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# Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150 2008

Open to Public Inspection

De Int	partment ernal Reve	of the Treasury enue Service  assets less than \$2,500,000 at the end of the year menue Service  The organization may have to use a copy of this return to satisf			Inspection
A		<del></del>	/30/09	_	
В		applicable Please C Name of organization		D Em	ployer identification number
	Address	change use IRS Lake Area Technical Institute			
	Name c	hange	46	5-0381673	
	Initial re	1' I	ess) Room/suite	E Tele	ephone number
	Termina	stion See 230 11th Street NE, PO Box 730	60	5-882-5284	
	Amende	Specific   City or town, state or country, and ZIP + 4		F Gro	oup Exemption
	Applicat	ion pending tions Watertown SD 57201-0	730	Nur	mber 🕨
	• Sec	tion 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attac	h G Accounting	method	Cash X Accrual
		a completed Schedule A (Form 990 or 990-EZ).	Other (specify)	<u> </u>	<del></del> .
1		te: > www.lakeareatech.edu	H Check	X If th	e organization is <b>not</b>
<u>J</u>	Organ	ization type (check only one)— X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or	527 required to 2	111ach Sc 190-PF)	hedule B (Form 990,
K	Check	if the organization is not a section 509(a)(3) supporting organization and its gro	oss receipts are normally no	t more t	than \$25,000 A return
	ıs not r	equired, but if the organization chooses to file a return, be sure to file a complete return			
L		es 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of files		<u>▶</u> \$	<del>`                                    </del>
	Part I	Revenue, Expenses, and Changes in Net Assets or Fund Balar	nces (See the instruc		
	1	Contributions, gifts, grants, and similar amounts received		1_1_	320
	2	Program service revenue including government fees and contracts		2	15,900
	3	Membership dues and assessments		3	F01
	4	Investment income	1	4	591
	5a	Gross amount from sale of assets other than inventory		-	
ē	b	Less cost or other basis and sales expenses	0	┥_	
	٦	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch.)	ng, check here	_5c	
en	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from <b>gamin</b> Gross revenue (not including \$ 320 of contributions			
Revenue	а	<del></del>	3		
	Ь	reported on line 1)  Less direct expenses other than fundraising expenses  68	3		
	6	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
	7a	Gross sales of inventory, less returns and allowances	3,79		
	, a	Less cost of goods sold 7th	5		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	-2,984	
	8	Other revenue (describe  See Statement 1	)	8	1,150
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	5 h	9	14,977
	10			10	4,500
	11	Benefits paid to or for members	တ္တြ	11	
S	12	Salaries, other compensation, and employee benefits DEC 0 8 2	009   🔀	12	
ıse	13	Professional fees and other payments to independent contractors		13	774
ibei	14	Occupancy, rent, utilities, and maintenance	14		
ش ه	15	Printing, publications, postage, and shipping	- income	15	10,596
0	16	Other expenses (describe ► See Statement 2	)	16	672
$\geq$	17	Total expenses. Add lines 10 through 16	<u> </u>	17	16,542
#	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18	-1,565
西	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year fig	_19	39,813	
INCAMINADS Expense	20	Other changes in net assets or fund balances (attach explanation)	_20		
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	38,248	
	Part II	Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more,	file Form 990 instead of Fo	rm 990-	EZ
ော		(See the instructions for Part II )	L_	(B) End of year	
		savings, and investments	3 22	38,248	
23		nd buildings	23		
æ		ssets (describe	)	24	20 212
	Total a		39,813		38,248
		abilities (describe	)	<del></del>	0
27	Net ass	sets or fund balances (line 27 of column (B) must agree with line 21)	39,813	3 27	38,248

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Form 990-EZ (2008)

	Area Technical Institut		ions for Dort III	<u> </u>		Page 2		
	of Program Service Accomplishments	(See the instruct	ions for Part III	1.)		penses d for 501(c)(3)		
What is the organization's primar						,		
	carrying out the organization's exempt purposes. In				and (4) organizations and 4947(a)(1) trusts,			
			for others)					
	he number of persons benefited, or other relevant ment, development, and achievement of	morniador for caon pr	9141111110			ioi outiono y		
	Institute (educational institution),							
	ublications and scholarships. $\{1,500\}$ If this amount includes foreign grants, (	check here	•	$\square$	28a	15,207		
29	The amount includes loreign grants, t	CHOCK HOTO		1				
23								
				1				
(Grants \$	) If this amount includes foreign grants, o	check here	<b>&gt;</b>	$\prod  $	29a			
30								
(Grants \$	) If this amount includes foreign grants, o	check here	<b>•</b>		30a			
31 Other program services (atta								
(Grants \$	) If this amount includes foreign grants, o	check here	•		31a			
32 Total program service expe	enses (add lines 28a through 31a)			▶	32	15,207		
Part IV List of Officers	, Directors, Trustees, and Key Employees. List	each one even if not co	mpensated (See t	he ınst	ructions for F	Part IV)		
	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) C employe	Contributions to ee benefit plans & d compensation	(e) Expense		
Laurie Danforth	Watertown	President	Sitter o y	00,00,0	<u> </u>			
230 11th Street NE	SD 57201	2	٥	ŀ	0			
Kimberly Konrad	Watertown	PresElect						
230 11th Street NE	SD 57201	1	0		0	0		
Nancy Aas	Watertown	Director						
230 11th Street NE	SD 57201	1	0		0			
Natalie Bradshaw	Watertown	Director						
230 11th Street NE	SD 57201	1	0		. 0			
Brian DeBoer	Watertown	Director						
230 11th Street NE	SD 57201	1	0		0	c		
Jeff Foster	Watertown	Director						
230 11th Street NE	SD 57201	1	. 0		0	c		
Monica Jurgens	Watertown	Director						
230 11th Street NE	SD 57201	1	0		0			
Shawn Lenning	Watertown	Director						
230 11th Street NE	SD 57201	11	0		. 0	c		
Anne Rylance	Watertown	Director						
230 11th Street NE	SD 57201	11	0	ļ	0			
Tom Paulson	Watertown	Exec. Dir.						
230 11th Street NE	SD 57201	11	_0	-	0			
				<del>                                     </del>		<u> </u>		
			<del></del>	†				
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			<del></del> -	<del> </del>	-			
					ĺ			

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Form **990-EZ** (2008)

P	ort V Other Information (Note the statement requirements in the instructions	or Part VI.)			
				Yes	No
33	Did-the organization engage-in any activity not previously reported to the IRS? If "Yes," attach a detailed				-
	description of each activity		33		Х
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes,"				
	attach a conformed copy of the changes		34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but	t not			
	reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T	e Statement 4			]
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice,	reporting,			
	and proxy tax requirements?		35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b	<u> </u>	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes,"			Ì	
	complete applicable parts of Schedule N		36	<u> </u>	X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr	37a	_		
b	Did the organization file Form 1120-POL for this year?		37b		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or	were	ŀ		1
	any such loans made in a prior year and still unpaid at the start of the period covered by this return?		38a	<u> </u>	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	_	Í :	
39	Section 501(c)(7) organizations Enter				
а	Initiation fees and capital contributions included on line 9	39a	_		
b	Gross receipts, included on line 9, for public use of club facilities	39b	_		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under				ł
	section 4911 ▶, section 4912 ▶, section 4955 ▶	·			
b	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit	transaction			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete	ete Schedule			
	L, Part I		40b		X
С	Enter amount of tax imposed on organization managers or disqualified persons during		Ì		
	the year under sections 4912, 4955, and 4958	<b></b>			
d	Enter amount of tax on line 40c reimbursed by the organization	<b></b>			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter				
	transaction? If "Yes," complete Form 8886-T		40e		X
41	List the states with which a copy of this return is filed   None	<u> </u>			
42a	The books are in care of <b>b</b> Brooke Bohls	Telephone no ► 60	5 - 88	2 - 5	284
	PO Box 730				
	Located at ▶ Watertown, SD	ZIP+4 ► 57	201		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authorized and the calendar year.	ority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	al		Yes	No
	account)?		42b		X
	If "Yes," enter the name of the foreign country			ĺ	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ba	nk			
	and Financial Accounts.				
С	At any time during the calendar year, did the organization maintain an office outside of the U S?		42c		<u> </u>
	If "Yes," enter the name of the foreign country				_
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here				<b>L</b>
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43			
				Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of				
	Form 990-EZ		44		<u> </u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)	? If			
	"Yes," Form 990 must be completed instead of Form 990-EZ		45		<u> </u>
		ı	orm 99	0-EZ	(2008)

Form 990-EZ (2008)

Preparer's Identifying Number (See instr.)

▶ 46-0414067

605-886-8425

► X Yes

P00893537

**Executive Director** 

Check if

employed 🕨

EIN

Phone

no ▶

self

Date

Vilhauer & Raml P.C.

SD

57201-6267

19/2

109

Paid

Preparer's

**Use Only** 

Tom Paulson

Hanson

May the IRS discuss this return with the preparer shown above? See instructions

P.O. Box 1267

Watertown,

Type or print name and title

Preparer's

signature

Firm's name (or yours

if self-employed),

address, and ZIP +

#### 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.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Lake Area Technical Institute Alumni Association

Employer identification number 46-0381673

Pa	art i	Reas	on for Public Charity	Status (All organizations	s must c	omplete	e this p	art.) (	see in	structi	ions)
The	orga	nization is not	a private foundation because	e it is (Please check only one or	ganization	)					
1		A church, cor	h, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2	П	A school des	school described in section 170(b)(1)(A)(ii). (Attach Schedule E)								
3	П			ce organization described in sect	tion 170(b	)(1)(A)(iii	). (Attacl	Sched	ule H)		
4	П	•	•	d in conjunction with a hospital de	•				-	he hosp	otal's name,
	_	city, and state	-					,		·	
5	$\Box$	•		of a college or university owned o	or operated	l by a gov	ernment	al unit d	escribed	d in	
	_	-	b)(1)(A)(iv). (Complete Part	•		, 3					
6	$\Box$	•		overnmental unit described in <b>se</b>	ction 170	b)(1)(A)(v	<b>/</b> )				
7	X			substantial part of its support from			-	n the ge	neral o	iblic	
•	لتت	_	section 170(b)(1)(A)(vi). (C		a gover			90	mora, p		
8	$\Box$			70(b)(1)(A)(vi). (Complete Part	11.3						
9	Н	•		) more than 33 1/3 % of its supp	-	ntribution	s memb	nershin f	ees an	d aross	
•	ш			pt functions—subject to certain							
		•		d unrelated business taxable inc						1113	
			•	0, 1975. See section 509(a)(2).			11 (02)	Om bus	1100000		
10	$\Box$		<u> </u>	exclusively to test for public safet			2)/4) /6	aa instri	(ctions)		
11	Н	-	•	exclusively to test for public safet	-						
• • •	Ш	-	•	ed organizations described in sec				-		tion	
				ne type of supporting organization							
						•	d		i' e III–Ot	bor	
•	$\Box$			c ∐ Type III–Function anization is not controlled directly						nei	
е	ш		•	and other than one or more publi						ction	
		•	-	and other than one of more puon	iciy suppoi	teu organ	124110113	GESCHIDE	5u III 56	CHOIT	
			section 509(a)(2)	rmination from the IRS that it is a	Type I Ty	me II or T	Evoe III s	upporter	20		
f			check this box	mination from the INS that it is a	i type i, i	ype II, OI	ype iii s	apporti	ig		
_		_		ion accepted any gift or contribut	tion from a	ny of the					
g			· ·	ion accepted any gift or contribut	uon nom a	ny or the					
		following per									[v ] v.
			•	ntrols, either alone or together w	nui person	s describe	:u III (II)				Yes No
		, ,		the supported organization?							11g(ı)
			member of a person describ	**							11g(ii)
		• •	ontrolled entity of a person d	***							[11g(m)]
_h		Provide the f	ollowing information about th	ie organizations the organization	supports.				,		
(1)		of supported	(II) EIN	(iii) Type of organization	1 ' '	organization	1 ''	ou notify		ls the	(vii) Amount of
	org	anization	}	(described on lines 1-9 above or IRC section		sted in your document?	1	nization in of your	organizat	tion in col zed in the	support
				(see instructions))	governing	document.	1	ort?	11,	S ?	
					Yes	No	Yes	No	Yes	No	
									ļ		
									-		
_					1						
Total			1	I	.1	<u> </u>			1		<u></u>

Page 2

Schedule A (Form 990 or 990-EZ) 2008 Lake Area Technical Institute Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 13,279 65,704 6,290 11,628 320 <u>9</u>7,221 Tax 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 Total. Add lines 1-3 6,290 11,628 13,279 65,704 320 97,221 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) 37,530 Public support. Subtract line 5 from line 4 59,691 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 6,290 11,628 13,279 65,704 Amounts from line 4 320 97,221 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 103 68 511 17 591 1,290 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 98,511 12 12 110,875 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 60.5932 % 15 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 98.1498 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or 17a 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 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

	(Complete only if you crit	ecked the box	OII lifte 9 OI Fa	rt i.)	<del></del>		<del></del>
	tion A. Public Support	-					
Ca	lendar year (or fiscal year beginning in)	(a) 2004	(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	Gross receipts from admissions, merchandise 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						
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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	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)						
	tion B. Total Support	T	T				
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6			<u> </u>			<del></del>
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				,		
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b						
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,						
	and 12 )						
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	second, third, fourt	h, or fifth tax year a	s a section 501(c)(	3)	▶ [
Sec	tion C. Computation of Public Su	pport Percenta	age				
15	Public support percentage for 2008 (line 8,		<del></del>	(f))		15	%
16	Public support percentage from 2007 Scheo	• •	•			16	%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2008 (lin			olumn (f))		17	%
18	Investment income percentage from 2007 S		•			18	%
19a	33 1/3 % support tests—2008. If the organ			4, and line 15 is m	ore than 33 1/3 %,	and line	
	17 is not more than 33 1/3 %, check this bo						▶ [
b	33 1/3 % support tests—2007. If the organ						
	line 18 is not more than 33 1/3 %, check thi						▶ [
20	Private foundation. If the organization did	-					

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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)

46-0381673

## **Federal Statements**

## Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue

Description		 Amount
Newsletter		\$ 1,150
Total		\$ 1,150

## Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
Conferences & Meetings	341
Insurance	200
Dues & Subscriptions	20
Miscellaneous	111
Total	\$672

46-0381673

## **Federal Statements**

## Statement 3 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

### Description

To encourage a spirit of loyalty, fellowship and unity among the students, graduates, faculty, administration, and friends of the Lake Area Technical Institute (educational institution) and to direct an organized cooperative effort for the advancement, development, and achievement of Lake Area Technical Institute.

46-0381673

## **Federal Statements**

## Statement 4 - Form 990-EZ, Part V, Line 35 - Income From Business Activities not Reported on Form 990-T

#### Description

The revenue reported on line 2 is program service revenue generated from student fees; the revenue reported on line 6a is from a special event not regularly carried on; and the revenue reported on line 7a is from sale of inventory which is not regularly carried on. Accordingly, all income is properly excluded as either program service revenue or under IRC Sections 512, 513, or 514.