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SIDZ OR ADN GUNEVOLO

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2012

Open to Public Inspection

<u>A</u> _	For the	2012 c	alendar year, or tax year beginning , and ending C Name of organization						
	Check if app	plicable		D Employ	ver Identification number				
X	Address change Lawrenceburg Main Street, Inc.								
	Name chan	nge	Doing Business As	20-	0456048				
$\overline{\Box}$	Initial return		Number and street (or P O box if mail is not delivered to street address)	ł	Room/suite	E Telepho	one number		
二		-	118 Walnut Street			812	2-537-4504		
\sqcup	Terminated	;	City, town or post office, state, and ZIP code						
Ш	Amended re	eturn	Lawrenceburg IN 47025			G Gross rece	eipts \$ 437,669		
	Application	pending	F Name and address of pnncipal officer		IN a la thio o ar	ana ratura far	affiliates? Yes X No		
			Patricia Krider		n(a) is uits a gi				
			118 Walnut Street		H(b) Are all affi				
			Lawrenceburg IN 47025		If "No	," attach a list	(see instructions)		
	Tax-exemp			527	4				
<u>J</u>	Website	► W	ww.thinklawrenceburg.com		H(c) Group exe				
	Form of org		X Corporation Trust Association Other ▶	L Y	ear of formation 1	997	M State of legal domicile IN		
_ <u>P</u>	art I		ımmary						
	1 B	•	scribe the organization's mission or most significant activities		_				
9	i		reate a positive atmosphere for downtown Lawre		_				
Jan			ness, promote community pride, develop economi						
/er	ſ		renceburg a better place through our public/pri	_		_			
9	1		is box > if the organization discontinued its operations or disposed of more	than 25%	of its net assets		4.4		
85	1		of voting members of the governing body (Part VI, line 1a)			3	11		
ties	i		of independent voting members of the governing body (Part VI, line 1b)		4	11			
Activities & Governance			nber of individuals employed in calendar year 2012 (Part V, line 2a)		5	37			
Ac			nber of volunteers (estimate if necessary)		6	0			
			elated business revenue from Part VIII, column (C), line 12			7a	0		
	<u> b</u> N	let unrel	lated business taxable income from Form 990-T, line 34		Prior Yea	7b	Current Year		
	8 c	`ontribut	tions and grants (Part VIII, line 1h)	<u> </u>		8,656	409,298		
Ωe	1		service revenue (Part VIII, line 2g)	r		8,597	24,863		
Revenue	L	-	ent income (Part VIII, column (A), lines 3, 4, and 7d)	1		4,492	3,508		
8			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	ľ		7	0		
			enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	F	46	1,745	437,669		
			nd similar amounts paid (Part IX, column (A), lines 1–3)				0		
			paid to or for members (Part IX, column,(A), line 4)	Ī			0		
S	1	-	other compensation, employee benefits (Part IX, golumn (A), lines 5-10)	ſ	10	6,318	78,922		
penses	1		and fundrating food (Part IV, column (A) Impat 10	Γ			0		
e d			Control Contro) [
Ä	17 0	Other exp	penses (Part IX, column (A), lines 11a-139 11A29) 0 4 2013		65	0,628	471,609		
			penses Add lines 13–17 (must equal Part IX, column (A), line 25)		75	6,946	550,531		
	19 R	Revenue	less expenses Subtract line 18 from line 12			5,201	-112,862		
Net Assets or	3		L Goven, UT	-	Beginning of Cur		End of Year		
Ssets	20 T		ets (Part X, line 16)	-		8,233	384,832		
age a	21 T		ulities (Part X, line 26)	}		2,586	2,047		
			ts or fund balances Subtract line 21 from line 20		49	5,647	382,785		
	art II		gnature Block						
Ų tr	nder pen	nalties of p	perjury, I declare that I have examined this return, including accompanying schedules ar omplete Declaration of preparer (other than officer) is based on all information of which	nd statemer preparer ha	nts, and to the bes	st of my knov	wledge and belief, it is		
	T	Ct, and	Only is assessed in a minimum of prepared (other than ones) is assessed in an intermediate of minimum of the other than ones.	ргоралог по			1-1-13		
e:			Signature of officer			Date	<u> </u>		
Siç He	- 1		PATRICIA KRIDER EXE	01771	IE DI	RECT	71 P		
176		7	Type or print name and title	· · · · · · · ·	16 011	(0.07	0/0		
		·	e preparer's name Preparer's signature		Date	Check	r PTIN		
Pai	d	"	Lovell Scott Lovell		1	/13 self-em	LJ"		
	parer		mho Torrell Crown Too			imi's EIN	05-0607905		
	e Only	Firm's na	348 Walnut St Ste 201			HILLS EIN F			
		Eim's of	Tormon-ching TN 47025-1942			hone no	812-537-1205		
Mar	v the IRS	Firm's add	s this return with the preparer shown above? (see instructions)			nong no	Yes No		
			uction Act Notice, see the separate instructions.			a	Form 990 (2012)		
DAA			······································			7 '	\		

Form 990 (2012) Lawrenceburg Main Street, Inc. 20-0456048	Page 2
Part III Statement of Program Service Accomplishments	
, Check if Schedule O contains a response to any question in this Part III	<u>X</u> _
1 Briefly describe the organization's mission To create a positive atmosphere for downtown Lawrenceburg: recr business, promote community pride, develop economic tools to he Lawrenceburg a better place through our public/private partners	lp make
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	Yes X No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O	Yes X No
4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a (Code) (Expenses \$ 249,749 including grants of \$) (Revenue \$ Lawrenceburg Main Street, Inc offers various business and city programs and events to attract employers and consumers to the d Lawrenceburg area. Party in the Street has been a successful prattract consumers from all over the Tri-state area to shop at 1 vendors. The Pop up Shops program was new in 2012. To attract businesses to the downtown area, 6 grants were issued to start to assist with overhead expenses.	Cowntown cogram to cocal new
4b (Code) (Expenses \$ 147,090 including grants of \$) (Revenue \$ Lawrenceburg Main Street, Inc has an active improvement and bear program that includes grant programs for commercial and resident paint and improvement, as well as, signs and awnings. Business 50% of the cost for paint/facade improvements up to \$1,000. Si business may receive 50% up to \$1,000 for signs and awnings. Receive up to \$500 for exterior paint and improvements to their 2011 businesses were given 17 grants for exterior improvements, weregiven for signs & awnings. Residences were given 37 grants for these programs was \$46,583. A building improvement grant primited use properties in the downtown area. A \$25,000 grant was 12 applications were received and 12 grants were funded.	tial facade es are given milarly, a esidents may homes. In 19 grants The total ogram for
4c (Code) (Expenses \$ 71,301 including grants of \$) (Revenue \$ Music on the River is Lawrenceburg Main Street's signature seri included concerts every Thursday evening from mid June to mid S The concerts were free and well attended. The concerts attract from Dearborn County and throughout southeast Indiana, as well neighboring Ohio and northern Kentucky. This series had built spirit and pride and has raised public awareness of downtown La	eptember. ed people as, community
4d Other program services (Describe in Schedule O)	
	463)
4e Total program service expenses ► 530,693	

۳٤	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3	_	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			x
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4_		
,	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	-		
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	1		
	"Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
-	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	1		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е		11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1		
	Schedule D, Parts XI and XII	12a	X	
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	l		3.7
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	- 3	14a		X
b	33 33 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			
	fundraising, business, investment, and program service activities outside the United States, or aggregate	14b		x
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	140		122
15	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			 -
10	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	''		
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	· ·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		_X_
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>x</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K If "No," go to line 25	24a		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	-	
25a				
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b				
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			37
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			v
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	20-		x
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		х
	Schedule L, Part IV	200		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28c		x
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	29		X
29 20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		x
31	conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
3 I	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	-		
J L	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
••	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
• •	or IV, and Part V, line 1	34		X
35a		35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		X

13c

X

Form 990 (2012)

14a

14b

14a

C

Enter the amount of reserves on hand

Did the organization receive any payments for indoor tanning services during the tax year?

If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through	7b t	oek	w, aı	nd for a	"No"		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S							
	Check if Schedule O contains a response to any question in this Part VI							X
ec	tion A. Governing Body and Management							
						Y	es	No
la	Enter the number of voting members of the governing body at the end of the tax year	1a	Ŀ	11				
	If there are material differences in voting rights among members of the governing body, or						I	
	if the governing body delegated broad authority to an executive committee or similar						1	
	committee, explain in Schedule O						1	
b	Enter the number of voting members included in line 1a, above, who are independent	1b	Ŀ	11			I	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						ŧ	
	any other officer, director, trustee, or key employee?				<u> </u>	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct							
	supervision of officers, directors, or trustees, or key employees to a management company or other person?				Li	3	_	<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				<u> </u>	1		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?					5		<u>X</u>
6	Did the organization have members or stockholders?				<u> </u>	5		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint				1	Ι.		
	one or more members of the governing body?				_7	a .	X	
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members,							37
	stockholders, or persons other than the governing body?		,		_7	b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by	the f	ollo	wing			., İ	
а	The governing body?						X	
þ	Each committee with authority to act on behalf of the governing body?					b	X	
Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at								x
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	ol D	<u>~~</u>	<u> </u>		9		
ec	tion B. Policies (This Section B requests information about policies not required by the Interr	iai r	ev	enue	Code		res	No
_					T4	0a	es	X
0a	Did the organization have local chapters, branches, or affiliates?				<u> </u>	va		<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				1	оь		
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?								x
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				_ l	2a	\mathbf{x}^{\dagger}	
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	confli	cts'	,		2b		X
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		0.0					
C	describe in Schedule O how this was done				1	2c		X
3	Did the organization have a written whistleblower policy?					13		X
4	Did the organization have a written document retention and destruction policy?					14		X
5	Did the process for determining compensation of the following persons include a review and approval by							
•	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official				1	5a		X
ь					1	5b		X
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)					`\		
6a								į
	with a taxable entity during the year?					6a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its							ĺ
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the							ĺ
	organization's exempt status with respect to such arrangements?				1	6ь		L
Sec	ction C. Disclosure							
7	List the states with which a copy of this Form 990 is required to be filed ▶ IN							
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s	only	/)				
	available for public inspection. Indicate how you made these available. Check all that apply							
	Own website Another's website X Upon request Other (explain in Schedule O)							
9	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest	policy	٧,					
	and financial statements available to the public during the tax year							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	:						
	organization ▶ Patricia Krider 118 Walnut Street				010	- ^ -	, .	
L	awrenceburg IN 4702	<u> </u>			812-	<u>537</u>	<u> </u>	<u>507</u>

Form 990 (2012	Lawrenceburg Main Street, Inc.	<u> 20-0456048</u>	Page
Part VII	Compensation of Officers, Directors, Trustees, Ke	y Employees, Highest Compensated	Employees, and
	Independent Contractors		· ·
	Check if Schedule O contains a response to any ques	stion in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Co	mpensated Employees	

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees, and former such persons

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee (F) Reportable Reportable Estimated Name and Title Average Position (do not check more than one compensation compensation from amount of hours per from related box, unless person is both an week officer and a director/trustee) organizations compensation fist any (W-2/1099-MISC) from the organization hours for Individual to or director nstitutional (W-2/1099-MISC) organization related ghest compensated and related o_i canizations organizations below dotted trustee line) (1) Patricia Krider 40.00 0 0 0.00 X 47,000 Director (2) Thomas Dewees 40.00 0 0 22,800 0.00 X Assistant Director (3) Mike Rauen 1.00 0 0 0.00 X Board Member (4) Steven Reniham 1.00 0 0 0 0.00 X Board member (5) Kyle Luebbe 1.00 0 X 0 0.00 Board Member (6) Jared Ewbank 1.00 0 0 0 0.00 X Board Member (7) Joseph Johns 1.00 0 0 0 0.00 X Board Member (8) Charles Davis 1.00 X 0 0 0 0.00 (9) Cynthia Nelson 1.00 0 0 0 0.00 (10) Sue Clark 1.00 0 0 X 0.00 (11) Mark Graver 1.00 0 0.00 X President Form 990 (2012)

DAA

Form **990** (2012)

Part VII Section A. Officers						yees		nd Highest Compensated				Page 6
(A) . Name and title	(B) Average hours per week (list any hours for	(d bo of	o not o x, unle	Pos check ess pe	C) sition more erson	than o	ne an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estimated amount of other compensation from the	on
	related crganizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(** 2 1666 missy			n S
(12) John Davis Vice President	1.00			x				0	0			0
(13) Tom Brooker	2.00											
Secretary (14) Lee Ann Coates	2.00			X				0	<u> </u>	,		0
Treasurer (15)	0.00			X		-		0	0		-112-1	0
(16)							:					
(17))						,				
(18)] 		ļ 									
(19)												
1b Sub-total c Total from continuation she	ets to Part VII, S	ection	on A	 `	J		>	69,800				
d Total (add lines 1b and 1c) Total number of individuals (in reportable compensation from			to th	nose	liste	ed abo	ove)	69,800 who received more than \$1		1		
3 Did the organization list any fo employee on line 1a? If "Yes,"	complete Sched	ule J	for s	uch	ındıv	vidual	l				3 Y	es No
For any individual listed on line organization and related organization and individual	nizations greater t	han :	\$150	,000,	? If	"Yes,	" cor	mplete Schedule J for such			4	x
5 Did any person listed on line 1 for services rendered to the or Section B. Independent Contractor	ganization? If "Ye	ue co es," c	omp	ensa	tion Schi	trom edule	any J fo	unrelated organization or in-	dividual		5	x
Complete this table for your five compensation from the organical compensation from the o	zation Report co	nsate mper	ed in	depe on fo	nde or the	nt co e cale	ntrac enda	r year ending with or within	n \$100,000 of the organization's tax year (B) otion of services		T (C) ensation
Name and business address							Descrip	otion of services		Comp	ensation	
											-	
2 Total number of independent received more than \$100,000	contractors (inclu of compensation	ding from	but r	not lu orga	mite iniza	d to th	hose	e listed above) who	0			

				a response to	any question in thi	s Part VIII		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
និស	1a	Federated campaigns	1a			10101120		
E Z		Membership dues	1b	7,230				
iffs, G		Fundraising events	1c				1	
		Related organizations	1d					
S,E		Government grants (contributions)	1e	350,000	Į.		Ī	
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants,			<u> </u>		1	
		and similar amounts not included at	oove 1f	52,068	#		1	
	g	Noncash contributions included in li	nes 1a-1f \$				Ī	
	<u>h</u>	Total. Add lines 1a-1f			409,298		····	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
E				Busn. Code	24 262	24 063	†	
Program Service Revenue	2a	Winter Wonderla	nd Income		24,863	24,863		
ا بھ ا	þ							
ٳڲٚ	C						-	
S	d							
grar	e	All other program service	revenue	\				 *
Pro	'	Total. Add lines 2a–2f	revenue	•	24,863			
	3	Investment income (inclu	dına dıvıdends, int	erest.				
		and other similar amounts		•	3,508	3,508		
	4	Income from investment	•	d proceeds 🕨				
	5	Royalties	•	▶ □				
			Real	(II) Personal			·	
	6a	Gross rents			1			
	b	Less rental exps						
	С	Rental inc or (loss)					1	
	_d	Net rental income or (loss	s)	•				······································
	7a	Gross amount from sales of assets (i) Se	ecunties	(a) Other	•			
		other than inventory						
	b	Less cost or other						
		basis & sales exps						
	С	Gain or (loss)			#	ĺ		
	d	Net gain or (loss)						
e e	8a	Gross income from fundraisi	ng events		1			
ent		(not including \$				İ		
Other Revenue		of contributions reported on I			1			
er		See Part IV, line 18	a		1			
og E	l	Less direct expenses	b[1	İ	į	
	C	•		ts P				
	9a	Gross income from gaming a	ı		1			
		See Part IV, line 19	a b		1	1		
	þ		,		†			
	10a	Gross sales of inventory						
	, va	returns and allowances	a a		1			
	Ь	Less cost of goods sold			1			
		Net income or (loss) from		γ ▶				
	广	Miscellaneous R		Busn Code				
	11a	1						
	b							
	C							
	d	All other revenue						
	е	Total. Add lines 11a-11	d	▶				
	12	Total revenue. See inst	tructions	•	437,669	28,371	0	

Statement of Functional Expenses Part IX Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (B) Program service (C) Management and (A) Total expenses (D) Do not include amounts reported on lines 6b, Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 69,800 69,800 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits $9, \overline{122}$ 9,122 Payroll taxes Fees for services (non-employees) Management Legal 8,608 8,608 C Accounting d Lobbying e Professional fundraising services - See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 1,410 1,410 12 Advertising and promotion 1,222 3,420 4,642 13 Office expenses 758 606 152 Information technology 14 15 Royalties 9,639 2,489 7,150 16 Occupancy Travel 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 3,525 3,525 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 2,034 508 2,542 23 Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 377,319 377,319 Program Services 62,553 62,553 Winter Wonderland Expense 369 369 Dues & Subscriptions 244 244 Depreciation e All other expenses 19,838 550,531 530,693 0 Total functional expenses Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶

following SOP 98-2 (ASC 958-720)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year Cash-non-interest bearing 1 497,421 382,914 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 1,350 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 5,322 other basis Complete Part VI of Schedule D 10a 812 568 b Less accumulated depreciation 10b 10c 11 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 498,233 384,832 16 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 2,586 2,047 of Schedule D 2,586 Total liabilities. Add lines 17 through 25 X and Organizations that follow SFAS 117 (ASC 958), check here ▶ **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 176,283 79,203 27 Unrestricted net assets 319,364 303,582 28 28 Temporarily restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 382,785 495,647 Total net assets or fund balances 33 33 384,832 498,233 Total liabilities and net assets/fund balances

orm	990 (2012) Lawrenceburg Main Street, Inc. 20-0456048			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	. • Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		137,	
2	Total expenses (must equal Part IX, column (A), line 25)	2		50,	
3	Revenue less expenses Subtract line 2 from line 1	3		.12,	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	195,	<u>647</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	1			
	33, column (B))	10		382,	<u> 785</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other	_			1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				•
	Schedule O				1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				1
	reviewed on a separate basis, consolidated basis, or both				•
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				1
	separate basis, consolidated basis, or both				1
	X Separate basis Consolidated basis Both consolidated and separate basis				1
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		20		X
	If the organization changed either its oversight process or selection process during the tax year, explain in —————————————————————————————————				J
	Schedule O				1
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a	<u> </u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		ļ	1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3t		
			1	om 99	0 (2012)

SCHEDULE A (Form 990 or 990-6Z)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number Lawrenceburg Main Street, Inc. 20-0456048 Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III-Functionally integrated d Type III–Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? |11g(iii) Provide the following information about the supported organization(s) (iv) Is the organization (v) Did you notify (vi) is the (i) Name of supported (ii) EIN (iii) Type of organization (vii) Amount of monetary organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support col (i) of your (I) organized in the above or IRC section governing document? support? US? (see instructions)) Yes Yes Yes (A) (B) (C) (D) (E)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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 Section B. Total Support (c) 2010 (e) 2012 (f) Total Calendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (d) 2011 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the businessis 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) 12 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) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2011 Schedule A, Part II, line 14 15 33 1/3% support test-2012. 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—2011. 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-2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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 10%-facts-and-circumstances test-2011. 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

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

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instructions

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 or if the organization failed to qualify under Part II.) If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support	· · · · · · · · · · · · · · · · · · ·		•			
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	330,940	636,045	315,221	438,656	409,298	2,130,160
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			13,120	23,089	28,371	64,580
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 through 5	330,940	636,045	328,341	461,745	437,669	2,194,740
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 \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6)	<u> </u>				<u></u>	2,194,740
	tion B. Total Support		(1) 0000	(=) 2040	(4) 2044	(0) 2042	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2008		(c)_2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	330,940	636,045	328,341	461,745	437,669	2,194,740
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,073	14,449	7,928	4,492		32,942
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	6,073	14,449	7,928	4,492		32,942
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)	337,013	CEO 404	336,269	466 027	437,669	2,227,682
14	First five years. If the Form 990 is for the		econd third fourth		466,237		2,227,002
14	organization, check this box and stop here		econa, ama, ioarai	i, or militiax year as	a 3000011 50 1(0)(0	,	▶ □
Sec	ction C. Computation of Public Su		age				
15	Public support percentage for 2012 (line 8,			<u>))</u>		15	98.52%
16	Public support percentage from 2011 Sche			″		16	97.85%
	tion D. Computation of Investme						
17	Investment income percentage for 2012 (lin			olumn (f))		17	1 %
18	Investment income percentage from 2011					18	2 %_
19a	33 1/3% support tests—2012. If the organ			4, and line 15 is mo	re than 33 1/3%, a	nd line	
L	17 is not more than 33 1/3%, check this bo 33 1/3% support tests—2011. If the organ	x and stop here . Th	ie organization qua	lifies as a publicly s	upported organizat	ion	▶ X
b	line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did						<u> </u>

Schedule A (Form 990 or 990-EZ) 2012 Lawrenceburg Main Street, Inc. 20-0456048

Page 4

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990. Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. OMB No 1545-0047 Open to Public

Attach to Form 990. ► See separate instructions. Internal Revenue Service Inspection Name of the organization Employer Identification number Lawrenceburg Main Street, Inc. 20-0456048 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV. line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

<u>Sche</u>	dule D (Form 990) 2012 Lawrenceb					<u> 20-04560</u>		Page 2
Pa	rt III Organizations Maintaining	Collections	of Art, Hist	orical Tre	easures, or	Other Simil	ar Assets	(continued)
3	Using the organization's acquisition, accession collection items (check all that apply)							}
а	Public exhibition	d [Loan or ex	change prog	rams			
b	Scholarly research	e	Other	g- pg				
c	Preservation for future generations	٠ ـ						
4	Provide a description of the organization's colle	ections and explai	n how they fur	ther the ora:	anızatıon's eyen	nnt nurnose in l	Part	
•	XIII	ootiono ana oxpiai	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	and and orgi	armeditorro caci	iipt paipode iii i	u. t	
5	During the year, did the organization solicit or i	receive donations	of art historic	al trascurac	or other similar	•		
•	assets to be sold to raise funds rather than to		•					Yes No
Ps	art IV Escrow and Custodial Arra					ered "Yes" t	2 Form 990	
	line 9, or reported an amoun				zation anov	cica ico c	5 1 Omn 000	,, , a.c.,
12	Is the organization an agent, trustee, custodial				ther accets not	· ·		
ıa	included on Form 990, Part X?	ii oi other iixeime	diary for contin	Dutions of O	iner assets not			Yes No
.	·	nd complete the f	allaumaa tabla					res 140
D	If "Yes," explain the arrangement in Part XIII a	na complete the i	Silowing table					Amount
_	Pagunung belance						1c	
	Beginning balance						1d	
a	Additions during the year							
e	Distributions during the year						1e 1f	
7-	Ending balance	000 D V I	- 040				<u> </u>	Ves DNe
	Did the organization include an amount on For			- h				∐ Yes ∐ No
	if "Yes," explain the arrangement in Part XIII of the street of the stre					000 Part IV	lino 10	
re	Endowment Funds. Compi						ree years back	(e) Four years back
4.	<u> </u>	(a) Current year	(6) F	nor year	(c) Two years t	back (d) II		(e) Four years back
	Beginning of year balance							
	Contributions							
С	Net investment earnings, gains, and							
	losses							
	-Grants or scholarships		- 					
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	_				<u> </u>			
2	Provide the estimated percentage of the curre		ce (line 1g, co	lumn (a)) he	ld as			
а	Board designated or quasi-endowment	%						
	Permanent endowment ► %							
С	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c shoul							
3a	Are there endowment funds not in the posses	sion of the organia	zation that are	held and ad	ministered for the	ne		[₁₂] ₁₁
	organization by							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
þ	If "Yes" to 3a(II), are the related organizations	•						3b
4	Describe in Part XIII the intended uses of the							
Pa	art VI Land, Buildings, and Equi	pment. See F	orm 990, P	art X, line	10.			
	Description of property	(a) Cost or ot		(b) Cost or o	1	(c) Accumulat		(d) Book value
		(investm	ent)	(oth	er)	depreciation	1	
1a	Land							
b	Buildings							
С	: Leasehold improvements							
d	l Equipment				5,322	4	754	568
е	Other		<u> </u>	<u></u>				
Tota	al. Add lines 1a through 1e (Column (d) must ed	qual Form 990, Pa	art X, column (B), line 10(c))		<u> </u>	568

Schedule D (Fo	orm 990) 2012 Lawrenceburg Main	Street, Inc.	20-0456048	Page 3
Part VII	Investments—Other Securities. See Form			
• "	(a) Description of security or category	(b) Book value	(c) Method of v	aluation
	(including name of security)		Cost or end-of-year	market value
(1) Financial d				
	ld equity interests		_	
(3) Other				
(A)				<u>-</u>
(B)		-		
(C)				
(D)				
(E)				
(F)		-		
(G)				
(H)				
(I)	n (b) must equal Form 990, Part X, coi (B) line 12)	•	-	
Part VIII	Investments—Program Related. See For		<u> </u>	
Laif Aiti	(a) Description of investment type	(b) Book value	(c) Method of	/aluation
	(a) Booking of the control of the co	1,7,=== .	Cost or end-of-year	
(1)			·	
(2)		12		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. See Form 990, Part X, line	15		
	(a) Descrip	otion		(b) Book value
(1)				<u> </u>
(2)		<u></u>		
(3)				
(4)				
_(5)				
_(6)				
(7)				
(8)				
(9)				
(10)	(b) and and Francisco Port V and (B) has 15		<u> </u>	
Part X	n (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, I	ine 25		
	(a) Description of liability	(b) Book value		
1. (1) Foderal	Income taxes	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	
	oll Withholdings	2,047	7	
			1	
(3) (4)	······································		1	
(5)	· · · · · · · · · · · · · · · · · · ·		1	
(6)			1	
(7)				
(8)				
(9)]	
(10)]	
(11)				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)	▶ 2,04		
2. FIN 48 (AS	SC 740) Footnote In Part XIII, provide the text of the foot	tnote to the organization's financial	statements that reports the org	anization's
liability for und	certain tax positions under FIN 48 (ASC 740) Check her	e if the text of the footnote has beer	n provided in Part XIII	

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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return				
1	Total revenue, gains, and other support per audited financial statements		1	437,669
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recovenes of prior year grants	2c		
d	Other (Describe in Part XIII)	2d]	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	437,669
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b]	
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	437,669
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return				
1	Total expenses and losses per audited financial statements		1	550,531
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)]	
е	Add lines 2a through 2d		2e_	
3	Subtract line 2e from line 1	1	3	550,531
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			i
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b] !	
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	550,531
Part XIIISupplemental Information				

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

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Part XIII Supplemental Information (continued)

Page 5

SCHEDULE Ò .
(Form 990 of 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

• Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Lawrenceburg Main Street, Inc.

Employer Identification number 20-0456048

Form 990, Part III, Line 4d - All Other Accomplishment

The Winter Wonderland Program offers various events and activities during
the holiday season including ice skating.

Form 990, Part VI, Line 7a - Election of Members and Their Rights Board members are elected at the annual meeting

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
No documents available to the public