sound con integrate atty or incomported at Type	ction 506 the funct ((1) or se uplete lin d directly be od organi 1, Type !	ions of, contion 509 es 11e the d Contions of cations de la contions de la contiens de la contie	or to carry of (a)(2). See see rough 11h.  Type III-O more disquescribed in see III supporti	ut the ection ther alified ection
				rison described in (1) :	•	ganizatio	nr .				11gfil)	
		(III) A 35% c	controlled entity	of a person described	or (i) ni t						11000	
h Provide the fo fil Name of supported organization		e of supported	following inform	ation about the organisation (48) Type of organization (described on lines 1-9 above or IRC section (see instructions))	izations the organization sup (v) is the organization in col (ii) fetald in your governing document? (v) Did you col (ii) of support		rou notify nization in of your	Organiza	is the ton in col gard in the S.?	(vii) Amoun support	l of	
			<del></del>		Yes	No	Yes	No	Yee	No		
									ļ		' 	



	dule A Form 990 or 990-EZ) 2008  Support Schedule for Org	anizations (	Described In	Sections 170	)(b)(1)(A)(iv)	and 170(b)(1	Page 2 (XA)(VI)
	(Complete only if you chec	ked the box	on line 5, 7,	or 8 of Part I.	}		
	tion A. Public Support						·
CI	lendar year (or fiscal year beginning in) 🕨	. (e) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tex revenues levied for the organization's benefit and either paid to or expended on its behalf				,		
3	The value of services or facilities furnished by a governmental unit to the organization without charge				····		
4	Total. Add lines 1-3		<u> </u>				
5	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.	To the second se	7				
500	tion B. Total Support	<u> </u>		<u> </u>		L	L
	dendar year (or fiscal year beginning in)	(a) 2004	(b) 2006	(e) 2006	(d) 2007	(-1 2006	ffi Total
7		(=) 2003	Int 2000	(6) 2006	14/ 2007	(e) 2008	(i) Total
8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10	• • • •					
12	Gross receipts from related activities, etc. (see instructions)						
13	First five years. If the Form 990 is for organization, check this box and stop he	the organizatio	n's first, seco	nd, third, fourth,	or fifth tax y	ear as a section	on 501(c)(3)
	tion C. Computation of Public Su						
14	Public support percentage for 2008 (line					14	
15	Public support percentage from 2007 Sci					15	%_
18a	33% % support test—2008. If the organization did not check the box on line 13, and line 14 is 33%,% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
	33½% support test—2007. If the organization did not check a box on line 13 or 18a, and line 15 is 33½% or more, check this box and stop here. The organization qualifies as a publicly supported organization.						
17 <b>a</b>	10%-facts-and-circumstances test -2008. If the organization did not check a box on line 13, 16s, or 16b, and line 14 is 16% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicity supported organization.						
b 18	10%-facts-and-circumstances test—2007. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						

	Support Schedule for Organ (Complete only if you checke				(2)		
_	tion A. Public Support	(a) 0004	At more	(-) 000g	4 n 0007	(-) 0000	<b>A B</b> -1-1
G	dendar year (or fiscal year beginning in) »	(e) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 2	Gitts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  Gross receipts from admissions, merchandise	128942	129193	132458	150038	206806	747437
_	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513					<u> </u>	
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	128942	129193	132458	150038	206806	747437
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	<del>                                     </del>					747437
Sec	tion B. Total Support						1-11-101
C	slendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2008	(d) 2007	(e) 2005	(f) Total
9	Amounts from line 6	128942	129193	132458	150036	206806	747437
102	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1058	2248	3233	3111	893	10543
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	1958	2248	3233	3111	893	10543
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c. 11,	<del></del>			<del></del>	<del>-</del>	757980
14	and 12.) First five years. If the Form 990 is for to organization, check this box and stop to the first firs	he organization	's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	
Sec	tion C. Computation of Public Sur		tage	<del></del>	<del>· · · · ·</del>	<u> </u>	
15	Public support percentage for 2008 (line	e 8, column (f)	divided by line	e 13, column (	0)	15	98.61 %
16							98.52 %
						47 [	1.39 %
17 18	Investment income percentage for 2006 investment income percentage from 20		18	1.20 %			
19a					nd line 15 is m		
	17 is not more than 33% %, check this bo	x and stop he	re. The organiz	ration qualifies	as a publicly s	upported orga	nization > 🗹
b	AA44A						
20_	Private foundation. If the organization of	ild not check a	box on line 1	4, 19a, or 19b,		x and see inst	



	Supplemental Information Complete this part to provide the evaluation required by Dert II live 40.	4
	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)	_
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REGION 2 ARTS COUNCIL 426 BEMIDJI AVE N BEMIDJI MN 56601

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Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee