



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Open to Public
Inspection

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

- Do not enter Social Security numbers on this form as it may be made public.
Information about Form 990 and its instructions is at www.irs.gov/form990.

| | |
|---|--|
| A For the 2013 calendar year, or tax year beginning 7/1/2013, and ending 6/30/2014 | |
| 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 | C Name of organization LAKE REGION ARTS COUNCIL Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 133 SOUTH MILL STREET City or town State ZIP code FERGUS FALLS MN 56537 Foreign country name Foreign province/state/county Foreign postal code D Employer identification number 41-1430764 E Telephone number 218-739-5780 G Gross receipts \$ 628,145 F Name and address of principal officer H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) H(c) Group exemption number 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 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 |

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 2013 (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 |
| 7b | 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) | 512,254 | 563,764 |
| | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 0 | 0 |
| | 11 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 65 | 27 |
| | 12 | Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 67,052 | 64,354 |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1–3) | 579,371 | 628,145 |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | 329,273 | 330,250 |
| Expenses | 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) | 137,687 | 136,647 |
| | 16b | Total fundraising expenses (Part IX, column (D), line 25) | 0 | 0 |
| | 17 | Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) | 0 | 0 |
| | 18 | Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) | 121,599 | 145,232 |
| | 19 | Revenue less expenses Subtract line 18 from line 12 | 588,559 | 612,129 |
| | 20 | Total assets (Part X, line 16) | -9,188 | 16,016 |
| Net Assets or Fund Balances | 21 | Total liabilities (Part X, line 26) | Beginning of Current Year | End of Year |
| | 22 | Net assets or fund balances Subtract line 21 from line 20 | 218,501 | 185,510 |
| | | | 82,118 | 95,635 |

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 | Signature of officer | Date | | | |
| | Maxine Adams | 11/10/14 | | | |
| Paid Preparer Use Only | Type or print name and title | Preparer's signature | Date | Check <input checked="" type="checkbox"/> if self-employed | PTIN |
| | MARSHA WILLIAMS | MARSHA WILLIAMS | 11/6/2014 | | P00477183 |
| | Firm's name | Firm's EIN | Phone no | | |
| | BUSINESS SERVICE OF FERGUS FALLS | 45-0528352 | 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 (2013)

HTA

p9

Part III**Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line 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 \$ 535,478 including grants of \$ 330,250) (Revenue \$ 628,118)

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 \$ 62,273 including grants of \$) (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 ▶ 597,751

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 | | X |
| 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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 or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 X | |
| 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 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? If "Yes," complete Schedule J | 23 | X |
| 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | |
| 25a 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? If "Yes," complete Schedule L, Part I | 25a | X |
| b 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? If "Yes," complete Schedule L, Part I | 25b | X |
| 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II | 26 | X |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | X |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | 28a | X |
| a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | X |
| b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28c | 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? If "Yes," complete Schedule L, Part IV | 29 | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 30 | X |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | 31 | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 32 | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | 33 | 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? If "Yes," complete Schedule R, Part I | 34 | X |
| 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 35a | |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35b | |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 36 | X |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 37 | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 38 | 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 | | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V.

☒

| | | Yes | No |
|------------|--|-----|----|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | 18 | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | 1b | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | 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. | 2a | 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) | 2b | X |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | X |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | 3b | |
| 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)? | 4a | X |
| b | If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR) | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | X |
| c | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | |
| 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? | 6a | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | |
| 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? | 7a | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7d | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 7h | |
| 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? | 8 | X |
| 9 | Sponsoring organizations maintaining donor advised funds. | | |
| a | Did the organization make any taxable distributions under section 4966? | 9a | X |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | |
| 10 | Section 501(c)(7) organizations. Enter | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12. | 10a | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | |
| 11 | Section 501(c)(12) organizations. Enter | | |
| a | Gross income from members or shareholders | 11a | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | 11b | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | |
| 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 | 13a | |
| 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 | 13b | |
| c | Enter the amount of reserves on hand | 13c | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | X |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | |

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 or note to any line 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 | |
| 1b 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? | 2 | 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? | 3 | X |
| 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | |
| 5 Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | |
| 6 Did the organization have members or stockholders? | 6 | 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? | 7a | X |
| 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | X |
| 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a The governing body? | 8a | X |
| b Each committee with authority to act on behalf of the governing body? | 8b | 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. | 9 | 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? | 10a | 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? | 10b | |
| 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | 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. | 12a | X |
| b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | 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. | 12c | X |
| 13 Did the organization have a written whistleblower policy? | 13 | X |
| 14 Did the organization have a written document retention and destruction policy? | 14 | 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 | 15a | X |
| b Other officers or key employees of the organization. | 15b | 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? | 16a | 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? | 16b | |

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 or note to any line 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 | | 48,504 | | |
| (2) Elizabeth Ostenson Grants Manager | 40.00 | | | | X | | | 29,424 | | |
| (3) Connie Payson Executive Assistant | 40.00 | | | | X | | | 27,035 | | |
| (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 | | | | | | | | 104,963 | 0 | 0 |
| c Total from continuation sheets to Part VII, Section A | | | | | | | | 0 | 0 | 0 |
| d Total (add lines 1b and 1c) | | | | | | | | 104,963 | 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**

| | Yes | No |
|---|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i> | | 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? <i>If "Yes," complete Schedule J for such individual.</i> | | X |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i> | | X |

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 or note to any line in this Part VIII ☐

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
|---|--|--|---|--|---|--|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a | Federated campaigns | 0 | | | |
| | b | Membership dues | 0 | | | |
| | c | Fundraising events | 0 | | | |
| | d | Related organizations | 0 | | | |
| | e | Government grants (contributions) | 563,764 | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 0 | | | |
| | g | Noncash contributions included in lines 1a-1f. | \$ 0 | | | |
| | h | Total. Add lines 1a-1f | 563,764 | | | |
| | 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) | 27 | | | |
| | 4 | Income from investment of tax-exempt bond proceeds | 0 | | | |
| | 5 | Royalties | 0 | | | |
| | 6a | Gross rents | | | | |
| | | 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 | | | | |
| | | 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 \$ 0 of contributions reported on line 1c) See Part IV, line 18 | | | | |
| | | a | | 0 | | |
| | | b | Less: direct expenses | 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 | 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 | 0 | | | |
| c | Net income or (loss) from sales of inventory | 0 | | | | |
| Miscellaneous Revenue | | Business Code | | | | |
| 11a | | | | | | |
| b | OTHER INCOME | | 1,830 | | | |
| c | RESTRICTIONS | | 62,524 | | | |
| d | All other revenue | | 0 | | | |
| e | Total. Add lines 11a-11d | | 64,354 | | | |
| 12 | Total revenue. See instructions | | 628,145 | 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 or note to any line 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. | 247,928 | 247,928 | | |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22. | 82,322 | 82,322 | | |
| 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. | 104,963 | 103,786 | 1,177 | |
| 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. | 23,477 | 23,234 | 243 | |
| 10 Payroll taxes. | 8,207 | 8,110 | 97 | |
| 11 Fees for services (non-employees). | | | | |
| a Management. | 0 | | | |
| b Legal. | 0 | | | |
| c Accounting. | 8,374 | 6,665 | 1,709 | |
| 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. | 38,385 | 38,385 | | |
| 13 Office expenses. | 4,997 | 3,985 | 1,012 | |
| 14 Information technology. | 0 | | | |
| 15 Royalties. | 0 | | | |
| 16 Occupancy. | 50,929 | 46,843 | 4,086 | |
| 17 Travel. | 6,833 | 4,293 | 2,540 | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials. | 0 | | | |
| 19 Conferences, conventions, and meetings. | 9,367 | 9,367 | | |
| 20 Interest. | 0 | | | |
| 21 Payments to affiliates. | 0 | | | |
| 22 Depreciation, depletion, and amortization. | 5,455 | 4,856 | 599 | 0 |
| 23 Insurance. | 2,134 | 1,280 | 854 | |
| 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. | 4,380 | 3,282 | 1,098 | |
| b Memberships. | 1,551 | 931 | 620 | |
| c Artist Mentor Program. | 7,098 | 7,098 | | |
| d Parking. | 720 | 612 | 108 | |
| e All other expenses. Repairs/Maint/Gallery Exp. | 5,009 | 4,774 | 235 | |
| 25 Total functional expenses. Add lines 1 through 24e. | 612,129 | 597,751 | 14,378 | 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 or note to any line in this Part X ☐

| | | (A) Beginning of year | | (B) End of year |
|---|---|--------------------------|---------|--------------------|
| Assets | 1 Cash—non-interest-bearing | 130,468 | 1 | 164,517 |
| | 2 Savings and temporary cash investments | | 2 | |
| | 3 Pledges and grants receivable, net | 0 | 3 | 0 |
| | 4 Accounts receivable, net | 60,000 | 4 | 0 |
| | 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 | 7,638 | 9 | 486 |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 77,843 | | |
| | b Less accumulated depreciation | 10b 57,336 | 10c | 20,507 |
| | 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) | 218,501 | 16 | 185,510 | |
| Liabilities | 17 Accounts payable and accrued expenses | 7,663 | 17 | 4,473 |
| | 18 Grants payable | 74,455 | 18 | 91,162 |
| | 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 | 82,118 | 26 | 95,635 |
| 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 | 70,035 | 27 | 86,051 |
| | 28 Temporarily restricted net assets | 66,348 | 28 | 3,824 |
| | 29 Permanently restricted net assets | | 29 | |
| | Organizations that do not follow SFAS 117 (ASC 958), 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 | 136,383 | 32 | 89,875 |
| | 33 Total net assets or fund balances | 136,383 | 33 | 89,875 |
| | 34 Total liabilities and net assets/fund balances | 218,501 | 34 | 185,510 |

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☐

| | | | |
|----|--|----|---------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 628,145 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 612,129 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 16,016 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 136,383 |
| 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 | 152,399 |

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

| | Yes | No |
|---|-----|----|
| 1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| 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 <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| 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 | X | |
| 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? | X | |
| 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 | X | |

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2013

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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.

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

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) | | |

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 | | | | | | | | | 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) 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.") | 564,610 | 557,823 | 713,073 | 579,306 | 628,118 | 3,042,930 |
| 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 | 564,610 | 557,823 | 713,073 | 579,306 | 628,118 | 3,042,930 |
| 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 | | | | | | 3,042,930 |

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 | 564,610 | 557,823 | 713,073 | 579,306 | 628,118 | 3,042,930 |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 41 | 66 | 106 | 65 | 27 | 305 |
| 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 | | | | | | 3,043,235 |
| 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 | 99.99% |
| 15 Public support percentage from 2012 Schedule A, Part II, line 14 | 15 | 99.98% |
| 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 checked="" 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.") | | | | | | 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) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (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 2013 (line 8, column (f) divided by line 13, column (f)) | 15 | 0.00% |
| 16 Public support percentage from 2012 Schedule A, Part III, line 15 | 16 | 0.00% |

Section D. Computation of Investment Income Percentage

| | | |
|--|----|-------|
| 17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) | 17 | 0.00% |
| 18 Investment income percentage from 2012 Schedule A, Part III, line 17 | 18 | 0.00% |

- 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 ☐

Part IV **Supplemental Information.** 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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

**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. | |
| 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? | <input type="checkbox"/> Yes <input type="checkbox"/> 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)? | <input type="checkbox"/> Yes <input type="checkbox"/> 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

| | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c 0 |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 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 | 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 _____

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

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

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. 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 | 77,843 | 57,336 | 20,507 |
| 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)) | | | | 20,507 |

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. 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) | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12.) ▶ | 0 | |

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. 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) | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶ | 0 |

2. Liability for uncertain tax positions. 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 |
|---------|--|
|---------|--|

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

| | | | | |
|---|---|----|----|---|
| 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 |
|----------|--|
|----------|--|

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

| | | | | |
|----------|---|-----------|-----------|---|
| 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

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.

[illegible]

Part XIII Supplemental Information *(continued)*

Area with horizontal dashed lines 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.

▶ Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization

LAKE REGION ARTS COUNCIL

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

41-1430764

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?

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

☒ Yes ☐ No

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) See Attachment | | | | | | | |
| (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 | | | | | | | 247,928 |
| 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) (2013)

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 |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| See attachment | | 82,322 | | | |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

| Part IV | Supplemental Information. 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)

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.

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

Name of the organization

LAKE REGION ARTS COUNCIL

Employer identification number

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 indentifying 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 Director 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 determing compensation of

the following persons include a review and approval by independent persons comparability data

and contemporaneous substantiation of the deliveration 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 taken into

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

HTA

Schedule O (Form 990 or 990-EZ) (2013)

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 IT'S 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.

FY14 - Lake Region Arts Council Board Members and Staff

11/19/2013

BECKER COUNTY

Donald S. Clark (07/12) 7/12 - 6/15, 1st Term
 17371 Bijou Circle H: 218-238-5073
 Lake Park, MN 56554 D: 218-329-2597
donald.s.clark.msum@gmail.com yamobeedare1069@gmail.com

Eric R. Abrahamson (07/13) 7/13 - 6/16, 1st Term
 33066 120th Street H: 218-847-0649
 Frazeo, MN 56544 D: 701-212-7975
newera@lakesnet.net forhelastdetail@yahoo.com

CLAY COUNTY

Pagyn Alexander Harding (9/10) 07/11-06/14, 1st Term
 10506 Hwy 32 N H: 218-962-3202
 Hitterdal, MN 56552
pagynharding@yahoo.com C: 701-412-6053

Mark Anthony Ryan (7/13) 7/13-6/16, 1st Term
 915 11th St. S H: 218-287-6023
 Moorhead, MN 56560 D: 701-219-3960 (cell)
mryan@plainsart.org mozzhead@hotmail.com

DOUGLAS COUNTY

Nancy Berns (11/10) 7/11-6/14 1st Term
 338 East Lake Cowdry Lane NW H: 320-763-4645
 Alexandria, MN 56308 W:
njberns@gmail.com C: 320-766-8353

Carolyn Aarsvold (2/08) 7/08-6/14, 2nd Term
 105 Linden Ave.
 Alexandria, MN 56308 W: 320-763-3200 (resort)
info@genevabeachresort.com C: 320-760-8528

GRANT COUNTY

Timothy J. Ray (07/12) 7/12 - 6/15, 1st Term
 18680 130th Ave H: 320-986-2822
 Barrett, MN 56311
tim@mrray.net raypopp@runestone.net

Kari Kjesbo (10/09) 7/10-6/16, 2nd Term
 31506 230th St H: 320-284-2218
 Norcross, Mn 56274 C: 218-770-0157
kari@runestone.net

OTTER TAIL COUNTY

AmyAnn Mursu (10/13) 7/14 - 6/17, 1st Term
 51113 340th Street 320-309-3903
 New York Mills, MN 56567 C:
amy@lakeviewestatelaw.com

OTTER TAIL COUNTY, Cont.

Gary Henrickson (07/08) 07/08-06/14, 2nd Term
 1120 Somerset Road #305 H: 218-998-2540
 Fergus Falls, MN 56537 W: 218-736-1506
Gary.Henrickson@Minnesota.edu

POPE COUNTY

Minette Stalheim Johnson (07/12) 7/12 - 6/15, 1st Term
 615 W 6th Street H: 320-239-3990
 Starbuck, MN 56381 C: 320-334-1865
msjohnson.officemail@gmail.com

Jeannie Pederson

(07/12) 7/12 - 6/15, 1st Term
 131 E MN Ave H: 320-805-0592
 Glenwood MN 56334 D: 320-634-3909
famcolab@charter.net jlphearts@gmail.com

STEVENS COUNTY

Kari Adams (09/11) 07/12-06/15, 1st Term
 330 S. Columbia Avenue, Apt 1 H: 320-287-2803
 Morris, MN 56267
adamsk@morris.umn.edu

Michael Eble

(07/12) 7/12 - 6/15, 1st Term
 4 North Court H: 320-585-5460
 Morris, MN 56267 C: 320-288-8389
meble@morris.umn.edu

TRAVERSE COUNTY

Christian T. Boe (11/12) 7/13-6/16, 1st Term
 305 12th St N #103 H: 320-349-0554
 Wheaton, MN 56296 W:
cdu802@frontier.com

Carolyn Flieder

(01/12) 7/12-6/15, 1st Term
 1403 1st Ave N H: 320-563-0468
 Wheaton, MN 56296 W: 320-563-0468
 ~no e-mail~ C: 320-287-0913

WILKIN COUNTY

Amy Schmidt (9/07) 7/08-6/14, 2nd Term
 PO Box 21 621 6th St. H: 218-630-5801
 Campbell, MN 56522 W: 701-672-5830
bookhavenbooks@gmail.com

Stan Goldade

(04/12) 7/12 - 6/15, 1st Term
 1117 Douglas Ave H: 218-643-8803
 Breckenridge, MN 56520 Day: 701-640-0909
goldade5@gmail.com

STAFF

Maxine Adams, Executive Director 11/03-curr
709 Summit Ave E H: 218-736-5596
Fergus Falls, MN 56537 W: 218-739-5780
lrac4@lracgrants.org C: 218-731-4578
bobdkatt@hotmail.com

Betsy Ostenson, Grant Administrator 12/09-curr
11531 State Hwy 79 H: 218-948-2197
Elbow Lake, MN 56531 C: 218-770-0481
lrac4@lracgrants.org erosten@gctel.com

Connie Payson, Executive Assistant 3/10-curr
21347 Sunny Dr C: 218-731-3083
Fergus Falls, MN 56537 Alternate Cell 218-731-3057
lrac4@lracgrants.org conniep_hr@gmail.com

**Stephen Henning, Regional
Communications Specialist**
22399 Oak Hill Road NW C: 320-491-8248
Evansville, MN 56326 C-Jackie 320-491-6295
lrac4@lracgrants.org steve@lakescountry.tv

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. \$ Total of grant award | 1h. Purpose of the grant assistance |
|---|----------------|----------------------|-----------------------------|--|
| The Alexandria Area Arts Association 618 Broadway Alexandria, MN 56308 | 510171992 | \$28000 | \$28000 | to renovate underutilized areas in the building to support expanding education programming |
| The Alexandria Public School 1410 S McKay Ave Suite 201 Alexandria, MN 56308 | 416000893 | \$2230 | \$2230 | to host an one week artist residency with "los Llaneros" a South American music ensemble |
| The Browns Valley School District 801 118 Church Street PO Box N Browns Valley, MN 56219 | 416004384 | \$2370 | \$2370 | to host an one week artist residency with Prairie Fire Theatre, "Aladdin" |
| The Brush and Palette Club 2842 County Road 82 NW Alexandria, MN 56308 | 731707404 | \$670 | \$670 | to upgrade their workshop demonstration technology with projection system and webconferencing equipment |
| The Central Lakes Symphony Orchestra 1210 Broadway St. Suite 240 Alexandria, MN 56308 | 270662723 | \$5050 | \$5050 | to present excerpts from "The Magic Flute" with guest artists from MN Opera, featuring three local choirs |
| The Central Square Inc 105 2nd Ave NE Glenwood, MN 56334 | 411795911 | \$970 | \$970 | to renovate former classrooms for visual art workspace |
| The City of Starbuck 307 E 5th St PO Box 606 Starbuck, MN 56381 | 416005559 | \$10000 | \$10000 | to increase the public art access incorporating a third Philip Rickey sculpture |
| The Concordia College Art Department 901 8th St S Moorhead, MN 56562 | 410693977 | \$1000 | \$1000 | to develop and build a public art project that is a collaboration of the artist team, the Concordia College faculty and students, the city of Moorhead, Moorhead Park District and Plains Art Museum |
| The Concordia College Communication Studies and Theatre Art 901 8th St S Moorhead, MN 56562 | 410693957 | \$1800 | \$1800 | to host a public workshop with playwright, David MacGregor, in fiction writing and beginning directing |

| 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 | \$2200 | \$2200 | to provide a 1 day educational event, Day of Percussion, Spring 2014 |
| Minnesota State University Moorhead Department of Music MSUM Music 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2995 | \$2995 | to host the Day of Percussion/Steelband Festival at MSUM |
| The DLCCC 806 Summit Ave Detroit Lakes, MN 56501 | 411970351 | \$16250 | \$16250 | to support artist outreach activities in Becker County during the 2014-15 season |
| Regents of the University of Minnesota on behalf of the Morris Campus, English Discipline Division of Humanities 600 E 4th St Morris, MN 56267 | 416007513 | \$3000 | \$3000 | to sponsor two writers Matt Hart & Rachel Hanel, to do readings and workshops |
| The Evansville Arts Coalition 111 Main St PO Box 68 Evansville, MN 56326 | 311510471 | \$640 | - | to pay a portion of the insurance for the year |
| The Evansville Arts Coalition 111 Main St PO Box 68 Evansville, MN 56326 | 311510471 | \$320 | \$960 | to host an evening coffee house with David Stoddard and Beth Wood Portland |
| The Fargo Moorhead Chamber Chorale PO Box 968 Moorhead, MN 56561 | 363305039 | \$1400 | \$1400 | to present a master choral class and concert at Perham |
| The Fergus Falls Center for the Arts 124 W Lincoln Ave Fergus Falls, MN 56537 | 411416048 | \$28780 | \$28780 | to provide funding for the main 7 show season and 4 "On Stage" concerts featuring world class artisans with education and community outreach September 2014 through May 2015 |
| The Friends of the History Museum of East Otter Tail County 230 1st Ave N Perham, MN 56573 | 411875118 | \$3000 | - | to hire a consultant to investigate the revitalization of the Perham Pioneer Festival |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. Total of grant award | 1h. Purpose of the grant assistance |
|--|----------------|----------------------|--------------------------|---|
| The Friends of the History Museum of East Otter Tail County 230 First Ave N Perham, MN 56573 | 411875118 | \$7903 | \$10903 | to provide a mix of quality of art experiences for the community for the 2014 season and purchase a sound system for the performance activities |
| The Gooseberry Park Players PO Box 362 Moorhead, MN 56560 | 450388094 | \$470 | \$470 | to hire a graphic designer to create a promotional brochure for the production |
| The Henning Landmark Center 415 Douglas Ave PO Box 341 Henning, MN 56551 | 270244370 | \$3510 | - | to pay the director's time to research the creation of an artist retreat space at the Center |
| The Henning Landmark Center 415 Douglas Ave PO Box 341 Henning, MN 56551 | 270244370 | \$2500 | \$6010 | to host an artist residency featuring Kristi Kuder, fiber & sculpture artist |
| The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1870 | - | to exhibit the premier art quilt collection, Quilt National 2013 |
| The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1370 | - | to present cultural performances during the Pangea Cultivate Our Cultures festival |
| The Historical and Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$3000 | - | to sponsor author, Mary Ann Kirby, at the German Culture Day |
| The Historical and Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1500 | \$7740 | to host the second annual German Culture Day, contemporary and traditional arts |
| The Lake Region Writers Network 846 Lake Shore Dr. PO Box 356 Battle Lake, MN 56515 | 371590305 | \$3230 | \$3230 | to host the 5th annual Lake Region Writers Network |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. Total of grant award | 1h. Purpose of the grant assistance |
|---|----------------|----------------------|--------------------------|--|
| The Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308 | 411791642 | \$2900 | - | to pay a portion of the artistic director's salary |
| The Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308 | 411791642 | \$2350 | \$5250 | to present an evening of outstanding chamber music |
| The Leif Erikson, Sons of Norway 21955 457th Ave Vining, MN 56588 | 237525633 | \$1890 | \$1890 | to create public art in the Vining Community Building featuring a large mural and rosemaling |
| The Minnesota Lakes Maritime Society 205 3rd Ave W PO Box 1216 Alexandria, MN 56308 | 411967683 | \$8200 | \$8200 | to create a public art entrance to the museum's gardens |
| The Minnesota State University Moorhead College for Kids 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2000 | \$2000 | to support need based scholarship to provide take art enrichment courses and introduce new art classes |
| The Minnesota State University Moorhead TOCAR 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$4560 | \$4560 | to host the Climb Theatre to present two public performances at MSUM and M State |
| The New Rivers Press 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2300 | - | to publish a collection of literary essays, Paper Camera |
| The New Rivers Press 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$1350 | \$3650 | to host a celebration of the literary arts with authors and performers |
| The New York Mills Art Retreat 24 Main Ave N PO Box 246 New York Mills, MN 56567 | 411690163 | \$2050 | - | to host a "Day of the Dead" celebration with an exhibit and concert |
| The New York Mills Arts Retreat 24 Main Ave N PO Box 246 New York Mills, MN 56567 | 411690163 | \$4700 | \$6750 | to present a community "Dancing Lights" Festival |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. Total of grant award | 1h. Purpose of the grant assistance |
|--|----------------|----------------------|--------------------------|--|
| The Nordic Culture Clubs 202 1st Ave N Moorhead, MN 56560 | 450406884 | \$2500 | \$2500 | to support two regional festivals: the Hjemkomst and Midwest Viking in June 2014 |
| The Pope County Historical Society 809 S Lakeshore Dr Glenwood, MN 56334 | 410714418 | \$7040 | 7040 | to host the inaugural Glacial Lake Plein D'Aire Festival |
| The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267 | 411983425 | \$4100 | - | to contract a media specialist to expand marketing |
| The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267 | 411983425 | \$1650 | \$5750 | to sponsor "Art Share", 11 monthly art classes for high school and adult students focusing on a variety of artistic disciplines in the coming year |
| The Prairie Wind Players PO Box 246 Barrett, MN 56311 | 411482170 | \$5000 | \$5000 | to upgrade the sound and light capabilities of Roosevelt Hall and pay utilities |
| The Runestone Museum Foundation of Alexandria, Minnesota 206 Broadway Alexandria, MN 56308 | 237391175 | \$7170 | - | to work with Myron Sahlberg, portrait artist, and Kelsey Patton, historical costumer, will produce Viking Age clothing and a full-size family portrait, archiving the creation process to use in the exhibit |
| The Runestone Museum Foundation of Alexandria, Minnesota 206 Broadway Alexandria, MN 56308 | 234391175 | \$850 | \$8020 | to create audio files for OneCell for personalized tours performed by Lakes Area Theatre actors |
| The Sons of Norway, Heimskringlas Lodge #012 20571 Hillcrest Rd Fergus Falls, MN 56537 | 237525627 | \$1000 | \$1000 | to host three art activities focusing on Scandinavian Heritage |
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$2650 | - | to pay for a portion of the utilities and insurance |

| 1a. Organization Name | 1b. EIN Number | 1c. Remitted portion | 1d. Total of grant award | 1e. Purpose of the grant assistance |
|---|----------------|----------------------|--------------------------|---|
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$810 | - | to support the Children's Theatre multi day workshops and musical productions |
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$14230 | \$17690 | to upgrade the sound system that is used for all performing arts programs |
| The Theatre L'Homme Dieu 1875 County Road 120 NE PO Box 1086 Alexandria, MN 56308 | 410858863 | \$3770 | \$3770 | To increaces the attendance by younger audiences their season will include 3 productions geared to younger audience, 4 theatre workshops for local students and an artist residency open rehearsals/masterclasses |
| The Ulen Hitterdal School 27 2nd St NW PO Box 389 Ulen, MN 56585 | 410953951 | \$1790 | - | to conduct an artist residency with glass artist Jon Offutt |
| The Ulen Hitterdal School 27 2nd S NW PO Box 389 Ulen, MN 56585 | 41095391 | \$3000 | \$4790 | to sponsor an artist residency with Boston Brass as Educational Ambassadors for the Junior and Senior High bands |
| The Underwood School Community Education 100 Southern Ave Underwood, MN 56586 | 416002898 | \$670 | \$670 | to host Prairie Fire Children's Theatre to present "Tom Sawyer" |
| The West Central Area School District 2342 301 County Rd #2 Barrett, MN 56311 | 411806563 | \$1860 | \$1860 | to sponsor a two week artist residency with "Skilly and Duff" for grades 7-12 |
| Total | | | \$236,408 | |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. \$ Total of grant award | 1h. Purpose of the grant assistance |
|--|----------------|----------------------|-----------------------------|--|
| The Alexandria Area Arts Association 618 Broadway Alexandria, MN 56308 | 510171992 | \$28000 | \$28000 | to renovate underutilized areas in the building to support expanding education programming |
| The Alexandria Public School 1410 S McKay Ave Suite 201 Alexandria, MN 56308 | 416000893 | \$2230 | \$2230 | to host an one week artist residency with "Los Llaneros" a South American music ensemble |
| The Browns Valley School District 801 118 Church Street PO Box N Browns Valley, MN 56219 | 416004384 | \$2370 | \$2370 | to host an one week artist residency with Prairie Fire Theatre, "Aladdin". |
| The Brush and Palette Club 2842 County Road 82 NW Alexandria, MN 56308 | 731707404 | \$670 | \$670 | to upgrade their workshop demonstration technology with projection system and webconferencing equipment |
| The Central Lakes Symphony Orchestra 1210 Broadway St. Suite 240 Alexandria, MN 56308 | 270662723 | \$5050 | \$5050 | to present excerpts from "The Magic Flute" with guest artists from MN Opera, featuring three local choirs |
| The Central Square Inc. 105 2nd Ave NE Glenwood, MN 56334 | 411795911 | \$970 | \$970 | to renovate former classrooms for visual art workspace |
| The City of Starbuck 307 E 5th St PO Box 606 Starbuck, MN 56381 | 416005559 | \$10000 | \$10000 | to increase the public art access incorporating a third Philip Rickey sculpture |
| The Concordia College Art Department 901 8th St S Moorhead, MN 56562 | 410693977 | \$1000 | \$1000 | to develop and build a public art project that is a collaboration of the artist team, the Concordia College faculty and students, the city of Moorhead, Moorhead Park District and Plains Art Museum |
| The Concordia College Communication Studies and Theatre Art 901 8th St S Moorhead, MN 56562 | 410693957 | \$1800 | \$1800 | to host a public workshop with playwright, David MacGregor, in fiction writing and beginning directing. |

| 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 | \$2200 | \$2200 | to provide a 1 day educational event, Day of Percussion, Spring 2014 |
| Minnesota State University Moorhead Department of Music MSUM Music 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2995 | \$2995 | to host the Day of Percussion/Steelband Festival at MSUM |
| The DLCCC 806 Summit Ave Detroit Lakes, MN 56501 | 411970351 | \$16250 | \$16250 | to support artist outreach activities in Becker County during the 2014-15 season |
| Regents of the University of Minnesota on behalf of the Morris Campus, English Discipline Division of Humanities 600 E 4th St Morris, MN 56267 | 416007513 | \$3000 | \$3000 | to sponsor two writers Matt Hart & Rachel Hanel, to do readings and workshops |
| The Evansville Arts Coalition 111 Main St PO Box 68 Evansville, MN 56326 | 311510471 | \$640 | - | to pay a portion of the insurance for the year |
| The Evansville Arts Coalition 111 Main St PO Box 68 Evansville, MN 56326 | 311510471 | \$320 | \$960 | to host an evening coffee house with David Stoddard and Beth Wood Portland |
| The Fargo Moorhead Chamber Chorale PO Box 968 Moorhead, MN 56561 | 363305039 | \$1400 | \$1400 | to present a master choral class and concert at Perham |
| The Fergus Falls Center for the Arts 124 W Lincoln Ave Fergus Falls, MN 56537 | 411416048 | \$28780 | \$28780 | to provide funding for the main 7 show season and 4 "On Stage" concerts featuring world class artisans with education and community outreach September 2014 through May 2015 |
| The Friends of the History Museum of East Otter Tail County 230 1st Ave N Perham, MN 56573 | 411875118 | \$3000 | - | to hire a consultant to investigate the revitalization of the Perham Pioneer Festival |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. Total of grant award | 1h. Purpose of the grant assistance |
|--|----------------|----------------------|--------------------------|--|
| The Friends of the History Museum of East Otter Tail County 230 First Ave N Perham, MN 56573 | 411875118 | \$7903 | \$10903 | to provide a mix of quality of art experiences for the community for the 2014 season and purchase a sound system for the performance activities. |
| The Gooseberry Park Players PO Box 362 Moorhead, MN 56560 | 450388094 | \$470 | \$470 | to hire a graphic designer to create a promotional brochure for the production |
| The Henning Landmark Center 415 Douglas Ave PO Box 341 Henning, MN 56551 | 270244370 | \$3510 | - | to pay the director's time to research the creation of an artist retreat space at the Center |
| The Henning Landmark Center 415 Douglas Ave PO Box 341 Henning, MN 56551 | 270244370 | \$2500 | \$6010 | to host an artist residency featuring Kristi Kuder, fiber & sculpture artist |
| The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1870 | - | to exhibit the premier art quilt collection, Quilt National 2013 |
| The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1370 | - | to present cultural performances during the Pangea Cultivate Our Cultures festival |
| The Historical and Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$3000 | - | to sponsor author, Mary Ann Kirby, at the German Culture Day |
| The Historical and Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1500 | \$7740 | to host the second annual German Culture Day, contemporary and traditional arts |
| The Lake Region Writers Network 846 Lake Shore Dr. PO Box 356 Battle Lake, MN 56515 | 371590305 | \$3230 | \$3230 | to host the 5th annual Lake Region Writers Network |

| 1a Organization Name | 1b EIN Number | 1d Remitted portion | 1d Total of grant award | 1e Purpose of the grant assistance |
|---|---------------|---------------------|-------------------------|--|
| The Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308 | 411791642 | \$2900 | - | to pay a portion of the artistic director's salary |
| The Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308 | 411791642 | \$2350 | \$5250 | to present an evening of outstanding chamber music |
| The Leif Erikson, Sons of Norway 21955 457th Ave Vining, MN 56588 | 237525633 | \$1890 | \$1890 | to create public art in the Vining Community Building featuring a large mural and rosemailing |
| The Minnesota Lakes Maritime Society 205 3rd Ave W PO Box 1216 Alexandria, MN 56308 | 411967683 | \$8200 | \$8200 | to create a public art entrance to the museum's gardens |
| The Minnesota State University Moorhead College for Kids 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2000 | \$2000 | to support need based scholarship to provide take art enrichment courses and introduce new art classes |
| The Minnesota State University Moorhead TOCAR 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$4560 | \$4560 | to host the Climb Theatre to present two public performances at MSUM and M State |
| The New Rivers Press 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2300 | - | to publish a collection of literary essays, Paper Camera |
| The New Rivers Press 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$1350 | \$3650 | to host a celebration of the literary arts with authors and performers |
| The New York Mills Art Retreat 24 Main Ave N PO Box 246 New York Mills, MN 56567 | 411690163 | \$2050 | - | to host a "Day of the Dead" celebration with an exhibit and concert |
| The New York Mills Arts Retreat 24 Main Ave N PO Box 246 New York Mills, MN 56567 | 411690163 | \$4700 | \$6750 | to present a community "Dancing Lights" Festival |

| 1a Organization Name | 1b EIN Number | 1d Remitted portion | 1d Total of grant award | 1h Purpose of the grant assistance |
|--|---------------|---------------------|-------------------------|--|
| The Nordic Culture Clubs 202 1st Ave N Moorhead, MN 56560 | 450406884 | \$2500 | \$2500 | to support two regional festivals: the Hjemkomst and Midwest Viking in June 2014 |
| The Pope County Historical Society 809 S Lakeshore Dr Glenwood, MN 56334 | 410714418 | \$7040 | 7040 | to host the inaugural Glacial Lake Plein D'Aire Festival |
| The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267 | 411983425 | \$4100 | - | to contract a media specialist to expand marketing |
| The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267 | 411983425 | \$1650 | \$5750 | to sponsor "Art Share", 11 monthly art classes for high school and adult students focusing on a variety of artistic disciplines in the coming year |
| The Prairie Wind Players PO Box 246 Barrett, MN 56311 | 411482170 | \$5000 | \$5000 | to upgrade the sound and light capabilities of Roosevelt Hall and pay utilities |
| The Runestone Museum Foundation of Alexandria, Minnesota 206 Broadway Alexandria, MN 56308 | 237391175 | \$7170 | - | to work with Myron Sahlberg, portrait artist, and Kelsey Patton, historical costumer, will produce Viking Age clothing and a full-size family portrait, archiving the creation process to use in the exhibit |
| The Runestone Museum Foundation of Alexandria, Minnesota 206 Broadway Alexandria, MN 56308 | 234391175 | \$850 | \$8020 | to create audio files for OneCell for personalized tours performed by Lakes Area Theatre actors |
| The Sons of Norway, Heimskringlas Lodge #012 20571 Hillcrest Rd Fergus Falls, MN 56537 | 237525627 | \$1000 | \$1000 | to host three art activities focusing on Scandinavian Heritage |
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$2650 | - | to pay for a portion of the utilities and insurance |

| 1a Organization Name | 1b EIN Number | 1d Remitted portion | 1d Total of grant award | 1h Purpose of the grant assistance |
|---|---------------|---------------------|-------------------------|--|
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$810 | - | to support the Children's Theatre multi day workshops and musical productions |
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$14230 | \$17690 | to upgrade the sound system that is used for all performing arts programs |
| The Theatre L'Homme Dieu 1875 County Road 120 NE PO Box 1086 Alexandria, MN 56308 | 410858863 | \$3770 | \$3770 | To increase the attendance by younger audiences their season will include 3 productions geared to younger audience, 4 theatre workshops for local students and an artist residency open rehearsals/masterclasses |
| The Ulen Hitterdal School 27 2nd St NW PO Box 389 Ulen, MN 56585 | 410953951 | \$1790 | - | to conduct an artist residency with glass artist Jon Offutt |
| The Ulen Hitterdal School 27 2nd S NW PO Box 389 Ulen, MN 56585 | 41095391 | \$3000 | \$4790 | to sponsor an artist residency with Boston Brass as Educational Ambassadors for the Junior and Senior High bands |
| The Underwood School Community Education 100 Southern Ave Underwood, MN 56586 | 416002898 | \$670 | \$670 | to host Prairie Fire Children's Theatre to present "Tom Sawyer" |
| The West Central Area School District 2342 301 County Rd #2 Barrett, MN 56311 | 411806563 | \$1860 | \$1860 | to sponsor a two week artist residency with "Skilly and Duff" for grades 7-12 |
| Total | | | \$236,408 | |

| Individual Artist Grant Program | First Name File Number | Amount Funded |
|---|---|----------------------|
| Rieschick Artist Quick Start | Thomas FY14 09.13 AQS01 G1 | \$750 |
| Schliesman Artist Quick Start | Naomi FY14 09.13 AQS02 G1 | \$750 |
| Weatherly Legacy Arts & Cultural Heritage | Michael FY14 11.13 LI01 | \$2500 |
| Olson Legacy Arts & Cultural Heritage | Dan FY14 11.13 LI02 | \$12810 |
| Tin Horse Enterprise Legacy Arts & Cultural Heritage | The (Michael Burgraft) FY14 11.13 LI04 | \$3342 |
| Juelfs Artist Quick Start | Melissa FY14 01.14 AQS03 G3 | \$750 |
| Squinobal Artist Quick Start | Jason FY14 01.14 AQS01 G2 | \$750 |
| Lynn Artist Quick Start | Meredith FY14 01.14 AQS02 G2 | \$750 |
| Johnson Legacy Arts & Cultural Heritage | Timothy FY14 04.14 LI02 | \$11910 |
| Vandever Legacy Arts & Cultural Heritage | Richard FY14 04.14 LI03 | \$10960 |
| Axelson Legacy Arts & Cultural Heritage | Gloria FY14 04.14 LI04 | \$1500 |
| Wallwork Legacy Arts & Cultural Heritage | Deborah FY14 04.14 LI05 | \$11860 |
| McEvers Legacy Arts & Cultural Heritage | Jay FY14 04.14 LI06 | \$6840 |
| Clayton Legacy Arts & Cultural Heritage | Ann FY14 04.14 LI07 | \$2600 |
| Field Opheim Career Development | Jenny FY14 05.14 CD03 | \$250 |
| McDougall Career Development | Cindy FY14 05.14 CD11 | \$1200 |
| Solinger Career Development | Jon FY14 05.14 CD12 | \$1200 |
| Vincent Career Development | Patrick FY14 05.14 CD13 | \$1200 |
| Sinner Career Development | Kelli FY14 05.14 CD15 | \$1200 |
| Lee Career Development | Conor FY14 05.14 CD17 | \$600 |
| Brand Career Development | Spencer FY14 05.14 CD20 | \$1200 |
| Busko Career Development | Samuel FY14 05.14 CD21 | \$1200 |
| Zachmann Career Development | Carl FY14 05.14 CD25 | \$1200 |
| Scott McKnight Fellowship | Sean FY14 06.14 F16 | \$5000 |
| Total Individual Artists | | \$82,322 |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d.\$ Total of grant award | 1h. Purpose of the grant assistance |
|--|----------------|----------------------|----------------------------|--|
| The Alexandria Area Arts Association 618 Broadway Alexandria, MN 56308 | 510171992 | \$28000 | \$28000 | to renovate underutilized areas in the building to support expanding education programming |
| The Alexandria Public School 1410 S McKay Ave Suite 201 Alexandria, MN 56308 | 416000893 | \$2230 | \$2230 | to host an one week artist residency with "los Llaneros" a South American music ensemble |
| The Browns Valley School District 801 118 Church Street PO Box N Browns Valley, MN 56219 | 416004384 | \$2370 | \$2370 | to host an one week artist residency with Prairie Fire Theatre, "Aladdin" |
| The Brush and Palette Club 2842 County Road 82 NW Alexandria, MN 56308 | 731707404 | \$670 | \$670 | to upgrade their workshop demonstration technology with projection system and webconferencing equipment |
| The Central Lakes Symphony Orchestra 1210 Broadway St. Suite 240 Alexandria, MN 56308 | 270662723 | \$5050 | \$5050 | to present excerpts from "The Magic Flute" with guest artists from MN Opera, featuring three local choirs |
| The Central Square Inc. 105 2nd Ave NE Glenwood, MN 56334 | 411795911 | \$970 | \$970 | to renovate former classrooms for visual art workspace |
| The City of Starbuck 307 E 5th St PO Box 606 Starbuck, MN 56381 | 416005559 | \$10000 | \$10000 | to increase the public art access incorporating a third Philip Rickey sculpture |
| The Concordia College Art Department 901 8th St S Moorhead, MN 56562 | 410693977 | \$1000 | \$1000 | to develop and build a public art project that is a collaboration of the artist team, the Concordia College faculty and students, the city of Moorhead, Moorhead Park District and Plains Art Museum |
| The Concordia College Communication Studies and Theatre Art 901 8th St S Moorhead, MN 56562 | 410693957 | \$1800 | \$1800 | to host a public workshop with playwright, David MacGregor, in fiction writing and beginning directing |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1e. Total of grant award | 1h. Purpose of the grant assistance |
|---|----------------|----------------------|--------------------------|--|
| The Concordia Percussion Ensemble Department of Music Concordia College Moorhead, MN 56562 | 900022714 | \$2200 | \$2200 | to provide a 1 day educational event, Day of Percussion, Spring 2014 |
| Minnesota State University Moorhead Department of Music MSUM Music 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2995 | \$2995 | to host the Day of Percussion/Steelband Festival at MSUM |
| The DLCCC 806 Summit Ave Detroit Lakes, MN 56501 | 411970351 | \$16250 | \$16250 | to support artist outreach activities in Becker County during the 2014-15 season |
| Regents of the University of Minnesota on behalf of the Morris Campus, English Discipline Division of Humanities 600 E 4th St Morris, MN 56267 | 416007513 | \$3000 | \$3000 | to sponsor two writers Matt Hart & Rachel Hanel, to do readings and workshops |
| The Evansville Arts Coalition 111 Main St PO Box 68 Evansville, MN 56326 | 311510471 | \$640 | - | to pay a portion of the insurance for the year |
| The Evansville Arts Coalition 111 Main St PO Box 68 Evansville, MN 56326 | 311510471 | \$320 | \$960 | to host an evening coffee house with David Stoddard and Beth Wood Portland |
| The Fargo Moorhead Chamber Chorale PO Box 968 Moorhead, MN 56561 | 363305039 | \$1400 | \$1400 | to present a master choral class and concert at Perham |
| The Fergus Falls Center for the Arts 124 W Lincoln Ave Fergus Falls, MN 56537 | 411416048 | \$28780 | \$28780 | to provide funding for the main 7 show season and 4 "On Stage" concerts featuring world class artisans with education and community outreach September 2014 through May 2015 |
| The Friends of the History Museum of East Otter Tail County 230 1st Ave N Perham, MN 56573 | 411875118 | \$3000 | - | to hire a consultant to investigate the revitalization of the Perham Pioneer Festival |

| 1a. Organization Name | 1b. EIN Number | 1c. Remitted portion | 1d. Total of grant award | 1e. Purpose of the grant assistance |
|--|----------------|----------------------|--------------------------|--|
| The Friends of the History Museum of East Otter Tail County 230 First Ave N Perham, MN 56573 | 411875118 | \$7903 | \$10903 | to provide a mix of quality of art experiences for the community for the 2014 season and purchase a sound system for the performance activities. |
| The Gooseberry Park Players PO Box 362 Moorhead, MN 56560 | 450388094 | \$470 | \$470 | to hire a graphic designer to create a promotional brochure for the production |
| The Henning Landmark Center 415 Douglas Ave PO Box 341 Henning, MN 56551 | 270244370 | \$3510 | - | to pay the director's time to research the creation of an artist retreat space at the Center |
| The Henning Landmark Center 415 Douglas Ave PO Box 341 Henning, MN 56551 | 270244370 | \$2500 | \$6010 | to host an artist residency featuring Kristi Kuder, fiber & sculpture artist |
| The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1870 | - | to exhibit the premier art quilt collection, Quilt National 2013 |
| The Historical & Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1370 | - | to present cultural performances during the Pangea Cultivate Our Cultures festival |
| The Historical and Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$3000 | - | to sponsor author, Mary Ann Kirby, at the German Culture Day |
| The Historical and Cultural Society of Clay County 202 1st Ave N PO Box 157 Moorhead, MN 56561 | 416038553 | \$1500 | \$7740 | to host the second annual German Culture Day, contemporary and traditional arts |
| The Lake Region Writers Network 846 Lake Shore Dr PO Box 356 Battle Lake, MN 56515 | 371590305 | \$3230 | \$3230 | to host the 5th annual Lake Region Writers Network |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. Total of grant award | 1h. Purpose of the grant assistance |
|---|----------------|----------------------|--------------------------|--|
| The Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308 | 411791642 | \$2900 | - | to pay a portion of the artistic director's salary |
| The Lakes Chamber Music Society PO Box 863 Alexandria, MN 56308 | 411791642 | \$2350 | \$5250 | to present an evening of outstanding chamber music |
| The Leif Erikson, Sons of Norway 21955 457th Ave Vining, MN 56588 | 237525633 | \$1890 | \$1890 | to create public art in the Vining Community Building featuring a large mural and rosemaling |
| The Minnesota Lakes Maritime Society 205 3rd Ave W PO Box 1216 Alexandria, MN 56308 | 411967683 | \$8200 | \$8200 | to create a public art entrance to the museum's gardens |
| The Minnesota State University Moorhead College for Kids 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2000 | \$2000 | to support need based scholarship to provide take art enrichment courses and introduce new art classes |
| The Minnesota State University Moorhead TOCAR 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$4560 | \$4560 | to host the Climb Theatre to present two public performances at MSUM and M State |
| The New Rivers Press 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$2300 | - | to publish a collection of literary essays, Paper Camera |
| The New Rivers Press 1104 7th Ave S Moorhead, MN 56563 | 411687554 | \$1350 | \$3650 | to host a celebration of the literary arts with authors and performers |
| The New York Mills Art Retreat 24 Main Ave N PO Box 246 New York Mills, MN 56567 | 411690163 | \$2050 | - | to host a "Day of the Dead" celebration with an exhibit and concert |
| The New York Mills Arts Retreat 24 Main Ave N PO Box 246 New York Mills, MN 56567 | 411690163 | \$4700 | \$6750 | to present a community "Dancing Lights" Festival |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. Total of grant award | 1h. Purpose of the grant assistance |
|--|----------------|----------------------|--------------------------|--|
| The Nordic Culture Clubs 202 1st Ave N Moorhead, MN 56560 | 450406884 | \$2500 | \$2500 | to support two regional festivals: the Hjemkomst and Midwest Viking in June 2014 |
| The Pope County Historical Society 809 S Lakeshore Dr Glenwood, MN 56334 | 410714418 | \$7040 | 7040 | to host the inaugural Glacial Lake Plein D'Aire Festival |
| The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267 | 411983425 | \$4100 | - | to contract a media specialist to expand marketing |
| The Prairie Renaissance Cultural Alliance 630 Atlantic Ave Morris, MN 56267 | 411983425 | \$1650 | \$5750 | to sponsor "Art Share", 11 monthly art classes for high school and adult students focusing on a variety of artistic disciplines in the coming year |
| The Prairie Wind Players PO Box 246 Barrett, MN 56311 | 411482170 | \$5000 | \$5000 | to upgrade the sound and light capabilities of Roosevelt Hall and pay utilities |
| The Runestone Museum Foundation of Alexandria, Minnesota 206 Broadway Alexandria, MN 56308 | 237391175 | \$7170 | - | to work with Myron Sahlberg, portrait artist, and Kelsey Patton, historical costumer, will produce Viking Age clothing and a full-size family portrait, archiving the creation process to use in the exhibit |
| The Runestone Museum Foundation of Alexandria, Minnesota 206 Broadway Alexandria, MN 56308 | 234391175 | \$850 | \$8020 | to create audio files for OneCell for personalized tours performed by Lakes Area Theatre actors |
| The Sons of Norway, Heimskringlas Lodge #012 20571 Hillcrest Rd Fergus Falls, MN 56537 | 237525627 | \$1000 | \$1000 | to host three art activities focusing on Scandinavian Heritage |
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$2650 | - | to pay for a portion of the utilities and insurance |

| 1a. Organization Name | 1b. EIN Number | 1d. Remitted portion | 1d. Total of grant award | 1h. Purpose of the grant assistance |
|---|----------------|----------------------|--------------------------|--|
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$810 | - | to support the Children's Theatre multi day workshops and musical productions |
| The Terrace Mill Foundation 27165 Old Mill Pond Rd Terrace, MN 56334 | 411372219 | \$14230 | \$17690 | to upgrade the sound system that is used for all performing arts programs |
| The Theatre L'Homme Dieu 1875 County Road 120 NE PO Box 1086 Alexandria, MN 56308 | 410858863 | \$3770 | \$3770 | To increase the attendance by younger audiences their season will include 3 productions geared to younger audience, 4 theatre workshops for local students and an artist residency open rehearsals/masterclasses |
| The Ulen Hitterdal School 27 2nd St NW PO Box 389 Ulen, MN 56585 | 410953951 | \$1790 | - | to conduct an artist residency with glass artist Jon Offutt |
| The Ulen Hitterdal School 27 2nd S NW PO Box 389 Ulen, MN 56585 | 41095391 | \$3000 | \$4790 | to sponsor an artist residency with Boston Brass as Educational Ambassadors for the Junior and Senior High bands |
| The Underwood School Community Education 100 Southern Ave Underwood, MN 56586 | 416002898 | \$670 | \$670 | to host Prairie Fire Children's Theatre to present "Tom Sawyer" |
| The West Central Area School District 2342 301 County Rd #2 Barrett, MN 56311 | 411806563 | \$1860 | \$1860 | to sponsor a two week artist residency with "Skilly and Duff" for grades 7-12 |
| Total | | | \$236,408 | |