

Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

OMB No. 1545-1150

2008

**Open to Public
Inspection**

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury
Internal Revenue Service

A For the 2008 calendar year, or tax year beginning _____, and ending _____

B Check if applicable: Address change Name change Initial return Termination Amended return Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
LAKES AREA YOUTH SERVICE BUREAU, INC.

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
244 NORTH LAKE STREET

City or town, state or country, and ZIP + 4
FOREST LAKE MN 55025

D Employer identification number
41-1322058

E Telephone number
651-464-3685

F Group Exemption Number _____

G Accounting method: Cash Accrual
Other (specify) _____

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ **WWW.YSBLAKESAREA.ORG**

J Organization type (check only one)— 501(c) (**3**) ◀ (insert no.) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ. ▶ \$ **524,518**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)				
Revenue	1	Contributions, gifts, grants, and similar amounts received	1	152,258
	2	Program service revenue including government fees and contracts	2	298,189
	3	Membership dues and assessments	3	
	4	Investment income	4	14,791
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch.)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	41,960
6b	Less: direct expenses other than fundraising expenses	6b	11,322	
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	30,638	
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe ▶ SEE STATEMENT 1)	8	17,320	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	513,196	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	359,777
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	43,563
	15	Printing, publications, postage, and shipping	15	11,705
	16	Other expenses (describe ▶ SEE STATEMENT 2)	16	99,222
17	Total expenses. Add lines 10 through 16	17	514,267	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-1,071
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	429,766
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	428,695

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ.
(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	422,143	400,163
23 Land and buildings	21,702	17,488
24 Other assets (describe ▶ SEE STATEMENT 3)	31,846	56,992
25 Total assets	475,691	474,643
26 Total liabilities (describe ▶ SEE STATEMENT 4)	45,925	45,948
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	429,766	428,695

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Form **990-EZ** (2008)

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

Expenses
(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.)

What is the organization's primary exempt purpose?

YOUTH PROGRAMS

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

28	PROMOTE THE WELL-BEING OF YOUTH AND THEIR FAMILIES, AND PREVENT JUVENILE DELINQUENCY.		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	421,331
29			
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30			
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a)	32	421,331

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
JEANNE WALZ 244 NORTH LAKE STREET FOREST LAKE MN 55025	EXECUTIVE DI 40	64,103	11,049	0
MIKE ASCHENBRENER 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
MIKE HASELTINE 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
KATHY LILLIS 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
MEL METTLER 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
RICH OTTOMEYER 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
CLARK QUIRING 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
LYNN STEENBLOCK 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
JIM TRUDEAU 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
BEA ZAUBA 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
BRIAN ALM 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
ROB COLLINS 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
JOE GRAFFT 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
JOE KRYSCHYSHEN 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
KENT STREGE 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
ERIN TURNER 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0
RENEE WAGNER 244 NORTH LAKE STREET FOREST LAKE MN 55025	BOARD MEMBER	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
35a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	X	
35b	If "Yes," has it filed a tax return on Form 990-T for this year?	X	
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr.		
37b	Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
38b	If "Yes," complete Schedule L, Part II and enter the total amount involved		
39	Section 501(c)(7) organizations. Enter:		
39a	Initiation fees and capital contributions included on line 9		
39b	Gross receipts, included on line 9, for public use of club facilities		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911; section 4912; section 4955		
40b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
40c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
40d	Enter amount of tax on line 40c reimbursed by the organization		
40e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41	List the states with which a copy of this return is filed. MN		
42a	The books are in care of LAKES AREA YOUTH SERVICE 244 NORTH LAKE STREET Located at FOREST LAKE, MN Telephone no. 651-464-3685 ZIP + 4 55025		
42b	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)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		X
42c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country:		X
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

Table with 3 columns: Question (46-49a/b), Yes, No. Contains questions about political/lobbying activities and transfers to exempt organizations.

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and address of each employee paid more than \$100,000, (b) Title and average hours per week devoted to position, (c) Compensation, (d) Contributions to employee benefit plans & deferred compensation, (e) Expense account and other allowances.

Total number of other employees paid over \$100,000

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000, (b) Type of service, (c) Compensation.

Total number of other independent contractors each receiving over \$100,000

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer (Jeane Watz), Date (3/25/09), Type or print name and title (Executive Director).

Paid Preparer's Use Only: Preparer's signature (William H. ...), Date (3/27/09), Check if self-employed, Preparer's Identifying Number (P00302187), Firm's name (HARRINGTON LANGER & ASSOCIATES), address (563 PHALEN BLVD, SAINT PAUL, MN 55130), EIN (41-1532347), Phone (651-481-1128).

May the IRS discuss this return with the preparer shown above? See instructions. Yes No

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

▶ Attach to Form 990, 990-EZ, and 990-PF.

2008

Name of the organization
**LAKES AREA YOUTH SERVICE
BUREAU, INC.**

Employer identification number

41-1322058

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)(**3**) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

General Rule

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization LAKES AREA YOUTH SERVICE	Employer identification number 41-1322058
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Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	UNITED WAY 166 EAST FOURTH STREET ST. PAUL MN 55101	\$ 34,961	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	ANDERSEN CORPORATE FOUNDATION 342 FIFTH AVE NORTH BAYPORT MN 55003	\$ 6,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	FRED & KATHERINE B ANDERSEN FOUNDATI PO BOX 80 BAYPORT MN 55003	\$ 7,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	179,128	197,438	141,492	133,866	152,258	804,182
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1-3	179,128	197,438	141,492	133,866	152,258	804,182
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						730
6 Public support. Subtract line 5 from line 4						803,452

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	179,128	197,438	141,492	133,866	152,258	804,182
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,261	7,588	14,552	14,942	14,791	55,134
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,799	4,762	25,685	21,964	47,958	104,168
11 Total support. Add lines 7 through 10						963,484
12 Gross receipts from related activities, etc. (see instructions)					12	1,150,619
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	83.3903 %
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	91.0170 %
16a 33 1/3 % support test—2008. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>		
b 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	%

- 19a 33 1/3 % support tests—2008.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3 % support tests—2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

PART II, LINE 10 - OTHER INCOME DETAIL

OTHER RELATED INCOME \$ **11,932**

SPECIAL EVENTS \$ **52,416**

YOUTH PAGE \$ **39,820**

Federal Statements**Statement 1 - Form 990-EZ, Part I, Line 8 - Other Revenue**

<u>Description</u>	<u>Amount</u>
YOUTH PAGE ADVERTISING	\$ 13,716
MISCELLANEOUS	3,604
TOTAL	<u>\$ 17,320</u>

Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Amount</u>
YOUTH PAGE ADVERTISING	\$
READERSHIP COSTS	2,025
EXPENSES	
TRAVEL	3,883
CONFERENCES/MEETINGS	2,818
CONTRACTED SERVICES	37,279
INSURANCE	5,881
TRAINING	4,238
DUES AND MEMBERSHIPS	1,707
REPAIRS AND MAINTENANCE	10,116
UTILITIES	7,849
MISCELLANEOUS	2,105
SUPPLIES	14,837
POSTAGE	4,601
PRINTING	1,883
TOTAL	<u>\$ 99,222</u>

Statement 3 - Form 990-EZ, Part II, Line 24 - Other Assets

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS RECEIVABLE	\$ 9,420	\$ 25,410
PREPAID EXPENSES AND DEFERRED CHARGES	3,862	2,286
MUTUAL FUNDS	18,564	29,296
TOTAL	<u>\$ 31,846</u>	<u>\$ 56,992</u>

Statement 4 - Form 990-EZ, Part II, Line 26 - Total Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
ACCOUNTS PAYABLE AND ACCRUED EXPENSES	\$ 42,359	\$ 39,778
DEFERRED COMPENSATION	3,566	6,170
TOTAL	<u>\$ 45,925</u>	<u>\$ 45,948</u>

Part II, Line 23 - Land and Building

Description	Investments - land, Buildings, etc.	Accumulated Depreciation	Land, Buildings, etc. Basis	Accumulated Depreciation
Beginning balance	-	-	238,141	216,439
Additions	-	-	2,621	-
Retirements	-	-	-	-
Transfers/other	-	-	-	-
Total depreciation expense	-	-	-	6,825
Depreciation expenses - program services	-	-	-	5,714
Depreciation expenses - management and general	-	-	-	446
Depreciation expenses - fundraising	-	-	-	665
Ending balance	-	-	240,762	223,264