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Form 990

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

A For the 2012 calendar year, or tax year beginning 7/1/2012, and ending 6/30/2013																																		
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization LAKE REGION ARTS COUNCIL</td> <td>D Employer identification number 41-1430764</td> </tr> <tr> <td colspan="2">Doing Business As</td> <td>E Telephone number 218-739-5780</td> </tr> <tr> <td colspan="2">Number and street (or P.O. box if mail is not delivered to street address) Room/suite 133 SOUTH MILL STREET</td> <td></td> </tr> <tr> <td colspan="2">City, town or post office, state, and ZIP code FERGUS FALLS MN 56537</td> <td></td> </tr> <tr> <td colspan="2">F Name and address of principal officer</td> <td>G Gross receipts \$ 579,371</td> </tr> <tr> <td colspan="2"></td> <td>H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td colspan="2"></td> <td>H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</td> </tr> <tr> <td colspan="2"></td> <td>If "No," attach a list (see instructions)</td> </tr> <tr> <td colspan="2">I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(c) Group exemption number ▶</td> </tr> <tr> <td colspan="2">J Website: ▶</td> <td></td> </tr> <tr> <td colspan="2">K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation 1982 M State of legal domicile MN</td> </tr> </table>	C Name of organization LAKE REGION ARTS COUNCIL		D Employer identification number 41-1430764	Doing Business As		E Telephone number 218-739-5780	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 133 SOUTH MILL STREET			City, town or post office, state, and ZIP code FERGUS FALLS MN 56537			F Name and address of principal officer		G Gross receipts \$ 579,371			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input type="checkbox"/> No			H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No			If "No," attach a list (see instructions)	I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶	J Website: ▶			K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation 1982 M State of legal domicile MN
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Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities "The mission of Lake Region Arts Council is to encourage and support the vitality of the arts in West Central Minnesota"			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	18	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18	
	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	3	
	6	Total number of volunteers (estimate if necessary)	6		
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9	Program service revenue (Part VIII, line 2g)	492,401	512,254	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	180,000	0	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	106	65	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	40,672	67,052	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	713,179	579,371	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	319,123	329,273	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0	
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	131,202	137,687	
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0	0	0	
Expenses	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	117,286	121,599	
	18	Total expenses—add lines 13–17 (must equal Part IX, column (A), line 25)	567,611	588,559	
	19	Revenue less expenses—subtract line 18 from line 12	145,568	-9,188	
	Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
		21	Total liabilities (Part X, line 26)	351,101	218,501
		22	Net assets or fund balances—subtract line 21 from line 20	147,439	82,118
				203,662	136,383

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	<div style="display: flex; justify-content: space-between;"> <div> Signature of officer </div> <div> 11/6/13 Date </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> Maxine Adams, Exec. Director Type or print name and title </div> </div>				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input checked="" type="checkbox"/> if self-employed	PTIN
	MARSHA WILLIAMS	MWilliams	10/24/2013		P00477183
	Firm's name ▶ BUSINESS SERVICE OF FERGUS FALLS	Firm's EIN ▶ 45-0528352			
	Firm's address ▶ 907 N FRIBERG, FERGUS FALLS, MN 56537	Phone no 218-998-9082			

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

HTA

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Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response to any question in this Part III ☐**1** Briefly describe the organization's mission:

The mission of Lake Region Arts Council is to encourage and support the vitality of the arts in west central MN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

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 \$ 514,781 including grants of \$ 329,273) (Revenue \$ 579,306)
 General Program-Distribute grants to arts organizations, individual artists, schools and others to produce and sponsor arts events. Print newsletter for individuals and organization. Maintain artist registry referral services. Offer support services. Maintain website and provide workshops.

4b (Code) (Expenses \$ 58,927 including grants of \$ 18,050) (Revenue \$)
 McKnight Foundation - Offer Career Development, Fellowship and Artist Small Grants to individual artists. Provide workshops and train artists to do school residencies. Maintain gallery space for artist exhibits.

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses 573,708

Part IV 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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		X
5 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		
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 "Yes," complete Schedule D, Part I		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		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		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		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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		X
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		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		
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		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)		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		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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

	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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
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? <i>If "Yes," complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		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 entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		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)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		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	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

☒

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	16	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	3	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.		
c	Enter the amount of reserves on hand.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI ☒

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	18	
b Enter the number of voting members included in line 1a, above, who are independent.	18	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13.	X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
15 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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed. **MN**

18 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 ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 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.
 Lake Region Arts Council (218) 739-5780
 133 South Mill St, Fergus Falls, MN 56537

Part VII**Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Maxine Adams Executive Director	40 00	X				X		51,082		
(2) Elizabeth Ostenson Grants Manager	40 00				X			31,248		
(3) Connie Payson Executive Assistant	40 00				X			29,849		
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part VII**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										

1b Sub-total	▶	112,179	0	0
c Total from continuation sheets to Part VII, Section A	▶	0	0	0
d Total (add lines 1b and 1c)	▶	112,179	0	0

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 0

3 Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

	Yes	No
3		X
4		X
5		X

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
		0
		0
		0
		0
		0

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 0

Part VIII Statement of RevenueCheck if Schedule O contains a response to any question in this 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
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 0	512,254			
	b Membership dues	1b 0				
	c Fundraising events	1c 0				
	d Related organizations	1d 0				
	e Government grants (contributions)	1e 512,254				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 0				
	g Noncash contributions included in lines 1a-1f	\$ 0				
	h Total. Add lines 1a-1f					
Program Service Revenue	Business Code					
	2a _____		0			
	b _____		0			
	c _____		0			
	d _____		0			
	e _____		0			
	f All other program service revenue		0			
	g Total. Add lines 2a-2f		0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		65			
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		0			
	6a Gross rents	(i) Real (ii) Personal				
	b Less rental expenses					
	c Rental income or (loss)	0 0				
	d Net rental income or (loss)		0			
	7a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis and sales expenses	0 0				
	c Gain or (loss)	0 0				
	d Net gain or (loss)		0			
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a 0				
	b Less direct expenses	b 0				
	c Net income or (loss) from fundraising events		0			
	9a Gross income from gaming activities See Part IV, line 19	a 0				
	b Less direct expenses	b 0				
	c Net income or (loss) from gaming activities		0			
	10a Gross sales of inventory, less returns and allowances	a 0				
	b Less cost of goods sold	b 0				
	c Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue		Business Code				
11a OTHER INCOME		0				
b RETURNED GRANTS		8,961				
c RESTRICTIONS		58,091				
d All other revenue		0				
e Total. Add lines 11a-11d		67,052				
12 Total revenue. See instructions		579,371	0	0	0	

Part IX Statement of Functional Expenses*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 ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	287,263	287,263		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	42,010	42,010		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	112,179	110,903	1,276	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	0			
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9 Other employee benefits	17,094	16,924	170	
10 Payroll taxes	8,414	8,318	96	
11 Fees for services (non-employees)				
a Management	0			
b Legal	0			
c Accounting	7,206	1,536	5,670	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
12 Advertising and promotion	29,664	29,664		
13 Office expenses	4,570	3,740	830	
14 Information technology	0			
15 Royalties	0			
16 Occupancy	44,707	41,174	3,533	
17 Travel	8,115	8,915	-800	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	2,445	1,906	539	
20 Interest	0			
21 Payments to affiliates	0			
22 Depreciation, depletion, and amortization	4,233	3,435	798	0
23 Insurance	1,084	397	687	
24 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)				
a Miscellaneous/Phone	2,431	2,022	409	
b Memberships	1,413	141	1,272	
c Artist Mentor Program	10,368	10,368		
d Parking	721	604	117	
e All other expenses Repairs/Maint/Gallery	4,642	4,388	254	
25 Total functional expenses. Add lines 1 through 24e	588,559	573,708	14,851	0
26 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance SheetCheck if Schedule O contains a response to any question in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	214,900	1	130,468
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	120,000	4	60,000
	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	
	6 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	
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	5,971	9	7,638
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 72,277		
	b Less accumulated depreciation	10b 51,882	10,230	10c 20,395
	11 Investments—publicly traded securities	0	11	0
	12 Investments—other securities See Part IV, line 11	0	12	0
	13 Investments—program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets See Part IV, line 11	0	15	0
16 Total assets. Add lines 1 through 15 (must equal line 34)	351,101	16	218,501	
Liabilities	17 Accounts payable and accrued expenses	4,661	17	7,663
	18 Grants payable	142,778	18	74,455
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	0	25	0
	26 Total liabilities. Add lines 17 through 25	147,439	26	82,118
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	79,223	27	70,035
	28 Temporarily restricted net assets	124,439	28	66,348
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC958), check here <input type="checkbox"/> 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		31	
	32 Retained earnings, endowment, accumulated income, or other funds	203,662	32	136,383
	33 Total net assets or fund balances	203,662	33	136,383
34 Total liabilities and net assets/fund balances	351,101	34	218,501	

Part XI Reconciliation of Net AssetsCheck 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	579,371
2	Total expenses (must equal Part IX, column (A), line 25)	2	588,559
3	Revenue less expenses Subtract line 2 from line 1	3	-9,188
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	203,662
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 33, column (B))	10	194,474

Part XII Financial Statements and ReportingCheck if Schedule O contains a response to any question in this Part XII ☐

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 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?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a	X	
2b	X	
2c	X	
3a	X	
3b	X	

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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**

Name of the organization

LAKE REGION ARTS COUNCIL

Employer identification number

41-1430764

Part I 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)**.
- 4 ☐ 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: _____
- 5 ☐ 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.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ 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.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ 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:
- a ☐ Type I b ☐ Type II c ☐ Type III—Functionally integrated d ☐ Type III—Non-functionally integrated
- e ☐ 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)** or **section 509(a)(2)**.
- f 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: ☐
- g 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?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									0

Part II 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 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
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	176,298	564,610	557,823	713,073	579,306	2,591,110
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	176,298	564,610	557,823	713,073	579,306	2,591,110
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)						
6 Public support. Subtract line 5 from line 4						2,591,110

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	176,298	564,610	557,823	713,073	579,306	2,591,110
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	155	41	66	106	65	433
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
11 Total support. Add lines 7 through 10						2,591,543
12 Gross receipts from related activities, etc. (see instructions)	12					
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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	99.98%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	99.67%
16a 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 ► <input checked="" type="checkbox"/>		
b 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 ► <input type="checkbox"/>		
17a 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 ► <input type="checkbox"/>		
b 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 ► <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

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.)

Section A. Public Support

Calendar 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.")						0
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						0
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	0	0	0	0	0	0
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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						0
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	0	0	0	0	0	0
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0
13 Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0
14 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 ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	0.00%

- 19a** 33 1/3% support tests—2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐
- b** 33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐
- 20** Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐

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)

Area with horizontal dashed lines for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

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.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

LAKE REGION ARTS COUNCIL

Employer identification number

41-1430764

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> 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
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c 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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

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	▶ \$

2 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

a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition d ☐ Loan or exchange programs
 b ☐ Scholarly research e ☐ Other _____
 c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

- c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

	Amount
1c	0
1d	
1e	
1f	0

2a Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☒ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	0	0	0	0	
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	0	0	0	0	0

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ☐ %
 b Permanent endowment ☐ %
 c Temporarily restricted endowment ☐ %

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
 (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	0	0	0
d Equipment	0	72,277	51,882	20,395
e Other	0	0	0	0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) 20,395

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests	0	
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total (Column (b) must equal Form 990, Part X, col (B) line 12)	0	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total (Column (b) must equal Form 990, Part X, col (B) line 13)	0	

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total (Column (b) must equal Form 990, Part X, col (B) line 15)	0

Part X Other Liabilities. See Form 990, Part X, line 25

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Agency Funds	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	0

2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

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	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	0

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	0
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
c	Add lines 4a and 4b		4c	0
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	0

Part XIII Supplemental 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.

Part XIII Supplemental Information *(continued)*

Lined area for supplemental information.

**SCHEDULE I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

Department of the Treasury
Internal Revenue Service

Name of the organization

LAKE REGION ARTS COUNCIL

Employer identification number

41-1430764

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) <u>See Attachment</u>							
(2) _____							
(3) _____							
(4) _____							
(5) _____							
(6) _____							
(7) _____							
(8) _____							
(9) _____							
(10) _____							
(11) _____							
(12) _____							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

0

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

(HTA)

Schedule I (Form 990) (2012)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	See attachment					
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

OMB No 1545-0047

2012

**Open to Public
Inspection**

Employer identification number

LAKE REGION ARTS COUNCIL

41-1430764

Form 990 Part VI Section B Line 12C CONFLICT OF INTEREST POLICY - The LRAC will use the

guidelines established by Minnesota Rule Charter 1900 0419, Subq 5 to guide its actions

Review of the Conflict of Interest Policy will be done by a) Each new reviewer shall be

required to review a copy of this policy and to acknowledge in writing that he or she has done

so b) Each reviewer shall annually complete a disclosure form identifying any relationships

positions or circumstances in which the reviewer is involved that he or she believes could

contribute to a Conflict of Interest arising Such relationships, position or circumstances

might include service as a Director of or Consultant to a Non-Profit organization Any such

information regarding of a reviewer or a reviewer's family member shall be treated as

confidential and shall generally be made available only to the Chair, Executive Director and

any Committee appointed to address Conflict of Interest except to the extent additional

disclosure is necessary in connection with the implementation of this policy c) This policy

shall be reviewed annually by each member of the Board of Directors Any changes to the policy

shall be communicated immediately to all reviewers

Form 990 Part VI Section B Line 15A and 15B 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 of a) The organization's CEO,

Executive Director or top management official? b) Other officers or key employees of the

organization? From LRAC Policy Manual EMPLOYEE EVALUATION All employees of the LRAC will be

evaluated at least annually The Executive Committee will perform the evaluation of the

Executive Director and the Executive Director will complete evaluations of other LRAC staff

The Executive Director is responsible to the LRAC chair on a daily basis This process

includes evaluation of the Executive Director by the Directors of Minnesota State Arts Board,

Minnesota Citizens for the Arts and the Chair of the Forum Regional Arts Council and the

executive Committee of the Lake Region Arts Council Other staff are evaluated by the

Executive Director and the employee themselves All staff compensation decisions take into

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

HTA

Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization

Employer identification number

LAKE REGION ARTS COUNCIL

41-1430764

consideration the state wide rate of compensation for similar positions The LRAC Board's

annual decision about staff compensation is documented in the meeting minutes

Form 990 Part V Line 3B Did the organization have unrelated business gross income of

\$1,000 or more during the year covered by this return? If NO, provide an explanation in

Schedule O EXPLANATION The Lake Region Arts Council's income is only from appropriations from

the MN State Legislature, the McKnight Foundation and the Legacy Funding We do not engage in

any activities that generate unrelated business income

Form 990 Part VI Section B Line 11 Has the organization provided a copy of the Form 990 to all

members of its governing body before filing the return? The 990 Income Tax Return is reviewed

by the Board Members at our Board Meeting

Form 990 Part VI Section C Line 19 The governing documents, conflict of interest policy and

financial statements are available at the Lake Region Arts Council UPON REQUEST

1a. Organization Name	1b. EIN Number	1d. Remitted portion	1d.\$ Total of grant award	1h. Purpose of the grant assistance
The Ashby Public School Distirect 261 300 Birch Ave PO Box 30 Ashby, MN 56309	416001359	\$1740	\$1740	to fund an artist residency by Douglas Wood featuring storytelling, music & readings from his books
The Browns Valley School District 118 Church Street PO Box N Browns Valley, MN 56219	416004384	\$2270	\$2270	to present "Cinderella", as a one week artist residency with PFCT
The Central Lakes Symphony Orchestra 1210 Broadway, Suite 240 PO Box 105 Alexandria, MN 56308	270662723	\$955	\$955	to present "Symphony at an Exhibition", a collaborative project with the Brush and Palette Club.
The Central Square 105 2nd Ave NE Glenwood, MN 56334	411795911	\$1700	-	to fund a membership campaign and marketing for Stage Floor Café
The Central Square 105 2nd Ave NE Glenwood, MN 56334	411985911	\$2700	-	to present National Players, "Romeo and Juliet", and two theatre workshops
The Central Square, INC. 105 2nd Ave NE Glenwood, MN 56334	411795911	\$3500	\$7900	to present a "ceildh" a social gathering featuring the music and dances of Scotland performed by Northern Gael.
The City of Ashby 203 West Main PO Box 320 Ashby, MN 56309	416004942	\$10000	\$10000	to provide 4 concerts and movies at the August Farmers' markets, to sponsor photography classes and "Picutre Ashby" photo exhibition.
The City of Battle Lake 108 E Main Street PO Box 386 Battle Lake, MN 56515	416004961	\$10000	\$10000	to create public art with "street furniture" for the downtown.
The Minnesota State University Moorhead College for Kids 1104 7th Ave S Moorhead, MN 56563	411687554	\$7550	\$7550	to fund 45 full scholarships for students and new art classes

1a. Organization Name	1b EIN Number	1d. Remitted portion	1d. Total of grant award	1h. Purpose of the grant assistance
-----------------------	------------------	----------------------------	-----------------------------------	--

The Concordia Percussion Ensemble Department of Music Concordia College Moorhead, MN 56562	900022714	\$2090	\$2090	to fund a 1 day artist residency featuring 3 world class percussion artists
The DEBWE Youth Organization 1038 Campbell Ave Detroit Lakes, MN 56501	270664455	\$25590	\$25590	to educate area youth and their families about the cultural art of a pow wow with regalia, dance, drumming in preparation for the DL Pow Wow.
The Detroit Lakes Community and Cultural Center 806 Summit Ave Detroit Lakes, MN 56501	411970351	\$9400	-	to support artist outreach activities during 2013- 14 season
The Detroit Lakes Community and Cultural Center 806 Summit Ave Detroit Lakes, MN 56501	411970351	\$16736	\$26136	to renovate the entrance with art and add classrooms.
The Fargo Moorhead Area Youth Symphonies 808 3rd Ave S Suite 302 Fargo, ND 58103	450355021	\$1700	\$1700	to fund basic operating support for the 2013/14 season
The Fargo Moorhead Ballet 524 7th St N Fargo, ND 58102	911768520	\$1080	-	to fund operating support for the 2013/2014 season and outreach
The Fargo Moorhead Ballet 524 7th St N Fargo, MN 58102	911768520	\$3000	\$4080	to fund the production of the ballet "A Midsummer Night's Dream".
The Fargo Moorhead Chamber Chorale Po Box 968 Moorhead, MN 56561	363305039	\$2080	\$2080	to fund operating support for marketing, music purchases, and general expenses
The Fargo Moorhead Opera Company 114 Broadway Suite S1 Fargo, ND 58102	450307449	\$3000	-	to present Rossini's opera, "The Barber of Seville"
The Fargo Moorhead Opera Company 114 Broadway Suite S1	450307449	\$2000	\$5000	to fund a portion of the artistic fees for the performance of "The Marriage of Figaro"

1a. Organization Name	1b. EEN Number	1d. Remitted portion	1d. Total of grant award	1h. Purpose of the grant assistance
Fargo, ND 58102				
The Fergus Falls Center for the Arts 124 W Lincoln Ave Fergus Falls, MN 56537	411416048	\$2000	-	to provide a curb cut at the street for patrons, and to provide training and practice for staff on its Audio Description equipment, which will mean several shows during the coming season will be audio described for people with vision loss.
The Fergus Falls Center for the Arts, INC 124 W Lincoln Ave Fergus Falls, MN 56537	411416048	\$21820	\$23820	to sponsor 7 performances with residency during the coming season.
The Fergus Falls Public School 601 E Randolph Ave Fergus Falls, MN 56537	416002912	\$9990	\$9990	to present the Copper Street Brass Quintet 3 days artist residency for the Fergus Falls Band program with public performances.
The Friends of the History Museum of East Otter Tail County 230 First Ave N Perham, MN 56573	414875118	\$960	\$960	to present a concert "Julie Johnson and the No-Accounts" featuring Upper Midwest folk traditions
The Gooseberry Park Players PO Box 362 Moorhead, MN 56560	450388094	\$1200	\$1200	to fund a graphic designer to create a new professional logo for the company
The Henning Landmark Center 415 Douglas Ave PO Box 341 Henning, MN 56551	270244380	\$1752	\$1752	to present an artist residency with portrait artist Janelle Sundberg
The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561	416038553	\$2000	-	to exhibit the Heritage Edition of the St John's Bible & 25 prints
The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561	416038553	\$3000	-	to design and install "Daughters of the Prairie, the lives and work of Annie Stein and Orabel Thortvedt."
The Historical & Cultural Society of Clay County	416038553	\$7630	-	to present the first ever "German Culture Day" in the region

1a. Organization Name	1b. EIN Number	1d. Remitted portion	1d. Total of grant award	1h. Purpose of the grant assistance
202 1st Ave N PO Box 157 Moorhead, MN 56561				
The Historical and Cultural Society of Clay County 202 First Ave N PO Box 157 Moorhead, MN 56561	416038553	\$1900	\$14530	to improve accessibility and increase attendance by visitors with disabilities with staff and volunteers training. To provide oral guided tours with MP3 player and provide written guided with I pad.
The Kaddatz Galleries 111 W Lincoln Ave Fergus Falls, MN 56537	262693338	\$3350	\$3350	to install automatic door operators on its front doors to allow better access to its facilities.
The Lake Agassiz Concert Band PO Box 211 Fargo, ND 58107	363630216	\$700	\$700	to fund operating support for the 2013/2014 season
The Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308	411791642	\$2020	-	to present a performance of Benjamin Britten compositions in honor of his 100th birthday
Th Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308	411791642	\$1800	\$3820	to fund the administrative support for the artistic director's salary
The Minnesota State Community and Technical College-Fergus Falls 1414 College Way Fergus Falls, MN 56537	41746999	\$17500	\$17500	to participate in the Sketchbook Project Central Tour as artists and exhibit.
The Moorhead High School 2300 4th Ave S Moorhead, MN 56560	416008721	\$4394	\$4394	to host an artist residency featuring the Copper Street Brass Quintet
Regents of the University of Minnesota on behalf of the Morris Campus Music Discipline 600 E 4th St Morris, MN 56267	416007513	\$2100	\$2100	to fund an artist residency featuring Bill Pierce, saxophonist, for workshops and performances
The New York Mills Art Retreat 24 Main Ave N PO Box 246	411690163	\$4250	\$4250	to create a brand new drama based on "The Kalevala", Finnish epic poem with area students

1a. Organization Name	1b. EIN Number	1d. Remitted portion	1d. Total of grant award	1h. Purpose of the grant assistance
New York Mills, MN 56567				and adults
The Nordic Culture Clubs 202 1st Ave N Moorhead, MN 56560	450406884	\$6000	\$6000	to present new entertainment, Dance troupe from Iowa & singers from Norway
The Osakis Public School 501 Central Ave PO Box X Osakis, MN 56360	416000892	\$2940	\$2940	to sponsor an Artist Residency, "The Blue Sky Project", with artist Claire Witt.
The Park District of the City of Fargo 701 Main Ave Fargo, ND 58103	456002070	\$2750	-	to provide free musical performances by professional musicians in a park setting.
The Park District of the City of Fargo 701 Main Ave Fargo, ND 58103	456002070	\$2000	\$4750	to fund the musical performances and art demonstrations at the German Folk Festival
The Pope County Historical Society 809 S Lakeshore Dr Glenwood, MN 56334	410714418	\$1500	\$1500	to host a workshop and recital by Lucille Reilly, dulcimer artist.
The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267	411983425	\$3000	-	to host the musical group "Viva Mexico!" for an outdoor street dance
The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267	411983425	\$4660		to offer summer afternoon art workshops for people of all ages, Art in the Gardens
The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267	411983425	\$4100	\$14760	to fund administrative support with a part time manager to oversee daily operations.
The Prairie Wind Players PO Box 246 Barrett, MN 56331	411482170	\$1740	-	to fund part time staff and expenses for increased marketing
The Prairie Wind Players PO Box 246	411482170	\$18000	\$19740	to install a new roof on the historic theatre building

1a. Organization Name	1b. EIN Number	1d. Remitted portion	1d. Total of grant award	1h. Purpose of the grant assistance
Barrett, MN 56311				
The Red Willow Arts Coalition 623 Kenwood St Alexandria, MN 56308	300580732	\$1400	\$1400	to fund operating support to cover the cost of their 2013 season
The Rourke Art Gallery Museum 521 Main Av Moorhead, MN 56560	411748273	\$14867	\$14867	to add a permanent Minnesota area artists collection, focusing on "Midwestern art"
The School District 548 1 Viking Dr Pelican Rapids, MN 56572	416002903	\$5218	\$5218	to design, paint and install a four panel mural in Pelican Rapids
The Spirit Room 111 Broadway Fargo, ND 58102	30522500	\$1438	\$1438	to fund a retrospective anthology featuring art & poetry from 5 previous "Great Winter Crow Show"
The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334	411372219	\$5160	-	to acquire a permanent juried art collection on the one room school house theme to display in the school house.
The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334	411372219	\$2500	\$7660	to fund operating expenses including utilities and insurance expenses
The Theatre L'Homme Dieu 1875 County Rd 120 NE PO Box 1086 Alexandria, MN 56308	410858863	\$8840	\$8840	to support the purchases of lighting cables, sound equipment and necessary repairs to the genie lift.
The Three Rivers Arts Council 304 S. 5th St Wahpeton, ND 58075	331103670	\$1705	\$1705	to present the off air "Dakota Air" radio program
The Ulen Hitterdal School 27 2nd St NW PO Box 389 Ulen, MN 56585	410953951	\$1230	\$1230	to fund an artist residency with Sean Scott, ceramic artist, demonstrations, classes & artist talk.
Total Awarded			\$287,505	

Individual Artist Grant Program	First Name File Number	Amount Funded
Anderson Artist Small Grant	Tracy FY13 ASG05 R2	\$500
Bremer Artist Small Grant	Siobhan FY13 ASG06 R2	\$500
Burnett Artist Small Grant	Cheri FY13 ASGW01	\$500
Conard Artist Small Grant	Mildred FY13 ASG03	\$500
Frederickson McKnight Fellowship	Yahya FY13 04.13 F04	\$5000
Hagel Artist Small Grant	Megan FY13 ASG08 R2	\$500
Hanson Career Development	Dean FY13 11.12 CD06	\$1200
Larson Career Development	Kim FY13 11.12 CD03	\$810
Legatt Legacy Arts & Cultural Heritage	Suzanne FY13 06.13 LI04	\$11430
Marchand Career Development	Annette FY13 11.12 CD13	\$1190
McNelis Career Development	Norma FY13 11.12 CD04	\$1200
Messenger Legacy Arts & Cultural Heritage	David FY13 02.13 LI03	\$6000
Pettit Career Development	Michael FY13 11.12 CD08	\$500
Ray Artist Small Grant	Christopher FY13 ASG04	\$500
Santwire Career Development	Eric FY13 11.12 CD15	\$1200
Schultek Artist Small Grant	Taylor FY13 ASG09 R2	\$500
Schwalboski Artist Small Grant	Ann FY13 ASG07 R2	\$500
Stavig Artist Small Grant	Brian FY13 ASGW02	\$50
Sweder Artist Small Grant	Elizabeth FY13 ASG02	\$500
Tweeter Career Development	Jeffrey FY13 11.12 CD01	\$1200
Wegscheid Legacy Arts & Cultural Heritage	Brad FY13 06.13 LI02	\$6530
Williams Career Development	Kenyon FY13 11.12 CD07	\$1200
Total		\$42,010

BECKER COUNTY

Donald S. Clark
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clarkdo@mnstate.edu

(07/12) 7/12 - 6/15, 1st Term
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Open

CLAY COUNTY

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DOUGLAS COUNTY

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ASSET DEPRECIATION SHORT REPORT
LAKE REGION ARTS COUNCIL Jun. 30, 2013

Sorted ASSET A/C#
Method: 1-FEDERAL-Std Conv Applied

Range: 01-150 - 03-1520
Include All assets

Date Acq	Description	Meth/Life	Cost	Section 179	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 01-150 - PROPERTY AND EQUIPMENT								
04/27/98	PICTURE MOLDINGS	SLP/10 00	147.58	0 00	147.58	147.58	0 00	147.58
06/01/99	BOXED LIGHTING	SLP/10 00	1,078.95	0 00	1,078.95	1,078.95	0.00	1,078.95
06/01/99	CHANDELIER	SLP/10 00	696.00	0 00	696.00	696.00	0.00	696.00
06/08/99	10 CONFERENCE TABLES	SLP/10 00	1,690.00	0 00	1,690.00	1,690.00	0 00	1,690.00
06/08/99	2 OFFICE CHAIRS	SLP/10 00	560.00	0 00	560.00	560.00	0.00	560.00
06/08/99	2 GUEST CHAIRS	SLP/10 00	696.00	0.00	696.00	696.00	0.00	696.00
06/08/99	1 LAMANENT CUBE TABLE	SLP/10.00	320.00	0 00	320.00	320.00	0 00	320.00
06/08/99	EXECUTIVE DIRECTOR'S DESK UNIT	SLP/10 00	3,036.95	0 00	3,036.95	3,036.95	0 00	3,036.95
06/08/99	BOOKKEEPERS DESK UNIT	SLP/10 00	3,497.35	0 00	3,497.35	3,497.35	0.00	3,497.35
06/11/99	2 PAIR DRAPERIES	SLP/10 00	1,080.00	0.00	1,080.00	1,080.00	0.00	1,080.00
06/11/99	12 MINIBLINDS	SLP/10 00	918.00	0.00	918.00	918.00	0.00	918.00
07/09/99	20 SIT ON IT MODEL 1 0 CHAIRS	SLP/10 00	4,030.00	0 00	4,030.00	4,030.00	0 00	4,030.00
08/30/99	BROTHER ML100 TYPEWRITER	SLP/ 5 00	95.00	0 00	95.00	95.00	0 00	95.00
07/13/00	PIII650 COMPUTER	SLP/ 5 00	1,540.00	0.00	1,540.00	1,540.00	0 00	1,540.00
07/13/00	PIII650 COMPUTER W/WRITER & MODEM	SLP/ 5.00	1,944.00	0.00	1,944.00	1,944.00	0.00	1,944.00
07/13/00	SOFTWARE	SLP/ 5.00	915.00	0.00	915.00	915.00	0.00	915.00
06/27/03	PANASONIC DP-3010 COPIER	SLP/ 5.00	5,284.00	0.00	5,284.00	5,284.00	0.00	5,284.00
06/18/04	2 512MB COMPUTERS	SLP/ 3.00	1,436.50	0.00	1,436.50	1,436.50	0.00	1,436.50
08/19/08	COMPUTER	SLP/ 3 00	795.00	0 00	795.00	795.00	0 00	795.00
04/27/09	PANASONIC DP-3530 COPIER	SLP/ 5 00	3,990.00	0.00	3,990.00	2,593.50	798.00	3,391.50
Grand totals 01-150 - PROPERTY AND EQUIPMENT (20 assets)			33,750.33	0 00	33,750.33	32,353.83	798.00	33,151.83
ASSET A/C#: 02-150 - OFFICE EQUIPMENT-MCKNIGHT								
06/01/99	TRACK LIGHTING	SLP/10 00	1,243.49	0 00	1,243.49	1,243.49	0 00	1,243.49
07/08/99	GALLERY EASELS	SLP/10 00	217.43	0.00	217.43	217.43	0.00	217.43
07/13/99	GALLERY STANDS	SLP/10.00	929.13	0 00	929.13	929.13	0 00	929.13
07/27/99	GALLERY TRACK LIGHTING	SLP/10.00	186.05	0.00	186.05	186.05	0.00	186.05
03/19/01	AUDIO EQUIPMENT	SLP/ 5.00	1,236.40	0.00	1,236.40	1,236.40	0.00	1,236.40
03/28/01	HITACHI 36" TV W/STANDS	SLP/ 5 00	2,388.85	0.00	2,388.85	2,388.85	0 00	2,388.85
09/26/07	FILM SCANNER	SLP/ 5 00	540.99	0.00	540.99	540.99	0 00	540.99
01/06/10	GROUP TABLE	SLP/10.00	1,614.00	0.00	1,614.00	403.50	161.40	564.90
06/12/13 A	AWNING	SLP/10 00	3,950.00	0 00	3,950.00	0 00	32.92	32.92
Grand totals 02-150 - OFFICE EQUIPMENT-MCKNIGHT (9 assets)			12,306.34	0 00	12,306.34	7,145.84	194.32	7,340.16
ASSET A/C#: 03-1520 - EQUIPMENT -LEGACY								
12/02/09	PHONE SYSTEM	SLP/ 5.00	4,555.35	0 00	4,555.35	2,353.60	911.07	3,264.67
12/22/09	COMPUTERS	SLP/ 5 00	11,216.00	0 00	11,216.00	5,794.93	2,243.20	8,038.13
06/12/13 A	NEON SIGN	SLP/10 00	7,700.00	0 00	7,700.00	0 00	64.17	64.17
06/24/13 A	WINDOW TREATMENTS	SLP/10 00	2,748.60	0 00	2,748.60	0 00	22.91	22.91
Grand totals 03-1520 - EQUIPMENT -LEGACY (4 assets)			26,219.95	0 00	26,219.95	8,148.53	3,241.35	11,389.88
Grand totals for all accounts: (33 assets)			72,276.62	0 00	72,276.62	47,648.20	4,233.67	51,881.87

Codes that may appear next to the date acquired include: A - Addition, D - Disposal, T - Traded, MQ - Mid Quarter Applied

Additional Summary Statistics:	Cost	Curr Yr 179	Prior Yr 179	Depr Basis	Beg A/Depr	Curr Depr	Ending A/Depr	Net Book Val
Grand Totals for All Assets	72,276.62	0.00	0.00	72,276.62	47,648.20	4,233.67	51,881.87	20,394.75
Less Inactive Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Disposed Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Traded Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Net Totals (Active Assets)	72,276.62	0.00	0.00	72,276.62	47,648.20	4,233.67	51,881.87	20,394.75
Total Bonus Depreciation Taken at 30% Rate:			0.00					
Total Bonus Depreciation Taken at 50% Rate:			0.00					
Total Bonus Depreciation Taken at 100% Rate:			0.00					
Total Bonus Depreciation Taken:			0.00					