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1 990-EZ

Short Form Return of Organization Exempt From Income Tax

2014

OMB No 1545-1150

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A	For the	2014 calend	ar year, or tax year beginning January 1 , 2014, and ending	Dec	ember 3	, 20 14	
В	Check if ap	pplicable	D Empl	oyer ider	tification number		
Ø	Address c	change		27-1283003			
	Name cha	- 1	Number and street (or P O box, if mail is not delivered to street address) Room/suite	E Telephone number			
_	Initial retur	m m∕terminated	PO Box 4428		231	6310930	
=	Amended		City or town, state or province, country, and ZIP or foreign postal code	F Grou	ıp Exem	ption	
		n pending	Traverse City, MI 49685	Nun	nber 🕨		
G /	Account	ting Method:		Check I	► ☐ rf t	he organization is not	
1.4	Nebsite	e: ► www.	livingmedia.org			h Schedule B	
J T	ax-exen	npt status (che	ock only one) — ✓ 501(c)(3) ☐ 501(c)() ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527	(Form 9	90, 990-	EZ, or 990-PF).	
K	Form of	organization:	☑ Corporation ☐ Trust ☐ Association ☐ Other			-	
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	al assets			
(Pa	rt II, col	umn (B) belov	v) are \$500,000 or more, file Form 990 instead of Form 990-EZ		▶ \$	118955.08	
Р	art l	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	instruc	ctions f	or Part I)	
		Check if	the organization used Schedule O to respond to any question in this Part	۱		🗹	
	1	Contribution	ons, gifts, grants, and similar amounts received		1	11775.08	
	2	Program s	ervice revenue including government fees and contracts		2	0	
	3	Membersh	ip dues and assessments		3	C	
	4	Investment	: income		4	0	
	5a	Gross amo	unt from sale of assets other than inventory 5a	0		·	
91	b	Less cost	or other basis and sales expenses	0			
	С	Gain or (los	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	0	
	6	Gaming an					
	a	Gross inc. \$15,000) .	ome from gaming (attach Schedule G if greater than	0			
Revenue	b	from fundr	me from fundraising events (not including \$\frac{1}{3} \frac{1}{2}	ns			
	c d		t expenses from gaming and fundraising events (add lines 6à and 6b and su	0 lbtract	6d	0	
	7a	Gross sale	s of inventory, less returns and allowances	1180			
	b	Less: cost	of goods sold	961			
	C	Gross prof	t or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	219	
	8		nue (describe in Schedule O)		8	0	
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	. •	9	117994.08	
<u>D</u>	10	Grants and	l sımılar amounts paid (list in Schedule O)		10	90101.57	
>	11	Benefits pa	aid to or for members		11	0	
Sesue	12		ther compensation, and employee benefits		12	10796	
2E	13		al fees and other payments to independent contractors		13	0	
Exp	14		/, rent, utilities, and maintenance		14	3120	
~W	15		ublications, postage, and shipping		15	569.26	
=	16		nses (describe in Schedule O)		16		
<u>-</u>	17	Total expe	nses. Add lines 10 through 16	▶	17	104586.83	
ي ح	18		deficit) for the year (Subtract line 17 from line 9)		18	13407.25	
~ B	19		or fund balances at beginning of year (from line 27, column (A)) (must agre				
à &		-	r figure reported on pnor year's return)	The state of the s	19	581.25	
Net Assets	20		ges in net assets or fund balances (explain in Schedule O)		20	0	
_	21	Net assets	or fund balances at end of year. Combine lines 18 through 20	. ▶	21	13988.25	

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No 10642i

Form **990-EZ** (2014)

Board President
Ellen Kamischke
Board Treasurer
Jessica Leavitt
Board Secretary
Lee Rainboth
Board Member
Terry Pollard
Board Member

Part	instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
	instructions for Fart vy Check if the organization used Schedule O to respond to any question in this	Pan	Yes	No
3 3	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	103	√
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		1
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		V
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
ь 38а	Did the organization file Form 1120-POL for this year?	37b		1
_	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		✓
ъ 39	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b Section 501(c)(7) organizations. Enter:	ł		
а	Initiation fees and capital contributions included on line 9]
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		✓
41	List the states with which a copy of this return is filed ▶			
42a		231 63)
h	Located at ► 1220 Reads Run, Traverse City,MI ZIP + 4 ►	496		
D	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)?	42b	Yes	No
	If "Yes," enter the name of the foreign country: ► Haiti	420	-	- -
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: Haiti	42c	✓	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. 1	▶ □
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
C	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		√
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b		 ✓

roill 95	0-62 (2)	014)								age 4
46	Did t	ne organization engage, directly or in	ndirectly in political o	ampaign activities	on beha	alf of or	ın opposit	tion [Yes	No
	to ca	ndidates for public office? If "Yes," of	omplete Schedule C						<u> </u>	1
Part \		Section 501(c)(3) organizations All section 501(c)(3) organization 50 and 51.	s must answer que				nplete th	e tables t	for lin	es
		Check if the organization used Scl	nedule O to respond	to any question i	n this P	art VI	· · ·	· · · ·	1	<u>, 니</u>
		he organization engage in lobbying If "Yes," complete Schedule C, Part		section 501(h) elec					Yes	No
	-	organization a school as described in						. 48	╁	1
		ne organization make any transfers to	•	_	nizatıor	ı?		. 49a		1
		s," was the related organization a se						. 49b		L
50		olete this table for the organization's								
	empl	oyees) who each received more than	\$100,000 of compe	nsation from the or	<u> </u>			e, enter "l	None."	
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contr		employee nd deferred	(e) Esturnat other cor		
					_					
							1			
f 51	Com	number of other employees paid over plete this table for the organization' ,000 of compensation from the orga	s five highest comp	ensated independe	nt cont	ractors	who each	n received	l more	thar
<u>-</u>	(a)	Name and business address of each independ	ent contractor	(b) Type of s	ervice		(c)) Compensat	ion	
					_					
					<u> </u>					
d	Total	number of other independent contra	ctors each receiving	over \$100,000 .	.▶					
52		the organization complete Schedu pleted Schedule A	le A? Note . All se	ection 501(c)(3) or	ganızatı	ons mu	ıst attach	na .► <mark>⊘</mark> Yes	. 🗆 1	No
		of perjury, I declare that I have examined this r d complete Declaration of preparer (other than						nowledge an	d belief,	nt 18
		Veller Kamen De	9			15	15/20	3/5-		
Sign Here						Date	1012	-/		
. 1010		Ellen Kamischke, Board Treasurer Type or print name and title								
Paid Prepa	arer	Print/Type preparer's name	Preparer's signature		Date		Check Self-emplo			
Use C		Frm's name ▶				Firm's	EIN ►			
Marrai	- 100	Firm's address >	chours character			Phone	e no	<u> </u>		
may th	e IHS	discuss this return with the preparer	snown above? See	instructions				► 📙 Yes	: ∐!	No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

2014

Open to Public Inspection
Employer identification number

		International						83003
	art I	Reason for Public Char						ons.
he 1 2 3 4	□ A d □ A s □ A l	ation is not a private founda church, convention of church school described in section nospital or a cooperative hos medical research organization spital's name, city, and state	nes, or association 170(b)(1)(A)(ii). In spital service orgonomerated in co	on of churches descr (Attach Schedule E.) ganization described i	ibed in se n section	ection 17 170(b)(1	O(b)(1)(A)(i). I)(A)(iii).	(iii). Enter the
5		organization operated for t		college or university	owned o	r operate	ed by a government	al unit described in
6 7	✓ An	ederal, state, or local govern organization that normally scribed in section 170(b)(1)	receives a subs	tantial part of its sup				n the general public
8	□A¢	community trust described in	n section 170(b)	(1)(A)(vi). (Complete	Part II.)			
9	red su	organization that normally eipts from activities related pport from gross investme quired by the organization at	I to its exempt nt income and	functions—subject to unrelated business	o certain taxable ii	exception ncome (l	ns, and (2) no more ess section 511 ta	than 331/3% of its
10	☐ An	organization organized and	operated exclus	sively to test for public	c safety.	See sect i	ion 509(a)(4).	
11	on	organization organized and or e or more publicly supported box in lines 11a through 11d	l organizations d	escribed in section 5	09(a)(1) o	r section	509(a)(2). See secti	i on 509(a)(3). Check
•	t	Type I. A supporting organization(s) broanization. You must com) the power to re	gularly appoint or ele				
i	c	Type II. A supporting organize control or management of the organization(s). You must control or management or must control or	e supporting org	anızatıon vested in th				
		Type III functionally integrates supported organization(s)						y integrated with,
4	t	Type III non-functionally intended that is not functionally integrated applications in the functions in the function in	ated. The organi	zation generally must	satisfy a	distrıbuti	on requirement and	• ' '
	• 🗆 C	Check this box if the organize unctionally integrated, or Tyl	ation received a	written determination	from the	IRS that	ıt ıs a Type I, Type I	i, Type iii
1	_	r the number of supported o						
9	g Prov	ide the following information	about the supp	orted organization(s).				
	(i) Nam	e of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
A)								
В)								
C)								
D)								
E)								
		-						

Part		ations Descr	ibed in Secti	ons 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(vi)
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if the	e organizatio	n failed to qua	alify under
Soot	Part III. If the organization fails to	quality unde	er the tests lis	ted below, pl	lease comple	te Part III.)	
	ion A. Public Support	(-) 0010	(h) 0044	(1) 0040	(1) 0040	()0044	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	41294.46	77085.60	110580.86	126751.64	118955.08	474667.64
2	Tax revenues levied for the	71254.40	77003.00	110500.00	120/01:04	110933.00	474007.04
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						***************************************
	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	41294.46	77085.60	110580.86	126751.64	118955.08	474667.64
5	The portion of total contributions by		İ				
	each person (other than a]	
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount			j			
_	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.	<u> </u>					474667.64
	on B. Total Support	(-) 0010	(h) 0044	4-1-0040	(D 0040	4.10044	- 2
7	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
8		41294.46	77085.60	110580.86	126751.64	118955.08	474667.64
•	Gross income from interest, dividends, payments received on securities loans,					ļ <u></u>	
	rents, royalties and income from similar						
	sources					24	0.4
9	Net income from unrelated business					.31	.31
•	activities, whether or not the business]		1	
	is regularly carned on			{			
10	Other income. Do not include gain or						
	loss from the sale of capital assets			Ì			
	(Explain in Part VI.)						
11	Total support. Add lines 7 through 10						474667.95
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for the	e organization	's first, second	d, third, fourth,	or fifth tax ye	ear as a section	1 501(c)(3)
	organization, check this box and stop her	ne	<u> </u>			<u>.</u>	▶ 🗸
	on C. Computation of Public Suppor					· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 2014 (line 6					14	%
15	Public support percentage from 2013 Sch				:	15	%
16a	331/2% support test—2014. If the organization gual	zauon did not d	check the box	on line 13, and	line 14 is 331/	3% or more, ch	· -
L	box and stop here. The organization qual						. ▶ 🛘
D	331/2% support test—2013. If the organicheck this box and stop here. The organic	zation did noi	cneck a box	on line 13 or	16a, and line	15 IS 33 1/3% (
47-				· · ·			. ▶ 🗓
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee	714. IT the orgai	nization did no	t check a box	on line 13, 16	a, or 16b, and i	ne 14 is
	Part VI how the organization meets the "fa	ets the lacts-a	ınu-cırcumstar metancas" tasi	t The organiza	ck this box an	a stop nere. E	xplain in
	organization			The Organiza	uon qualines i	as a publicly Su	
h	10%-facts-and-circumstances test—20	113 If the eres	 nization did ==	 			. P
b	15 is 10% or more, and if the organization	ion meets the	mzauon did No "facts-and-cir	r check a dox	on line 13, 16 test check th	a, 100, or 1/a, is how and at-	and line
	Explain in Part VI how the organization me	eets the "facts	-and-circumsta	ances" test. Th	ne organization	is box and st o	publicly
	supported organization					. 44400 as a	▶ □

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

	le A (Form 990 or 990-EZ) 2014				·, . · · - · -		Page 3
Part							
	(Complete only if you checked th						ier Part II.
Secti	If the organization fails to qualify on A. Public Support	under the te	sts listed bei	ow, piease co	ompiete Part	11.)	
	dar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees	(a) 2010	(0) 2011	(6) 2012	(4) 2013	(6) 2014	(i) rotai
•	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						·····
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge			İ			
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
ь	Amounts included on lines 2 and 3						
	received from other than disqualified				İ		
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						•
Canti	line 6.)			<u> </u>	1		
	on B. Total Support dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(-) 2012	(4) 2012	(a) 2014	(A Tatal
Calen 9	Amounts from line 6	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
10a	Gross income from interest, dividends,			 			
IVa	payments received on securities loans, rents,						
	royalties and income from similar sources .				ŀ		
b	Unrelated business taxable income (less	 					
-	section 511 taxes) from businesses				i		
	acquired after June 30, 1975	i					
c	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether			<u> </u>	l		
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets			:	·		
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)			<u> </u>	<u> </u>		
14	First five years. If the Form 990 is for th						
	organization, check this box and stop her			<u>· · · · · · · · · · · · · · · · · · · </u>	· · · · · ·	· · · · ·	>
	on C. Computation of Public Suppor			0		l 4E l	
15 16	Public support percentage for 2014 (line 8					15	<u>%</u>
16 Secti	Public support percentage from 2013 School D. Computation of Investment Inc			::::::		16	<u>%</u>
17	Investment income percentage for 2014 (I			v line 13 colu	mp (fl)	17	%
18	Investment income percentage for 2014 (investment income percentage from 2013			•		18	70 %
19a	331/s% support tests—2014. If the organi						
	17 is not more than 331/3%, check this box						
ь							

line 18 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part W		nizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		-
b c	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5b 5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10a		

Part.	V Supporting Organizations (continued)				
			Yes	No	
,11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			ļ	
	below, the governing body of a supported organization?	11a	ļ		
	A family member of a person described in (a) above?	11b		├ ─	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. on B. Type I Supporting Organizations	11c	L	<u> </u>	
0000	on b. Type i supporting organizations		Yes	No	
1	Did the directors, trustees, or membership of one or more supported organizations have the power to	Γ	103	140	
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	,	}	t	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			ŀ	
	controlled the organization's activities. If the organization had more than one supported organization,			Ì	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.				
	organizations and what conditions of restrictions, if any, applied to such powers during the tax year.	1		<u> </u>	
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	1			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			·	
Conti		2		<u> </u>	
Secu	on C. Type II Supporting Organizations		Yes	No	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	110	
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			ļ	
	or management of the supporting organization was vested in the same persons that controlled or managed				
	the supported organization(s).	1			
Section	on D. All Type III Supporting Organizations		_		
			Yes	No	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the				
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			İ	
	organization's governing documents in effect on the date of notification, to the extent not previously provided?				
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1	<u> </u>	╁	
_	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			İ	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		ļ	
3	By reason of the relationship described in (2), did the organization's supported organizations have a			 	
	significant voice in the organization's investment policies and in directing the use of the organization's		1		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		<u> </u>		
	supported organizations played in this regard.	3_	<u> </u>	<u> </u>	
Section	on E. Type III Functionally-Integrated Supporting Organizations				
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s):	
а	☐ The organization satisfied the Activities Test. Complete line 2 below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	struct	ıons).	
2	Activities Test. Answer (a) and (b) below.		Yes	No	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			\vdash	
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1	
	those supported organizations and explain how these activities directly furthered their exempt purposes,		•	ł	
	how the organization was responsive to those supported organizations, and how the organization determined			ļ	
	that these activities constituted substantially all of its activities.	2a	<u> </u>	Ļ	
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more		1		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these		1		
	activities but for the organization's involvement.	25	 	 	
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b	\vdash	 	
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or				
•	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		1	
ь	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			<u> </u>	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b			

Schedule A	(Form 990	or 990-EZ	2014
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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	gani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g tru	st on Nov. 20, 1970. See	instructions, All
other Type III non-functionally integrated supporting organizations must co			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	<u> </u>		
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	·····	
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	_	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	<u> </u>	
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional instructions).	ly-in	tegrated Type III support	ing organization (see

Part	Type III Non-Functionally Integrated 509(a)(a)	Supporting Organi	izations (continued)				
Secti	on D - Distributions			Current Year			
1_	Amounts paid to supported organizations to accomplish exempt purposes						
2	Amounts paid to perform activity that directly furthers ex-						
	organizations, in excess of income from activity						
3_	Administrative expenses paid to accomplish exempt purp	poses of supported orga	nızations				
4			· 				
5							
6_	Other distributions (describe in Part VI). See instructions	•					
	Total annual distributions. Add lines 1 through 6.						
8	Distributions to attentive supported organizations to which	ch the organization is res	sponsive				
	(provide details in Part VI). See instructions.						
9	Distributable amount for 2014 from Section C, line 6						
10	Line 8 amount divided by Line 9 amount		<u></u>				
Se	oction E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014			
	Distributable amount for 2014 from Section C, line 6						
2	Underdistributions, if any, for years prior to 2014						
	(reasonable cause required-see instructions)						
3	Excess distributions carryover, if any, to 2014:						
a							
<u> </u>							
<u>c</u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
<u>d</u>	5 0010	` -					
<u>e</u>	From 2013						
f	Total of lines 3a through e	<u> </u>					
g	Applied to underdistributions of prior years						
<u>h_</u>	Applied to 2014 distributable amount						
_ <u>i</u>	Carryover from 2009 not applied (see instructions)						
بـ	Remainder. Subtract lines 3g, 3h, and 3i from 3f.						
4	Distributions for 2014 from Section D, line 7: \$						
	- · · · · · · · · · · · · · · · · · · ·						
<u>a</u> b	Applied to underdistributions of prior years Applied to 2014 distributable amount						
<u>_</u>	Remainder, Subtract lines 4a and 4b from 4.						
_ _	Remaining underdistributions for years prior to 2014, if	 					
•	any. Subtract lines 3g and 4a from line 2 (if amount						
	greater than zero, see instructions).						
6	Remaining underdistributions for 2014. Subtract lines 3h		· - · · · · · · · · · · · · · · · · · ·				
_	and 4b from line 1 (if amount greater than zero, see						
	instructions).						
7	Excess distributions carryover to 2015. Add lines 3		·				
	and 4c.						
8	Breakdown of line 7:		······································				
а							
b			The second day of the second				
С							
d	Excess from 2013						
0	Excess from 2014						

Part VI	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.)
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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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name of the organization	Employer identification number		
Living Media International	27-1283003		
Part III, Line 31			
Other program activities include support for a local agricultural and environmental organization (7150), support for a local well (7220),			
support for two Kids Clubs that teach art, music, writing and citizenship to over 160 children weekly (2300), providing a guesthouse for			
Support for the vide blade that test and master, writing and discensify to over 100 cliniaren weekly (2	500), providing a guestilouse for		
volunteers in the community (2560), and partnerships with local groups including soccer tournaments	and religious celebrations (963.57)		
Part IV			
Brent Olson, Board Member			
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