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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public

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.

Inter	nal Reven	ue Service	► Information about Form 990 and its instructions is at www.irs.gov/form990).	Inspecti	on	
A	For the	2015 cale	ndar year, or tax year beginning , 2015, and ending		, 20		
В	Check if	applicable	C Name of organization Lake Hamilton FFA Alumni	D Employ	er identification nu	mber	
☑	Address	change	Doing business as		71-0739683		
	Name ch	nange	Number and street (or P.O box if mail is not delivered to street address) Room/suite	E Telephor	ne number		
$\bar{\sqcap}$	Initial ret	-	324 Songer Lane	501.318.3556			
ī.		m/terminated	City or town, state or province, country, and ZIP or foreign postal code				
\Box	Amende		Pearcy AR 71964	G Gross re	eceipts \$		
ī					subordinates? Yes	√ No	
_	тфрисси	···· , ···· · · · · · · · · · · · · · ·	<u> </u>		s included? Yes		
_	Tay avai	mpt status			list (see instruction		
' -	Website		H(c) Group			•	
<u>K</u>		organization			of legal domicile	AR	
Ď	art I	Summ		1 W State	or legal domicile	AK_	
	1	· · · · · · · · · · · · · · · · · · ·	escribe the organization's mission or most significant activities: Lake Hamilton FFA	Alumni i	c a parent toach		
m	'	-					
Activities & Governance			ion who's primary mission is to support Agriculture Education at the Lake Hamilton Sch	oois. Ag	riculture Educat	ion	
E	_		incur additional education cost that the organizations helps with.	050/ -6	** * *-		
Š	2		is box ► if the organization discontinued its operations or disposed of more than		its net assets.		
Ğ	3		of voting members of the governing body (Part VI, line 1a)	3		25	
α 5	4		of independent voting members of the governing body (Part VI, line 1b)	4	 	21	
쁥	5		nber of individuals employed in calendar year 2015 (Part V, line 2a)	5	,	0	
훓	6		nber of volunteers (estimate if necessary)	6		25	
ď	7a		elated business revenue from Part VIII, column (C); line 12VED	7a		0	
	b	Net unrel	ated business taxable income from Form 990-T, line 34	7b		0	
			tions and grants (Part VIII, line 1b) G MAY 2 4 2016	ar	Current Ye	ar	
<u>o</u>	8	Contribut	tions and grants (Part VIII, line 1h) 🙀 .MAY. 2 🛦 2015 . 🔃	7214		7330	
Ĕ	9		service revenue (Part VIII, line 2g)	33165		49164	
Revenue	10	Investme	nt income (Part VIII, column (A), lines 3, 4, and 7d)				
Œ	11	Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				
	12	Total reve	enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	40379		56494	
	13	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1-3)	2172		2434	
	14	Benefits	paid to or for members (Part IX, column (A), line 4)				
ø	15	Salanes,	other compensation, employee benefits (Part IX, column (A), lines 5–10)				
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)				
ē	b	Total fund	draising expenses (Part IX, column (D), line 25) ▶				
ũ	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	38099		56069	
	18	Total exp	penses. Add lines 13-17 (must equal Part IX, column (A), line 25)	40271		58503	
	19	Revenue	less expenses. Subtract line 18 from line 12	111		-2009	
- S			Beginning of Cu	rrent Year	End of Yea	ar	
ets c	20	Total ass	ets (Part X, line 16)	11545		9536	
Ass	21		ulities (Part X, line 26)	0		0	
Net Assets o Fund Balance	22		ts or fund balances. Subtract line 21 from line 20	11545		9536	
	art II	Signat	ture Block			-	
			ry, I declare that I have examined this return, including accompanying schedules and statements, and to the	he best of r	ny knowledge and	belief, it is	
tru	e, correc	t, and compl	Declaration of prepared (other than officer) is based on all information of which preparer has any knowle	edge.			
_			trankling soller. Secretary Treasurer				
Sig	n n	Sign	ature of officer Date	te	-//		
He			PANKLIN BOLTON, SECRETARY/TREASURER		5/16/20	16	
		Type	or print name and title				
_			pe preparer's name Preparer's signature Date	Charle	PTIN		
Pa				Check self-emp			
	epare	1	arne ► Firm	n's EIN ▶		·	
Us	e On			ne no.			
Ma	v the IF		s this return with the preparer shown above? (see instructions)	110.	Tes	No	

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2015)

Form 99	90 (2015)	Page Z
Part		
	Check if Schedule O contains a response or note to any line in this Part III	<u>. L</u>
1	Briefly describe the organization's mission:	
	Lake Hamilton FFA Alumni is a parent teacher organization who's primary mission is to support Agriculture Education at the	
	Lake Hamilton Schools. Agriculture Education students incur additional education cost that the organizations helps with. Typical expense where assistance is given is 1), costs associated with leadership contest, workshops, conferences, 2), cost of	
	and showing animals at county and state fairs (projects are for school credit, but none of the cost are covered).	idisiliy
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	 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?	 ✓ 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 and the service accomplishments for each of its three largest program services, as measured and the service accomplishments for each of its three largest program services, as measured and the service accomplishments for each of its three largest program services.	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to the total expenses, and revenue, if any, for each program service reported.	others,
	the total expenses, and revenue, it any, for each program service reported.	
40	(Code:) (Expenses \$ 56977 including grants of \$ 2434) (Revenue \$ 49164	
4a	(Code:) (Expenses \$ 56977 including grants of \$ 2434) (Revenue \$ 49164) Assisted students of Lake Hamilton FFA Chapter to attend Leadership contest, and show animals at county and state fairs.	•
		
4b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶	

Part I	V 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	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		•	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
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	4		1
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	5		√
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	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		✓
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	9		√
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	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		
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	11b		1
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	11c		1
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	11d		1
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
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	11f		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
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	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a		14a		✓
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	14b		1
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	15		1
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.	16		1
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)	17		1
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	18		1
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	19		1

Part	Cnecklist of Required Schedules (continued)			
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	000	Yes	No
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		✓
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		√
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		1
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		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		1
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		√
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 "Yes," complete Schedule L, Part II	26		√
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		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		√
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	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		1
31	conservation contributions? If "Yes," complete Schedule M	30		✓
32	Part I	31		✓
33	complete Schedule N, Part II	32		✓
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
35a	or IV, and Part V, line 1	34 35a		1
Ь	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	35b		<u>, , , , , , , , , , , , , , , , , , , </u>
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	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI </i>	37		1
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.	38		

Form **990** (2015)

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		• •	
_		<u>.</u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			İ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		,	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c	✓	
	Obstance to find for the color decrease and for with the first the color and high the col			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		ł
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
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		✓
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			
F-	(FBAR).			
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		√
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		1
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).			
а	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		✓
b b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
·	required to file Form 8282?	7c		1
đ	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		✓
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. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?	9a		/
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		-
10	Section 501(c)(7) organizations. Enter:			-
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders]
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)]
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			ĺ
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a	$\vdash \dashv$	
а	Note. See the instructions for additional information the organization must report on Schedule O.	.56	<u> </u>	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	<u> </u>		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
h	If "Vee." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14h		1

Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI		suuci.	ioris.
Secti	on A. Governing Body and Management	···	•	<u>. </u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 25			
	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.			
h				
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 21 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	ł		
-	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			<u> </u>
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		✓
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		✓
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?			1
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7a		\ <u> </u>
U	stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			<u> </u>
	the year by the following:			
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	ļ
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		1	
Sooti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	9	ode l	1 4
Secu	on B. Policies (This Section B requests information about policies not required by the internal never	ue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		1
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	✓	<u> </u>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-		
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b		<u> </u>
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
•	describe in Schedule O how this was done	12c	;	
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written document retention and destruction policy?	14		
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?		<u> </u>	
a	The organization's CEO, Executive Director, or top management official	15a		<u> </u>
b	Other officers or key employees of the organization	15b		
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		✓
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			
<u> </u>	organization's exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
Secti 17	on C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶			
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 int	erest	polic	y, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	: >	
	Frank Bolton, 324 Songer Ln, Pearcy AR 71964, 501.318.3556			

P	ane	7
г	ayo	

Part VII	Compensation of Officers, Directors,	, Trustees, Key Employees, Highest	Compensated Employees, and
	Independent Contractors		

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 no	r any relate	d org	aniz			ompe	nsa	ted any curren	t officer, director	, or trustee.	
(A) Name and Title	(B) Average hours per week (list any hours for	box, office	unles er and	Pos neck ss pe	sstion k more than one ereson is both an director/trustee) K ey employses			(D) Reportable compensation from the	(E) Reportable compensation from related organizations	other compensation	
	related organizations below dotted line)		Institutional trustee	ěř	Key employee	Highest compensated employee	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations	
(1) Roger Hutter											
President	2		<u> </u>	✓	ļ	ļ		0	0		_0
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(19) Name and trite Average Name and trite Name a	Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yee:	s, aı	nd F	lighe	st C	ompensated E	mployees (contin	nued)		
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Total number of individuals (notuding but not limited to those listed above) who received more than \$100,000 of compensation from the organization of the organizat			(do not check more than on box, unless person is both a						one	1	''			
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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) (B) (C) Compensation NONE 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	•												1	1
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Form **990** (2015)

Part	VIII	Statement of Revenue		-		· · ·	
		Check if Schedule O contains a response or no					<u> </u>
			Τ.	(A) otal revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
ats st	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
A A	С		/330				
를 를	d	Related organizations 1d					
ns,	е	Government grants (contributions) 1e		Ī			
atio	f	All other contributions, gifts, grants, and similar amounts not included above					
혈	_	<u> </u>		į			
ם פו	9	Noncash contributions included in lines 1a-1f: \$		7220			
	h	Total. Add lines 1a–1f	xde	7330			·
Program Service Revenue	2a	Garland Cnty Fair Jr Livestock show		49164			
Re	b			43104			
9	C					· · · · ·	
erv	d						
E S	е						
gra	f	All other program service revenue .					
Pro	g	Total Moo Ed E	>	49164			
	3	Investment income (including dividends, intere					
		and outer comment and outer	•				
	4	Income from investment of tax-exempt bond proceeds	•				
	5	Royalties	•				
	_	<u> </u>		Ĭ			
	6a	Gross rents					
	b	Less: rental expenses Rental income or (loss)		İ			
	C d	Net rental income or (loss)					
	7a	Gross amount from sales of (i) Securities (ii) Other					·
	'"	assets other than inventory					
	ь	Less: cost or other basis	\neg				
		and sales expenses .	Ì	ļ			
	С	Gain or (loss)					
	d	Net gain or (loss)	>				
ø							
Ĭ	8a	Gross income from fundraising events (not including \$		ľ			
e e		of contributions reported on line 1c).	1	İ			
Œ	ļ	See Part IV, line 18		ł			
Other Revenu	ь	Less: direct expenses b					
O			$\overline{\blacktriangleright}$				
		Gross income from gaming activities.				,	
	1	See Part IV, line 19 a	Ì	İ			
	b	Less: direct expenses b					ļ
	С	Net income or (loss) from gaming activities	>		·····		
	10a			1			
		returns and allowances a					
	b	Less: cost of goods sold b	_			1	
	<u>c</u>	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Co			·	<u> </u>	
		Miscellaneous Revenue Business Co	Jule				}
	11a						
	b						
	d	All other revenue		· · · · · · · · · · · · · · · · · · ·			
	e	Total. Add lines 11a–11d					
	12	Total revenue. See instructions.		56494			

Fonii 990 (20)	ю)	Page
Part IX	Statement of Functional Expenses	
Section 50	1(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							
	t include amounts reported on lines 6b, 7b, , 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 domestic organizations						
	and domestic governments. See Part IV, line 21						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	2434	2434				
3	Grants and other assistance to foreign						
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16						
4	Benefits paid to or for members						
5	Compensation of current officers, directors, trustees, and key employees						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)						
7	Other salaries and wages						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)						
9	Other employee benefits						
10	Payroll taxes						
11 a	Fees for services (non-employees): Management						
b	Legal						
C	Accounting						
d	Lobbying						
е	Professional fundraising services. See Part IV, line 17		··· -·· ·· · · · · · · · · · · · · · ·				
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column						
g	(A) amount, list line 11g expenses on Schedule O.)						
12	Advertising and promotion						
13	Office expenses						
14	Information technology						
15	Royalties						
16	Occupancy			···· · · · · · · · · · · · · · · · · ·			
17	Travel	·					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				· · · · · · · · · · · · · · · · · · ·		
19	Conferences, conventions, and meetings .				- 		
20	Interest						
21 22	Depreciation, depletion, and amortization	1526		1526			
23	Insurance	1320	·-·· ~-	1920			
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.)						
а	Leadership contest costs	4475	4475				
b	Garland County Fair - Junior Livestock show	49164	49164				
C							
d							
ө	All other expenses	904	904				
25	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	58503	56977	1526			
26	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here						
	following SOP 98-2 (ASC 958-720)				5 000 mars		

۲	art_X	Balance Sneet					
	•	Check if Schedule O contains a response or	note to any line in the	his Part	X	<u></u>	<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			6206	1	5723
	2	Savings and temporary cash investments		. Γ		2	
	3	Pledges and grants receivable, net				3	
	4					4	
	5	Loans and other receivables from current and t		_			
S		trustees, key employees, and highest co			<u>.</u> !	5	
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoning organizations of section 501(c)(9) volun organizations (see instructions). Complete Part II of Sche	ons (as defined under se nd contributing employers tary employees' benefi	and clary		6	
Assets	7	Notes and loans receivable, net			_	7	
AS	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		. $ extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle extstyle ext$		9	
	10a	Land, buildings, and equipment: cost or	! !				
		other basis. Complete Part VI of Schedule D	10a	6500			
	ь	Less: accumulated depreciation	10b	2687	5339	10c	3813
	11	•				11	
	12	Investments—other securities. See Part IV, line	11			12	
	13	Investments-program-related. See Part IV, line				13	
	14	Intangible assets		_		14	
	15	Other assets. See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equa			11545	16	9536
	17	Accounts payable and accrued expenses				17	
	18	Grants payable		. Γ		18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities	_		20		
	21	Escrow or custodial account liability. Complete I	. \vdash		21		
Ś	22	Loans and other payables to current and for		_			
Liabilities		trustees, key employees, highest compen					
Ē		disqualified persons. Complete Part II of Schedu				22	
تّ	23	Secured mortgages and notes payable to unrela			23		
	24	Unsecured notes and loans payable to unrelated	.		24		
	25	Other liabilities (including federal income tax,	third				
		parties, and other liabilities not included on lines				1	
		of Schedule D		.		25	
	26	Total liabilities. Add lines 17 through 25		. [0	26	0
		Organizations that follow SFAS 117 (ASC 958)), check here ▶ 📋	and			
ě	}	complete lines 27 through 29, and lines 33 and	d 34.	j		J	
Ē	27	Unrestricted net assets				27	
Ba	28	Temporanly restricted net assets		· [28	
ᅙ	29	Permanently restricted net assets				29	
Net Assets or Fund Balances	[Organizations that do not follow SFAS 117 (ASC 95 complete lines 30 through 34.	58), check here ► 🗌	and			
ts (30	Capital stock or trust principal, or current funds				30	
38e	31	Paid-in or capital surplus, or land, building, or ed				31	
Ā	32	Retained earnings, endowment, accumulated in	come, or other funds	. [32	
<u>K</u>	33	Total net assets or fund balances			11545	33	9536
_	34	Total liabilities and net assets/fund balances .	<u>. </u>	11545		9536	
							Form 990 (2015)

		Pa	ge 12
•			
			56494
_			<u>58503</u>
_			-2009
_			<u>11545</u>
_			
			9536
_		Yes	No
	2a		1
	2 b		√

Form 99	90 (2015)			Pa	age 12	
Part	XI Reconciliation of Net Assets					
•	Check 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			<u>56494</u>	
2	Total expenses (must equal Part IX, column (A), line 25)					
3						
4						
5	[*** <u>*</u>					
6						
7						
8	Prior penod 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			9536	
Part	XII Financial Statements and Reporting					
	Check 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: ☐ Cash ☐ Accrual ☐ Other					
	If the organization changed its method of accounting from a prior year or checked "Other,"	explain in				
	Schedule O.				_	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant	?	2a		✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were co	mpiled or				
	reviewed on a separate basis, consolidated basis, or both:					
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Ĺ	✓	
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	lited on a				
	separate basis, consolidated basis, or both:				1	
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		į			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversight	1			
	of the audit, review, or compilation of its financial statements and selection of an independent according		2c	<u> </u>	<u> </u>	
	If the organization changed either its oversight process or selection process during the tax year,	explain ın			ĺ	
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as s	et forth in]		
	the Single Audit Act and OMB Circular A-133?		3a			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not ur	dergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo sucl	audits.	3b			
			For	ո 99 ((2015)	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on 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.

0MB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number Lake Hamilton FFA Alumni Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . Aggregate value at end of year 4 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? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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: 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: Assets included in Form 990. Part X

Page 2

Part	Organizations Maintaining	Collections of A	Art, His	torical T	reasures	or Oth	er Similar A	Assets (continued)
3 ,	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner recoi	ds, chec	k any of th	e follow	ing that are a	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchang	je progra	ams	
b	☐ Scholarly research							
С	☐ Preservation for future generations	•						
4	Provide a description of the organizat XIII.	ion's collections a	nd expla	in how t	ney further	the orga	anization's ex	empt purpose in Part
5	During the year, did the organization							
0 - 4	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?							
Part	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form							
	990, Part X, line 21.	answered res	On FO	III 990, F	art IV, iiile	e 9, Or 10	eponeo an a	amount on Form
1a	Is the organization an agent, trustee,	custodian or othe	er interm	odiany fo	or contribut	ione or	other assets	not
ıa	included on Form 990, Part X?							· Tyes TNo
b	If "Yes," explain the arrangement in Pa							· _ 163 _ 140
	ii res, explain the arangement ii re	art Am and comple	te the lo	nowing te	ibie.		1	Amount
С	Beginning balance					1c		
d	Additions during the year					1d	 	
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amoun			 21 for a	· · · · ·		account liabili	ity? T Yes T No.
	If "Yes," explain the arrangement in Pa							=
Par		2171111 0110011 11010		(piailatio	11100 00011	provido	<u> </u>	· · · · · · · · · · · · · · · · · · ·
	Complete if the organization	answered "Yes"	on For	m 990. F	Part IV. line	e 10.		
	Complete it the organization	(a) Current year		or year	(c) Two year		(d) Three years ba	ack (e) Four years back
1a	Beginning of year balance							
b	Contributions							
c	Net investment earnings, gains, and losses							
d	Grants or scholarships							
e	Other expenditures for facilities and							
•	programs					Ì		
f	Administrative expenses	-	-					· · · · · · · · · · · · · · · · · · ·
	End of year balance							
9 2	Provide the estimated percentage of the	he current vear en	d halanc	e (line 1a	column (a)) held a	e.	
a	Board designated or quasi-endowmer		%	c (iii.c ig	, 0014.1111 (4	y, 110.G G	.	
b	Permanent endowment	%	- / 0					
c	Temporarily restricted endowment ▶	%						
•	The percentages on lines 2a, 2b, and 2		00%					
3a	Are there endowment funds not in the			zation tha	at are held	and adn	ninistered for	the
	organization by:	,	· .					Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
ь	If "Yes" on line 3a(ii), are the related or							. 3b
4	Describe in Part XIII the intended uses							
Part								
النتجيب	Complete if the organization		on For	m 990. F	Part IV. line	e 11a. S	See Form 99	0, Part X, line 10.
	Description of property	(a) Cost or oth		r	r other basis		ccumulated	(d) Book value
	=	(investme			ther)		preciation	
1a	Land							
b	Buildings							
C	Leasehold improvements							
d	Equipment				6500		2687	3813
е	Other							
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99	0, Part	K, column	(B), line 10)c.)	▶	