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Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545-1150

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning January 01, 2013, and ending December 31, 20 13

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
LEPOCO

D Employer identification number
23-2236211

Number and street (or P O box, if mail is not delivered to street address) Room/suite
313 West 4th Street

E Telephone number
610-691-8730

City or town, state or province, country, and ZIP or foreign postal code
Bethlehem, PA 18015-1975

F Group Exemption Number ▶

G Accounting Method Cash Accrual Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ www.lepoco.org

J Tax-exempt status (check only one) – 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

K Form of organization Corporation Trust Association Other

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 47671.31

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Revenue	1																9268	76											
	2																												
	3																39159	07											
	4																7	99											
	5a																												
	b																												
	c																												
	6																												
	a																												
	b																												
c																													
d																													
7a																2904	11												
b																-1835	73												
c																1068	38												
8																2	84												
9																49507	04												
Expenses	10																												
	11																												
	12																-37152	70											
	13																												
	14																-6335	33											
	15																-6058	44											
	16																-5049	14											
17																-54595	61												
Net Assets	18																-5088	57											
	19																11252	16											
	20																2676	61											
	21																8840	20											

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Part V. Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		✓
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		✓
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a		
b	Did the organization file Form 1120-POL for this year?		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations. Enter.		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		✓
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		✓
41	List the states with which a copy of this return is filed ▶ _____		
42a	The organization's books are in care of ▶ LEPOCO Telephone no ▶ 610-691-8730 Located at ▶ 313 West 4th Street, Bethlehem, PA ZIP + 4 ▶ 18015-1975		
b	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)? If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			✓
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country ▶ _____		✓
42c			✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		<input type="checkbox"/>
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
c	Did the organization receive any payments for indoor tanning services during the year?		✓
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		✓
44d			✓
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
45b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		✓

	Yes	No
46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	<input checked="" type="checkbox"/>

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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	47	<input checked="" type="checkbox"/>
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	<input checked="" type="checkbox"/>
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	<input checked="" type="checkbox"/>
b If "Yes," was the related organization a section 527 organization?	49b	<input checked="" type="checkbox"/>

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶ _____

52 Did the organization complete Schedule A? **Note** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ▶ Yes No

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	Signature of officer	Date 3-2-13
	Type or print name and title Julius Iwantsch co-treasurer	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶		Phone no	
	Firm's address ▶				

May the IRS discuss this return with the preparer shown above? See instructions ▶ Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2013

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

LEPOCO

Employer identification number

23-2236211

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?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		
 - (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?
- h Provide the following information about the supported organization(s).

(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									

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					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 2013 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2013. 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 type="checkbox"/>		
b 33 1/3% support test—2012. 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—2013. 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—2012. 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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	52363 59	35136 15	39022 94	33867 69	33461 13	193851 50
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	2706.62	8742.08	7369 46	9295 54	7911 34	36025.04
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	55070 21	43878.23	46392.40	43163 23	41372 47	229876.54
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	-	-	-	-	-	-
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6)						229876 54

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	55070 21	43878 23	46392.40	43163.23	41372 47	229876 54
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	171 21	75 42	12 01	2 86	22 45	283 95
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	-	-	-	-	-	-
c Add lines 10a and 10b	171 21	75 42	12.01	2 86	22.45	283 95
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)	55241 42	43953.65	46404 41	43166 09	41394.92	230160 49

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**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	99 00 %
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	99 86 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	0 12 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	0 14 %

19a 33 1/3% support tests—2013. 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—2012. 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

Year to Date Summary Report - Last year

1/1/2013 through 12/31/2013

2/17/2014

Page 1

Category	1/1/2013- 12/31/2013
INCOME	
Dividend Income	2 94
Fundraising Events	
Annual Dinner	
Annual Dinner Admissions	5,004 39
Ads Placed in Program	250 00
TOTAL Annual Dinner	5,254 39
Art Raffle Income	680 00
Bike/Walk-a-Thon	1,993 14
Misc Fundraisers	583 60
Yard Sale	757 63
TOTAL Fundraising Events	9,268 76
Gift Received	
Call & Note	162 30
Dues and Donations	12,139 54
Fund Appeal Donations	17,036 59
Membership Gifts to Others	140 00
Pledges Received	9,982 94
TOTAL Gift Received	39,461 37
Interest Income	5 05
Other Income	21 31
Program and Event Net Inc	
Chorus Concert	-1 32
Miscellaneous Programs	-15 00
Potluck & Politics	19 16
TOTAL Program and Event Net Inc	2 84
Sales	
Boutique Sales	1,621 99
Serrv Craft -Non Taxable	870 12
Serrv Craft Sales-Taxable	412 00
TOTAL Sales	2,904 11
Dividend	33 59
Investment Interest Inc	1 18
Realized Gain/Loss	-165 58
TOTAL INCOME	51,535.57
EXPENSES	
Annual Dinner Food	675 63
Oth Annual Dinner Expens	982 13
Advertising	65 00
Art Raffle Costs	45 44
Bike-Walkathon Expenses	134 72
Boutique Costs	874 74
Chorus Expenses	1 32
Computer Access & Domain Fees	431.82
Fund Appeal Expenses	705.87
Insurance (not health)	
Fire Insurance	185 00
Liability Insurance	822 00

Year to Date Summary Report - Last year

1/1/2013 through 12/31/2013

2/17/2014

Page 2

Category	1/1/2013- 12/31/2013
Workers Comp. Insurance	279 00
TOTAL Insurance (not health)	1,286 00
Late Payment Fees	25 98
LEPOCO Mailings	
Miscellaneous Mailing Exp	436 46
Newsletter Mailings	2,834 44
TOTAL LEPOCO Mailings	3,270 90
Misc Prog & Event Expenses	17 82
OfficeExpense(non supply)	308 79
Office Repair & Maint	6 88
QuickPayroll	31,466 01
Programs	
Hiroshima Nagasaki Days	66 33
Misc Fairs & Festivals	55 00
Martin Luther King Program	21 44
Potluck & Politics Prog	36.91
Pride Festival, Allentown	25 00
Tax Day Expenses	93 00
TOTAL Programs	297 68
Rent Paid	4,500 00
Repairs	
Copier Repairs	957 18
Other Equipment Repairs	90 00
TOTAL Repairs	1,047 18
Servv Costs	960 99
Office Supplies	
Litature Supplies	29 40
Office Supplies	234 80
Paper Supplies	1,001 31
Printer Supplies	360 72
Printing Supplies	98 00
TOTAL Office Supplies	1,724 23
Telephone Expense	1,216 32
Electric	612 13
Working Group Expenses	
Amer Solidarity Group	14 30
Anti-Death Penalty Group	5 19
TOTAL Working Group Expenses	19 49
Yard Sale Costs	51 45
TOTAL EXPENSES	50,728.52
OVERALL TOTAL	807.05

Year to Date Summary Report - Last year

1/1/2013 through 12/31/2013

2/17/2014

Page 1

Category	1/1/2013- 12/31/2013
INCOME	
Dividend Income	2 94
Fundraising Events	
Annual Dinner	
Annual Dinner Admissions	5,004 39
Ads Placed in Program	250 00
TOTAL Annual Dinner	5,254 39
Art Raffle Income	680 00
Bike/Walk-a-Thon	1,993 14
Misc Fundraisers	583 60
Yard Sale	757 63
TOTAL Fundraising Events	9,268 76
Gift Received	
Call & Note	162 30
Dues and Donations	12,139 54
Fund Appeal Donations	17,036 59
Membership Gifts to Others	140 00
Pledges Received	9,982 94
TOTAL Gift Received	39,461 37
Interest Income	5 05
Other Income	21 31
Program and Event Net Inc	
Chorus Concert	-1 32
Miscellaneous Programs	-15 00
Potluck & Politics	19 16
TOTAL Program and Event Net Inc	2 84
Sales	
Boutique Sales	1,621 99
Serrv Craft -Non Taxable	870 12
Serrv Craft Sales-Taxable	412 00
TOTAL Sales	2,904 11
Dividend	33 59
Investment Interest Inc	1 18
Realized Gain/Loss	-165 58
TOTAL INCOME	51,535.57
EXPENSES	
Annual Dinner Food	675 63
Oth Annual Dinner Expens	982 13
Advertising	65 00
Art Raffle Costs	45 44
Bike-Walkathon Expenses	134 72
Boutique Costs	874 74
Chorus Expenses	1 32
Computer Access & Domain Fees	431 82
Fund Appeal Expenses	705 87
Insurance (not health)	
Fire Insurance	185.00
Liability Insurance	822.00

Transaction Report - Last year

1/1/2013 through 12/31/2013

1/11/2014

Date	Account	Num	Description	Memo	Category	Tag
12/26/2013	!st Commonw...	DEP	S Pay Pal	Fall 2013	Gift Received	
1/1/2013 - 12/31/2013						

T...

T...

N...

Account Balances Report - As of 12/31/2013

(Includes unrealized gains)

As of 12/31/2013

2/24/2014.

Page 1

Account	12/31/2013 Balance
ASSETS	
Cash and Bank Accounts	
1st Commonwealth Savings	8,125 46
1st Commonwealth Checking	307.73
WTR Life Fund Account	1,080 28
CASH	125 00
TOTAL Cash and Bank Accounts	9,638.47
Investments	
Dominic Funds	4,000 51
TOTAL Investments	4,000.51
TOTAL ASSETS	13,638.98
LIABILITIES	
Other Liabilities	
Barbara&Tom Lloyd Memorial Fund	1,446 81
Special Acct for JS Memorial	378 14
LV WTR Life Fund	537 29
Monies simply passing through LEPOCO	0 00
Payroll Liabilities	1,080 53
Peace Camp Account	980 75
Bike/Walk-a-Thon Gift	0 00
Sales Tax Owed	229 65
Y & M/AJ Muste Grant	145 61
TOTAL Other Liabilities	4,798.78
TOTAL LIABILITIES	4,798.78
OVERALL TOTAL	8,840.20