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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

► Attach to Form 990 or Form 990-E2.

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

20**14**

Open to Public Inspection

Name of the organization					Employer identification	number		
TRAPPER CREEK COMMUNITY SERVICE		,	 			18058		
Part I Reason for Public Ch					 	ns.		
The organization is not a private found		•	-	-	•			
	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
hospital's name, city, and sta	ate:							
	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 gove 7 An organization that normalidescribed in section 170(b){ 	y receives a subs	stantial part of its sup				n the general public		
8 A community trust described	in section 170[b)[1][A][vi]. (Complete	Part II.)					
9 An organization that normall receipts from activities relat support from gross investre acquired by the organization	ed to its exempt ent income and	functions—subject to unrelated business	o certain e taxable in	exceptio come (l	ns, and (2) no more ess section 511 ta	than 331/3% of its		
 10 An organization organized are 11 An organization organized and one or more publicly support the box in lines 11a through 1 	d operated exclusi ed organizations of 1d that describes	ively for the benefit of, described in section 5 the type of supporting	to perform 09(a)(1) or organizati	n the fun section on and o	ctions of, or to carry 509(a)(2). See secti complete lines 11e, 1	ion 509(a)(3). Check 1f, and 11g.		
a Type I. A supporting organ the supported organization organization. You must co	(s) the power to re	egularly appoint or ele						
control or management of	b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.							
c Type III functionally integ its supported organization(y integrated with,		
d Type III non-functionally integ that is not functionally integ requirement (see instruction	rated. The organi	ization generally must	satisfy a c	listributi	on requirement and			
e Check this box if the organ functionally integrated, or 1	ization received a	written determination	from the	IRS that	it is a Type I, Type I	I, Type III		
f Enter the number of supported	organizations .							
g Provide the following informati	on about the supp	ported organization(s)	<u>.</u>					
(i) Name of supported organization	Ø∄ EIN	(Fil) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(fir) is the organization listed in your governing document?		(A) Amount of monotary support (see instructions)	(vi) Amount of other support (see instructions)		
	1	}	Yes	No				
(A)					AND PARTY OF THE P	MCSLE		
(B)	 							
(C)				 -				
(D)								
(E)								
Total	ı	1	1		1	l .		

Schedu	sle A (Form 990 or 990-EZ) 2014						Pa	ge 2
Par	Support Schedule for Organiza (Complete only if you checked the Part III. If the organization fails to	e box on lin	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	-	r
Sect	ion A. Public Support	quality und	<u> </u>	,, p	iouse compie	201 (22111.)		
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Tota	1
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6_	Public support. Subtract line 5 from line 4.							
	ion B. Total Support							
Caler 7	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2010	(ъ) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total	<u> </u>
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							-
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10				<u> </u>			
12	Gross receipts from related activities, etc.	•	•			12		
13	First five years. If the Form 990 is for the organization, check this box and stop her					ear as a sectio	n 501(c)(3)	
Sect	ion C. Computation of Public Suppor	t Percentag	e					
14	Public support percentage for 2014 (line 6					14		%
15	Public support percentage from 2013 Sch					15		%
16a								
b	box and stop here. The organization qualifies as a publicly supported organization							
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part VI how the organization meets the "fi	114. If the organized the "facts-acts-and-circu	anization did no and-circumsta umstances" tes	ot check a box nces" test, che	on line 13, 16 ock this box ar	nd stop here. E	Explain in	
b	10%-facts-and-circumstances test –20 15 is 10% or more, and if the organizat	113. If the org						
	Explain in Part VI how the organization me supported organization	eets the "fact	s-and-circums	tances" test. T	he organizatio	n qualifies as a	publicly	

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.)

~	If the organization fails to qualify	under the tes	sis listed beig	w, piease co	mpiete Part i	1.)	
	ion A. Public Support						
	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 received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities	452	3226	57700	51403	65474	178255
3	furnished in any activity that is related to the organization's tax-exempt purpose. Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	452	3226	57700	51403	65474	178255
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						
8	Add lines 7a and 7b				- 1		178255
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	452	3226	57700	51403	65474	178255
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	9	7	19	16	21	72
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	9	7	19	16	21	72
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					-	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,	7435	9123	6555	7668	7408	38189
14	and 12.)						
Section	on C. Computation of Public Suppor					···	
15	Public support percentage for 2014 (line 8			3, column (f))		15	82 %
16	Public support percentage from 2013 Sch		-			16	%
Section	on D. Computation of Investment Inc						
17	Investment income percentage for 2014 (I	ine 10c, colum	n (f) divided by	line 13, colum	ın (f))	17	0 %
18							
19a							
ь	331/3% support tests-2013. If the organization	ation did not ch	ieck a box on l	ine 14 or line 1	9a, and line 16	is more than 3	31/3%, and
	line 18 is not more than 331/3%, check this b	· · · · · · · · · · · · · · · · · · ·	_		-		
20	Private foundation. If the organization did	d not check a b	xox on line 14,	19a, or 19b, cl	heck this box a	and see instruc	tions 🕨 🔲

Part IV Supporting Organizations

(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.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete P	art V	.)	
Secti	ion 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		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
ь	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		
c	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		
	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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	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.	9ь		
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		
	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	1		

determine whether the organization had excess business holdings.)

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.)					
TRAPPER C	CREEK COMMUNITY SEI	RVICES ASSOC INC	92-0118058			
PART III, LII	NE 12					
YEAR	CEMETERY PLOTS	FACILITY RENTAL	GAMING	TOTAL		
(a) 2010	500	175	6760	7435		
(b) 2011	1000	200	7923	9123		
(c) 2012	-0-	275	6280	6555		
(d) 2013	-0-	175	7493	7668		
(e) 2014	250	415	6743	7408		
(f) TOTAL =	38189					
						
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