Form 990

Form **990**Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

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.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2018 Open to Public Inspection

OMB No 1545-0047

<u>A</u>	For the	2018 calendar year, or tax year beginning $07/01/18$ , and ending $06/30/18$								
В	Check if app	plicable C Name of organization		D Employer	dentification number					
	Address ch	ange SPRING LAKE PARK LIONS CLUB								
$\Box$	Name chan	Doing business as 41-1340927								
$\exists$		Number and street (or P O box ir main is not delivered to street address)	Room/suite	E Telephone	number 784-9179					
$\square$	Initial return		<del></del>	703-	104-3113					
Ш	Final return terminated				10 000 010					
$\Box$	Amended r	SPRING LAKE PARK MN 55432		G Gross rece	eipts 19,302,243					
H	_	P Name and address of principal differ	H(a) Is this a grou	n return for su	ubordinates? Yes X No					
Ш	Application				<u> </u>					
		8433 CENTER DRIVE	H(b) Are all subo		<del></del>					
		SPRING LAKE PARK MN 55432	If "No," a	attach a list	(see instructions)					
1	Tax-exem	pt status 501(c)(3) <b>X</b> 501(c) ( <b>4</b> ) <b>◄</b> (insert no ) 4947(a)(1) or <b>\$</b> 27 }								
J_	Website	► E-CLUBHOUSE.ORG/SITES/SPRINGLAKEPARK \(\text{\tin\text{\texi\text{\text{\text{\text{\text{\text{\texit{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\text{\t	H(c) Group exem	ption numbe	r 🕨					
ĸ	Form of or	ganization X Corporation Trust Association Other ▶ L	ear of formation 19	956	M State of legal domicile MN					
*	art I	Summary \								
		nefly describe the organization's mission or most significant activities:								
4		TO HELP THE COMMUNITY AND PROMOTE GOOD CITIZENSHIP.								
ဋ										
'n										
Activities & Governance		N	=0/ =£.4= ==4 ===	-4-						
တိ	2 0	theck this box  if the organization discontinued its operations or disposed of more than 25	o% of its net asse	1 1	0					
∞ಶ	3 N	lumber of voting members of the governing body (Part VI, line 1a)		3	8					
ies	4 N	lumber of independent voting members of the governing body (Part VI, line 1b)		4	8					
Ξ	5 T	otal number of individuals employed in calendar year 2018 (Part V, line 2a)		5	51					
Ş	6 T	otal number of volunteers (estimate if necessary)		6	68					
_		otal unrelated business revenue from Part VIII, column (C), line 12		7a	42,549					
	b N	let unrelated business taxable income from Form 990-T, June 38		7b	0					
			Prior Year		Current Year					
ø	, 8 C	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)	5	,880	5,396					
5	9 P	Program service revenue (Part VIII, line 2g) $\sqrt{\frac{2}{3}}$			0					
Revenue	10 lr	envestment income (Part VIII, column (A), lines 3, 4, and $M = M = M = M = M = M = M = M = M = M $								
~	11 0	Other revenue (Part VIII, column (A), lines 5, 4, anom 6) 1/4 p 2 2020	74	,637	82,486					
		otal revenue – add lines 8 through 11 (must equal Part VIII requirm (A), line 12)	80	,517	88,462					
		See to and similar amounts and (Bot IV column (A) Inch 32 DEA)	2	,674	3,486					
		Benefits paid to or for members (Part IX, column (A), lines 4)			0					
co.	4	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		Î						
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)			0					
Den	h T	otal fundraising expenses (Part IX, column (D), line 25) ▶ 0	·	1080 H	<del>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>					
X	47 6	(-),	1 9	,418	9,601					
	'' \	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		,092	13,087					
		otal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		, 425	75,375					
_		Revenue less expenses Subtract line 18 from line 12	Beginning of Curr		End of Year					
8	ᇎᇲ	otal assets (Part X, line 16)		930	529,295					
Net Assets or	iii	· · · · · · · · · · · · · · · · · · ·		243	233					
let A	틸셨	otal liabilities (Part X, line 26)	A E 2	687	529,062					
		let assets or fund balances Subtract line 21 from line 20	#33	,,007	323,002					
	Part II.	Signature Block								
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and statem			lowledge and belief, it is					
	rue, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer	nas any knowledge	ः <u> </u>	1211/2					
		- Follow		1	129/20					
Si	ign	Signature of officer		Date	,					
H	ere	PETE YELLE 1ST V	ICE PRES	IDENT	<u> </u>					
)_		Type or print name and title								
		Print/Type preparer's name Preparer's signature	Date	Check	If PTIN					
Pa	iid	JOSHUA R SCHROEDER Solut Solut	2/20/2	self-em	nployed P00983746					
Pr	eparer	Firm's name MAIR & ASSOCIATES PLLP	T <sub>F</sub> ,	rm's EIN 🚩	41-0941592					
	se Only	3570 LEXINGTON AVE N STE 300	1"							
		CATAM DAIL AND FE126 0050		"	651-482-1698					
<u> </u>	nu tha ID	S discuss this return with the preparer shown above? (see instructions)	<u>  Pi</u>	none no						
_		ork Reduction Act Notice, see the separate instructions.			X Yes No Form 990 (2018)					
DA		יטוא הפטטטנוטוו אנג ווטונים, ספס נווס ספףמומנט וווסניטנוניווס.			rom 330 (2018)					

rm 990 (2018) SPRING LAKE PARK	<del></del>	1340927	Page <b>2</b>
Part III Statement of Program Servic	•	Part III	X
I Briefly describe the organization's mission:	a response or note to any line in this	r ai l III	[41]
SEE SCHEDULE O			
2 Did the organization undertake any significant pi	rogram services during the year which were r	not listed on the	- <del></del>
prior Form 990 or 990-EZ?			Yes X No
If "Yes," describe these new services on Schedu		ornara.	
3 Did the organization cease conducting, or make services?	significant changes in now it conducts, any p	nogram	Yes X No
If "Yes," describe these changes on Schedule O			
4 Describe the organization's program service acc	,	•	
expenses Section 501(c)(3) and 501(c)(4) organ the total expenses, and revenue, if any, for each		grants and allocations to others,	
the total expenses, and revenue, it ally, for each	r program service reported		
4a (Code ) (Expenses \$	including grants of \$	) (Revenue \$	)
CONVENTIONS AND MEETING F			
MEMBERS TO BETTER SERVE 1 EVENTS.	THE COMMUNITY THROUGH '	THE CLUB'S ACTIVITI	ES AND
EAEMIS.			
	·	•	
•	•		
4b (Code. ) (Expenses \$	including grants of \$	) (Revenue \$	
THE ORGANIZATION PARTICIES YEAR: WORKING AT THE LION FOR SLP CHARITABLE GAMBLE HEARING & SERVICE DOGS OF SALVATION ARMY BELL RINGS OF COMPETITION, EYEGLASS IN THE PARK & ETC.	NS INT'L CONVENTION, EI ING OPERATION, GARAGE : F MN HEEL & WHEEL, FEE ING, CHRISTMAS DISTRIB	MPLOYEE APPRECIATIO SALES, PANCAKE BREA D MY STARVING CHILD UTION FOOD BASKETS	N PICNIC KFASTS, REN, & TOYS,
4c (Code ) (Expenses \$	including grants of \$	) (Revenue \$	
N/A		•	
•			
4d Other program services (Describe in Schedule 6 (Expenses \$ 10,706 include)		(Revenue \$	1
4e Total program service expenses ▶	10,706	Triesando A	
4A	* .		Form <b>990</b> (2018

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#### **Checklist of Required Schedules** Part IV

- Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?
- Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 election in effect during the tax year? If "Yes," complete Schedule C, Part II
- 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
- 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
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 complete Schedule D, Part III
- 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
- 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
- If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable
  - Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI
  - 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
  - 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
  - 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
  - Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X
  - Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII
  - 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
- Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13
- Did the organization maintain an office, employees, or agents outside of the United States?
- 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
- 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
- Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV
- Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)
- Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 If "Yes," complete Schedule G, Part III
- 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H
  - b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?
- 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 19 If "Yes," complete Schedule I, Parts I and II

1 X 2 X 3 X 4 5 X 6 X 7 X	_
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5 X 6 X	_
5 X 6 X	
6 X	
6 X	_
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17 X	
18 X	
19 X 20a X	
20b	
21 X	
Form <b>990</b> (20	18

<u> </u>	art.W Checklist of Required Schedules (continued)	_	r	
22	Did the assessmention record many than \$5,000 of greate or other assistance to as for democitic individuals on		Yes	No
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		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23	organization's current and former officers, directors, trustees, key employees, and highest compensated	İ		
	employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<u></u>	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ļ	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or	ا مو		x
27	disqualified persons? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		1
27	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	T-1	8 7	<u> </u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	184	330	
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	1	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30	ļ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31	<u> </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			.,
	complete Schedule N, Part II	32	<u> </u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			<sub>~</sub>
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	34		х
35a	or IV, and Part V, line 1  Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	334		<del> </del>
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		İ
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	<u> </u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
P	art V Statements Regarding Other IRS Filings and Tax Compliance			
_	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
4-	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<u> 1833</u>	i es	140
1a b	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1a 2 1b 0		<b>P</b> . S	100
C				3
•	reportable gaming (gambling) winnings to prize winners?	1c	X	[

	Statements Regarding Other IRS Filings and Tax Compilance (contin	uea)	<del></del>			T
20	Fater the number of employees reported on Form W. 2. Transmittel of West and Toy		I	<u> </u>	Yes	No.
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	2a	51	&	÷	
	Statements, filed for the calendar year ending with or within the year covered by this return			2b	<i>* .</i>	X
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions			\$. c.	1	1
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	•)		3a	x	<b>i</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0		3b	X	<del>                                     </del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		thy over	36		$\vdash$
<b>→</b> a	a financial account in a foreign country (such as a bank account, securities account, or other financial		•	4a		x
<b>h</b>	If "Yes," enter the name of the foreign country.	acco	unity <sup>*</sup>	<u> </u>	<u> </u>	2 3
U	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	ste (FRAD)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	-cccai	its (i DAIV).	5a	'N 3	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?	rtion?		5a 5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	Juoni		5c		122
c 6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			130		1
Va	organization solicit any contributions that were not tax deductible as charitable contributions?	ie.		6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	ne or		- Va		1
D	gifts were not tax deductible?	) IIS UI		6b		
7	Organizations that may receive deductible contributions under section 170(c).			OD		e >
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	aboor			, %	
а	and services provided to the payor?	goods		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7a 7b		- 42
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			10		
C	required to file Form 8282?	13		7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	Í			<b>***</b>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		12	7e	8.0	x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		ν:	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7g		
g h	If the organization received a contribution of qualified intellectual property, and the organization me re-		•	7h		+
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine				<b>%</b> 8	
•	sponsoring organization have excess business holdings at any time during the year?	, a b , a		8	****	7000
9	Sponsoring organizations maintaining donor advised funds.					\$28
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a	8 25	~ ~
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		1
10	Section 501(c)(7) organizations. Enter				3 2	8.8
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		\ \	,	
ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			Y W	
11	Section 501(c)(12) organizations. Enter		1			1 3 :
a	Gross income from members or shareholders	11a		,	~ × ×	
b	Gross income from other sources (Do not net amounts due or paid to other sources	- · · · · ·				
	against amounts due or received from them )	11b			· %	🗓 .
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a	·"	"
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	I .		777	1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		<u></u>	( %)	, · ·	13.
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		1
_	Note. See the instructions for additional information the organization must report on Schedule O			₹.	·*	<b>X</b> <
ь	Enter the amount of reserves the organization is required to maintain by the states in which					
_	the organization is licensed to issue qualified health plans	13b	1	,	. '	
С	Enter the amount of reserves on hand	13c		,,,		1
14a	Did the organization receive any payments for indoor tanning services during the tax year?		A	14a	<u> </u>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b	İ	T -
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune		or			1
. •	excess parachute payment(s) during the year?		-	15		x
	If "Yes," see instructions and file Form 4720, Schedule N				13	4.88
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t incon	ne?	16	r***	X
. •	If "Yes," complete Form 4720, Schedule O		·-		13.	<del>\</del>
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Form 990 (2018) SPRING LAKE PARK LIONS CLUB 41-1340927 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 8 1b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 X any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X 6 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X 7a one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a 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 b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 13 Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 14 14 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? રપ્રે The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure

- MN 17 List the states with which a copy of this Form 990 is required to be filed ▶
- Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

Own website Another's website X Upon request Other (explain in Schedule O)

- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records

JEAN STREETER

SPRING LAKE PARK

8433 CENTER DRIVE

763-784-9179

MN 55432

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Page 7

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

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees; and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any	bo	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the			
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
(1) SHELLY BARNETT										-
	5.00							_	_	_
PRESIDENT	0.00	X		X	<u> </u>	Ш		0	0	0
(2) PETE YELLE										
	5.00	l								
1ST VICE PRESIDENT	0.00	X	<u> </u>	X				0	0	0
(3) LEROY STANISLOWS										
	5.00			l						
2ND VICE PRESIDENT	0.00	X	├_	X		_		0	0	0
(4) DEBBIE ROBERGE								1		
	5.00	l		l						
3RD VICE PRESIDENT	0.00	X	┝	X	├	$\vdash$		0	0	0
(5) SUE DURAND										
	5.00									
SECRETARY	0.00	X	<u> </u>	X	_			0	0	0
(6) JEAN STREETER										
	5.00	l								
TREASURER	0.00	X	<b>├</b>	X	├	<b> </b>		0	0	0
(7) COREY RASMUSSEN										
	5.00	l			l					
2 YEAR DIRECTOR	0.00	X	$\vdash$	<u> </u>	<u> </u>	$\perp$		0	0	0
(8) HAL HINCHCLIFFE			ļ							
	5.00									
1 YEAR DIRECTOR	0.00	X	Ь.	_	ļ	ļ		0	0	0
(9)										
		╁		╙	_	1				
(10)										
(11)										
DAA					<u></u>					Form <b>990</b> (2018)

**********	990 (2018) SPRING LA							s, a	41-134 and Highest Compensated		Page 8
7. 77.	(A) Name and title	ame and title  Average hours per (do not check more than one week box, unless person is both an (list any officer and a director/trustee)  Average hours per (do not check more than one box, unless person is both an officer and a director/trustee)  Reportable compensation related organizations		(F) Estimated amount of other compensation from the							
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2 1033-Iail30)	organization and related organizations
	-										
1b	Sub-total  Total from continuation she	note to Part VIII		ion d				<b>&gt;</b>			
c d	Total (add lines 1b and 1c)	ets to rait vii,	Ject	0117	`			<b>\</b>			
2	Total number of individuals (in reportable compensation from				thos	e lis	ted a	ibov	ve) who received more than	\$100,000 of	
3	Did the organization list any for employee on line 1a? If "Yes,	ormer officer, dır	ecto	r, or					loyee, or highest compensa	ated	Yes No
<b>4</b> 5	For any individual listed on lin organization and related orga individual Did any person listed on line	ie 1a, is the sum nizations greater	of re thar	port 1 \$15	able 50,00	com 00? /	ipens If "Ye	satio s,"	complete Schedule J for su	ch	4 X
	for services rendered to the o	rganization? If "									5 X
<u> </u>	ion B. Independent Contractor Complete this table for your fi	ve highest comp									
	compensation from the organ	(A) d business address	omp	ensa	tion	tor t	ne ca	len		(B)  this is the organization's tax year  this is tax year  this is tax year	(C) Compensation
		· · · - · · · ·									2.2
	·										,
2	Total number of independent	contractors (incl	uding	but	not	limit	ed to	tho	ose listed above) who	0	
DAA	received more than \$100,000	or compensation	1 11 01	11 (11)	e org	ja1112	.auor			U	Form <b>990</b> (2018)

Total evenue	Дa	rt XI	Statement of Reversible Check if Schedule		tains a r	esponse (	or note to any line	in this Part VIII		
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Social Repairs   Soci		!	and other similar amounts)			•	580	580		
Column   C		4	Income from investment of tax	-exem	pt bond p	roceeds >				
Column   C		5	Royalties			•				_
b Less rental exps  c Rental nor or (loss)  d Net rental income or (loss)  b Less cost or other bias a sales exps  c Gan or (loss)  d Net gain or (loss)					(II) F	Personal	389° \ \			
C Rental inc or (loss)		6a	Gross rents			3,247		1. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	Samuellana	
C Rental in cor (ioss)		ь	Less: rental exps			420	in a grand of the state of the		ું કહું મહત્ત્વવામાં મામેલામાં	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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				ns					42,549	38,828

Part.IX Statement of Functional Expenses

Secin	Check if Schedule O contains a response or note to any line in this Part IX										
Do n	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)						
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses						
	Grants and other assistance to domestic organizations	-		Y4(* &.s.,	1977 - A. S. C. C. S. C. S. C.						
	and domestic governments. See Part IV, line 21	3,486	3,486								
2	Grants and other assistance to domestic			73' 'Y 🕸							
	individuals See Part IV, line 22										
3	Grants and other assistance to foreign										
	organizations, foreign governments, and foreign										
	individuals See Part IV, lines 15 and 16				79.38.3 A						
4	Benefits paid to or for members				1475807887 805						
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		·	<u> </u>							
10	Payroll taxes										
11	Fees for services (non-employees)										
а	Management		<del></del>	•							
b	Legal										
C	Accounting			· · · · · · · · · · · · · · · · · · ·							
d	Lobbying										
e	Professional fundraising services See Part IV, line 17										
f	Investment management fees										
g	Other (If line 11g amount exceeds 10% of line 25, column										
40	(A) amount, list line 11g expenses on Schedule O)										
12	Advertising and promotion	464		464	<del></del>						
13	Office expenses Information technology	701		101							
14	•			<del>"-</del>							
15 16	Royalties Occupancy	_									
17	Travel	_	<del></del>								
18	Payments of travel or entertainment expenses	· · · · · · · · · · · · · · · · · · ·									
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings				·						
20	Interest		<del></del>								
21	Payments to affiliates	4,050	4,050								
22	Depreciation, depletion, and amortization										
23	Insurance	1,917		1,917							
24	Other expenses Itemize expenses not covered	100 100 100 100 100 100 100 100 100 100		* 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.32 %: 4 \$2. 74						
	above (List miscellaneous expenses in line 24e If										
	line 24e amount exceeds 10% of line 25, column				Mary San San						
	(A) amount, list line 24e expenses on Schedule O)		X								
а	MISCELLANEOUS	1,635	1,635		ļ						
b	UTILITIES	771	771								
С	DUES & SUBSCRIPTIONS	612	612								
d	BANK CHARGES	152	152	<u>-</u>							
е	All other expenses	12 005	10 800	0 201							
25	Total functional expenses. Add lines 1 through 24e	13,087	10,706	2,381	0						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs										
	from a combined educational campaign and										
	fundraising solicitation Check here   If  following SOP 98-2 (ASC 958-720)	1									
DAA	IOHOWHING OUT 30-2 (MOC 300-120)	<u> </u>		<u> </u>	Form <b>990</b> (2018)						

**Balance Sheet** 

Part X

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 418,972 492,558 1 Cash—non-interest bearing 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 4 614 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary 6 organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net 7 Inventories for sale or use 8 8,186 7,856 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 223,143 10a other basis. Complete Part VI of Schedule D. 223,143 10b 10c b Less accumulated depreciation 26,770 28,267 11 Investments—publicly traded securities 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 453,930 529. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 243 17 233 Accounts payable and accrued expenses 17 18 Grants payable 18 19 19 Deferred revenue 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 of Schedule D 243 233 26 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 453,687 529, 062 27 Unrestricted net assets Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here Ř complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 529,062 453,687 33 Total net assets or fund balances 529,295 453,930 Total liabilities and net assets/fund balances

<u>o</u> rm	990 (2016) SPRING HARE PARK HIGHS CHOB 41-1540521			Fag	<u> 12</u>
Рa	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>88,4</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>13,0</u>	<u> </u>
3	Revenue less expenses Subtract line 2 from line 1	3		75,3	375
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	53,6	587
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	5	29,0	062
Pa	#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 X Other MODIFIED	CASH		<b>.</b>	- ŵ.:
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			13 31	
	Schedule O			32 N	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			2,00	
	reviewed on a separate basis, consolidated basis, or both				X i
	Separate basis Consolidated basis Both consolidated and separate basis		l li		
þ	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both		liä.		X Y
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in		;	2 3	(A)
	Schedule O.				W., \$
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

### **SCHEDULE C** (Form.990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ

▶ Go to www irs gov/Form990 for Instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B
- · Section 527 organizations: Complete Part I-A only.

• Section 501(c)(4), (5), or (6) organizations: Complete Part III

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Name	of organization			Employer ident	ification number				
	SPRING LAKE PARK LI			41-13409					
Par	I-A Complete if the organization is exem	pt under section 501(c)	or is a sectio	n 527 organizatio	n.				
1	Provide a description of the organization's direct and indire	ect political campaign activities	ın Part IV. (see ıns	tructions for					
	definition of "political campaign activities")								
2	Political campaign activity expenditures (see instructions)			▶ \$					
3_	Volunteer hours for political campaign activities (see instru								
Par	Complete if the organization is exem		)(3).						
1	Enter the amount of any excise tax incurred by the organiz	ation under section 4955		▶ \$					
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	▶ \$					
3	If the organization incurred a section 4955 tax, did it file Fo	orm 4720 for this year?			Yes No				
4a	Was a correction made?				Yes No				
	If "Yes," describe in Part IV.	4 day a a 41 a w 504/a	\4:	F04/a\/2\					
	I-C Complete if the organization is exen			on 501(c)(3).					
1	Enter the amount directly expended by the filing organization	on for section 527 exempt func	tion						
_	activities			▶ \$					
2	Enter the amount of the filing organization's funds contribu	ited to other organizations for s	ection	<b>.</b> .					
_	527 exempt function activities		•	▶ \$					
3									
	line 17b	-o		▶ \$	☐ Yes ☐ No				
4 Did the filing organization file Form 1120-POL for this year?									
5	5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter								
	the amount of political contributions received that were pro-	•							
	as a separate segregated fund or a political action commit								
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political				
	(a) name	(b) Nources	(0) 2	filing organization's	contributions received and				
				funds If none, enter -0-	promptly and directly				
					delivered to a separate political organization				
					If none, enter -0-				
(1)	*								
•									
(2)									
(3)									
		<u>.</u>							
(4)									
(5)									
		<u>  _                                   </u>							
(6)									
F 5	annual Paduation Ast Nation and the Instructions for Exercise								
D									

Sch	nedule C (Form 990 or 990-EZ) 2018 SPRING	LAKE PARK LIONS CLUB	41-134092	7 Page 2		
P		tion is exempt under section 501(c)(3)	and filed Form 5768 (e	lection under		
	section 501(h)).					
Α	Check ▶ ☐ if the filing organization be	elongs to an affiliated group (and list in Part I\	/ each affiliated group men	nber's name,		
	address, EIN, expenses,	and share of excess lobbying expenditures).				
В	Check ▶ ☐ If the filing organization cl	necked box A and "limited control" provisions	apply.			
		ying Expenditures	(a) Filing	(b) Affiliated		
	(The term "expenditures" me	ans amounts paid or incurred.)	organization's totals	group totals		
1	a Total lobbying expenditures to influence publ	c opinion (grass roots lobbying)				
	b Total lobbying expenditures to influence a leg	uslative body (direct lobbying)				
	c Total lobbying expenditures (add lines 1a and	i 1b)				
	d Other exempt purpose expenditures					
	e Total exempt purpose expenditures (add line	s 1c and 1d)				
	f Lobbying nontaxable amount Enter the amount					
	columns	-				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:				
	Not over \$500,000	Not over \$500,000 20% of the amount on line 1e				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000				
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000				
	Over \$17,000,000	\$1,000,000		1 11 11 1		
	g Grassroots nontaxable amount (enter 25% of	f line 1f)				
	h Subtract line 1g from line 1a If zero or less,	enter -0-				
	i Subtract line 1f from line 1c If zero or less, e					
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720						
	reporting section 4911 tax for this year?			Yes No		
		4-Year Averaging Period Under Section 50	1(h)			

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	( <b>d)</b> 2018	(e) Total	
2a Lobbying nontaxable amount						
b Lobbying ceiling amount (150% of line 2a, column (e))						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2018

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) (b) For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed Yes No **Amount** description of the lobbying activity. During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? i Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No X 1 Were substantially all (90% or more) dues received nondeductible by members? X Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a a Current year 2b b Carryover from last year

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the

excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

2c

#### 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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number Name of the organization SPRING LAKE PARK LIONS CLUB 41-1340927 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 Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II **Conservation Easements.** 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 Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 Total number of conservation easements 2a 2b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 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 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 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) and section 170(h)(4)(B)(II)? 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. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenue included on Form 990, Part VIII, line 1 \$ Assets included in Form 990, Part X

Sched	lule D (Form 990) 2018 SPRING L	AKE PARK	LIONS	CLUB		41-1	340927	Page <b>2</b>
Par	Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)							
	3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)							
a	Public exhibition	d∫	Loan or	exchange pro	grams			
ь	Scholarly research	e	Other		_			
С	Preservation for future generations	-						
4	Provide a description of the organization's	collections and expl	ain how the	ey further the	organization'	s exempt <sub>l</sub>	ourpose in Part	
	XIII.							
5	During the year, did the organization solicit	or receive donation	s of art, his	storical treasu	res, or other	sımılar		
	assets to be sold to raise funds rather than	to be maintained a	s part of th	e organization	's collection	?		Yes No
Par		-						
	Complete if the organization	on answered "Ye	es" on Fo	orm 990, Pa	art IV, line	9, or rep	orted an amou	ınt on Form
	990, Part X, line 21.							
1a	Is the organization an agent, trustee, custo	dian or other interm	ediary for	contributions of	or other asse	ts not		
	included on Form 990, Part X?							∐ Yes ∐ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	following t	table				
							<del></del>	Amount
	Beginning balance						1c	
	Additions during the year						1d	
	Distributions during the year						1e	
	Ending balance	C 000 D-+ V I	04 for		Andial anna	- 4 J 15 - 15 - 17	<u> </u>	□ Vaa □ Na
	Did the organization include an amount on If "Yes," explain the arrangement in Part XI							∐ Yes ∏ No
	t V Endowment Funds.	III CHECK HEIE II UIE	ехріапаці	on has been p	IOVIGEG OILF	art Am		
1,44	Complete if the organization	on answered "Y	es" on Fo	rm 990 Pa	art IV line	10		
	Complete ii the organization	(a) Current year		) Prior year	(c) Two ye		(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance	(4, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20		, ,	(=, == ,=		(.,	(4, 22 , 22 )
	Contributions							
	Net investment earnings, gains, and	<del></del>						
_	losses							
d	Grants or scholarships							
e	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
g	End of year balance	,.						
2	Provide the estimated percentage of the cu	urrent year end bala	nce (line 1	g, column (a))	held as:			
а	Board designated or quasi-endowment ▶	%						
b	Permanent endowment ► %							
	Temporanly restricted endowment ▶	%						
	The percentages on lines 2a, 2b, and 2c si							
	Are there endowment funds not in the poss	session of the orgar	lization tha	it are held and	l administere	d for the		TV TN
	organization by							Yes No
	(i) unrelated organizations							3a(i)
_	(ii) related organizations	ationa liatad as ra		Cabadula D2				3a(ii) 3b
	If "Yes" on line 3a(ii), are the related organ Describe in Part XIII the intended uses of t							30
***************************************	***************************************		Idowinent	iulius				
Confession .	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.							
	Description of property	(a) Cost or oth		(b) Cost or			Accumulated	(d) Book value
		(investme		(oth			epreciation	, ,
	Land					w )	N. N. C. A.	
	Buildings							
	Leasehold improvements			<u> </u>		<u> </u>		
	Equipment			2	23,143		223,143	
	Other							
Total.	. Add lines 1a through 1e (Column (d) mus	t equal Form 990, F	Part X, colu	ımn (B), line 1	0c.)		<b>•</b>	

∴Rart.VII ————	Investments—Other Securities.  Complete if the organization answered "Ye	s" on Form 990 Part IV	line 11h Con Form 000 Dort V	
-			line TTD. See Form 990. Part A.	line 12
	(a) Description of security or category	(b) Book value	(c) Method of valuation	
	(including name of security)		Cost or end-of-year market v	alue
(1) Financial of	derivatives			
	eld equity interests		*	
(3) Other				
(A)				
(B)				
(c)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12)			N
Part VIII	Investments—Program Related.			
	Complete if the organization answered "Ye	s" on Form 990, Part IV,	line 11c. See Form 990, Part X,	line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation	
			Cost or end-of-year market v	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				<u> </u>
(9)				, ,,,,
	n (b) must equal Form 990, Part X, col (B) line 13 )	<u> </u>		<u></u>
Part IX	Other Assets.	o" on Form OOO Dort IV	line 11d See Form 000 Bort V	luna 15
	Complete if the organization answered "Ye			(b) Book value
<i>(4)</i>	(a) Descript	uon	'	D) BOOK Value
(1)				
(2)				
		-		
<u>(4)</u> <u>(5)</u>		·		
(6)	<u> </u>			
(7)	<del>.</del>		-	······································
(8)				
(9)				
	nn (b) must equal Form 990, Part X, col (B) line 15)		<b>•</b>	
Part X	Other Liabilities.		•	
, ,	Complete if the organization answered "Ye	es" on Form 990, Part IV,	line 11e or 11f. See Form 990, F	Part X,
	line 25.			
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes			
(2)				3.5
(3)				was a second
(4)				
(5)				Z., "
(6)				
(7)				
(8)				o sakarin

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

(9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶

Part XIII Supplemental Information.

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

4c

5

Part XIII Supplemental Information (continued)

#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a

Attach to Form 990 or Form 990-EZ.

Go to www irs gov/Form990 for instructions and the latest information

OMB No 1545-0047

<u> 2018</u>

Open to Püblic inspection

Name of the organization SPRING LAKE PARI		Employer identification number 41-1340927			
Fundraising Activities. Comple Form 990-EZ filers are not requi	ete if the organization	n answ	ered "Yes" on Form	990, Part IV, line	17.
1 Indicate whether the organization raised funds thro			Check all that apply.		
a Mail solicitations	e Solicitation	of non-go	vernment grants		
<b>b</b> Internet and email solicitations	f Solicitation	of govern	ment grants		
c Phone solicitations	g 🗌 Special fun	draising e	events		
d In-person solicitations					
2a Did the organization have a written or oral agreem or key employees listed in Form 990, Part VII) or e	ent with any individual (i	including o	officers, directors, trusteenal fundraising services?	95,	Yes No
b If "Yes," list the 10 highest paid individuals or entit compensated at least \$5,000 by the organization	ies (fundraisers) pursua			fundraiser is to be	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) Did fund raiser have custody or control of contributions	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes No	-		
1			7		
2		<del>                                     </del>	+		
•					
3			· ·	···	
4	_			<del></del>	
5					
6			1		
7	**-				
8					
9					
10					
Total			•	·=	

Schedule G (Form 990 or 990-EZ) 2018 SPRING LAKE PARK LIONS CLUB 41-1340927 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other events (d) Total events PANCAKE BREAKFA NONE (add col (a) through col (c)) (total number) (event type) (event type) 5,589 5,589 Gross receipts 2 Less Contributions 3 Gross income (line 1 minus 5,589 5,589 line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 4,958 4,958 9 Other direct expenses 4,958 10 Direct expense summary. Add lines 4 through 9 in column (d) 11 Net income summary Subtract line 10 from line 3, column (d) 631 » Part III • Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col (a) through col (c)) 560,720 18,709,831 19,270,551 1 Gross revenue 15,912,395 16,395,888 483,493 2 Cash prizes Direct Expenses 3 Noncash prizes 315,069 315,069 4 Rent/facility costs 43,945 2,442,645 2,486,590 5 Other direct expenses Yes Yes Yes  $\overline{\mathbf{X}}$ X No No 6 Volunteer labor 19,197,547 7 Direct expense summary Add lines 2 through 5 in column (d) 73,004 8 Net gaming income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: X Yes No Is the organization licensed to conduct gaming activities in each of these states? b If "No," explain Yes X No 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? b If "Yes," explain.

Schedule G (Form 990 or 990-EZ) 2018

Sche	dule G (Form 990 or 990-EZ) 2018 SPRING LAKE PARK LIONS CLUB	41-13409	927 Page 3
11	Ques the organization conduct gaming activities with nonmembers?		X Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity		
	formed to administer charitable gaming?		Yes X No
13	Indicate the percentage of gaming activity conducted in	1	1
а	The organization's facility	13	
b	An outside facility	13	вь   100.00 %
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ► AMANDA JACKSON 8433 CENTER DRIVE		
	Address SPRING LAKE PARK	MN 55432	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes X No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$	and the	
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party		
	Name ▶		
	Address ▶		
16	Gaming manager information		
	Name ► AMANDA JACKSON		
	Gaming manager compensation ▶ \$ 69,525		
	Description of services provided ► MANAGES ALL GAMING ACTIVITIES		
	Director/officer		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		. — —
	retain the state gaming license?		X Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or		
790	spent in the organization's own exempt activities during the tax year ▶ \$ 863,947  Supplemental Information. Provide the explanations required by Part I, line 2b,	oolumna (iii) ons	l (v): and
#5 <u>#</u>	Supplemental Information. Provide the explanations required by Part I, line 2b, Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any a See instructions.		
SC	H G, PART III, LINE 17B - REQUIRED DISTRIBUTIONS PER S	TATE LAW	
	STATE DISTRIBUTION AMOUNT		
MI	NNESOTA \$ 863,947		
	-		

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Department of the Treasury Internal Revenue Service

Name of the organization

► Go to www.irs.gov/Form990 for the latest information.

2018
Open to Public Inspection

OMB No 1545-0047

Employer identification number

SPRING LAKE PARK LIONS CLUB

41-1340927

FORM 990 - ORGANIZATION'S MISSION

TO CREATE AND FOSTER A SPIRIT OF UNDERSTANDING AMONG THE PEOPLE OF THE WORLD. TO PROMOTE THE PRINCIPLES OF GOOD GOVENMENT AND GOOD CITIZENSHIP. TO TAKE AN ACTIVE INTEREST IN THE CIVIC, CULTURAL, SOCIAL, AND MORAL WELFARE OF THE COMMUNITY. TO UNITE THE CLUBS IN THE BONDSOF FRIENDSHIP, GOOD FELLOWSHIP, AND MUTUAL UNDERSTANDING. TO ENCOURAGE SERVICE-MINDED MEN AND WOMEN TO SERVE THEIR COMMUNITY WITHOUT PERSONAL REWARD, AND TO ENCOURAGE EFFICIENCY AND PROMOTE HIGH, ETHICAL STANDARDS IN COMMERCE, INDUSTRY, PROFESSIONS, PUBLIC WORKS, AND PRIVATE ENDEAVORS.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS

SHELLY BARRETT

AMANDA JACKSON

1ST VICE PRE

GAMBLING MAN

SISTERS

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS

THE SPRING LAKE PARK LIONS CLUB HAS ABOUT 68 MEMBERS IN THEIR ORGANIZATION

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

THE ORGANIZATION'S GOVERNING BODY IS ELECTED BY MAJORITY VOTE OF THE

MEMBERS THAT ARE PRESENT AT THE VOTING MEETING. DECISIONS MADE BY THE

GOVERNING BODY ARE SUBJECT TO APPROVAL BY MEMBERS OF THE ORGANIZATION

Page 2

**Employer identification number** 

SPRING LAKE PARK LIONS CLUB

41-1340927

THROUGH MAJORITY VOTE. THE MAJORITY VOTE ONLY PERTAINS TO MEMBERS WHO ARE PRESENT AT EACH SPECIFIC MEETING.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE ORGANIZATION'S GOVERNING BODY REVIEWS THE 990 TAX RETURN AT THE MONTHLY BOARD MEETING BEFORE IT IS FILED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST TO THE SPRING LAKE PARK LIONS CLUB. CONTACT INFORMATION IS AVAILABLE AT THEIR WEBSITE (WWW.E-CLUBHOUSE.ORG/SITES/SPRINGLAKEPARK).