

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

Department of the Treasury
Internal Revenue Service

- ◆ 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.

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

B Check if applicable: <input checked="" type="checkbox"/> Address change <input checked="" type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization LAKEWOODALIVE frmly LAKEWOOD COMMUNITY PROGRESS		D Employer identification number 55-0793987
		Number and street (or P.O. box, if mail is not delivered to street address) Room/suite 14701 DETROIT AVENUE		E Telephone number 216-521-2100
		City or town, state or country, and ZIP + 4 LAKEWOOD OH 44107		F Group Exemption Number _____

● Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: Cash Accrual
Other (specify) _____

I Website: ◆ **www.lakewoodalive.com**

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

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 ◆ \$ **137,082**

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	121,184
	2	Program service revenue including government fees and contracts	2	8,105
	3	Membership dues and assessments	3	
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less: cost or other basis and sales expenses	5b	
	c	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"/>		
	a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	7,793
b	Less: direct expenses other than fundraising expenses	6b	2,950	
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	4,843	
7a	Gross sales of inventory, less returns and allowances	7a		
b	Less: cost of goods sold	7b		
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe _____)	8		
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	134,132	
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	55,425
	13	Professional fees and other payments to independent contractors	13	2,099
	14	Occupancy, rent, utilities, and maintenance	14	452
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe See Statement 1)	16	53,324
17	Total expenses. Add lines 10 through 16	17	111,300	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	22,832
	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	9,697
	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	32,529

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	11,974	35,310
23 Land and buildings		1,808
24 Other assets (describe See Statement 2)	25	25
25 Total assets	11,999	37,143
26 Total liabilities (describe See Statement 3)	2,302	4,614
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	9,697	32,529

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

Form **990-EZ** (2008)

Form **4562**
 Department of the Treasury
 Internal Revenue Service

Depreciation and Amortization
 (Including Information on Listed Property)

OMB No. 1545-0172

2008

Attachment Sequence No. **67**

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return **LAKEWOODALIVE**
frmly LAKEWOOD COMMUNITY PROGRESS

Identifying number
55-0793987

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property	2,260	5.0	HY	200DB	452
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr.	22	452
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2008)

DAA

There are no amounts for Page 2

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
TRAVEL	252
SEMINARS/EDUCATION	290
INSURANCE	1,384
UTILITIES	1,554
AUTO EXPENSES	733
PRINTING	1,067
POSTAGE	673
FEES, DUES & SUBSCRIPTION	950
MAINSTREET PROGRAM FEE	3,300
MEALS & ENTERTAINMENT	447
CONTRIBUTIONS	1,025
COMMUNITY FORUM EXPENSES	1,515
DETROIT AVENUE SIGNAGE	10,585
REPAIRS AND MAINTENANCE	613
WEST END SECURITY EXPENSE	4,800
LAKWOOD BLOSSOMS EXPENSE	3,811
LIGHT UP LAKEWOOD	6,401
WALK & ROLL	5,842
BAND2GETHER	3,894
ADVERTISING	826
COPIER	510
OFFICE EXPENSES	2,852
Total	\$ <u>53,324</u>

Statement 2 - Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beginning of Year	End of Year
WORKERS' COMP. DEPOSIT	\$ 25	\$ 25
Total	\$ <u>25</u>	\$ <u>25</u>

Statement 3 - Form 990-EZ, Part II, Line 26 - Total Liabilities

Description	Beginning of Year	End of Year
Accounts Payable and Accrued Expenses	\$ 2,302	\$ 4,614
Total	\$ <u>2,302</u>	\$ <u>4,614</u>

Federal Statements**Statement 4 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose****Description**

History: Lakewood Community Progress Inc. (LCPI) was founded in 2002 by the Chamber of Commerce and the City of Lakewood to provide an additional resource for facilitating local economic development. LCPI was granted 501-c(3) tax-exempt status in March, 2004. The 2008 focus of the organization was the continued revitalization of Downtown Lakewood's commercial district, using National Main Street principles. LakewoodAlive is a member of the National Trust for Historic Preservation Trust and Heritage Ohio, which is the oversight organization for the Ohio Main Street Program.

Mission: LakewoodAlive is an economic development corporation whose mission is to improve the quality of life of residents by creating alliances with community leaders, leveraging community assets and expanding the pool of available resources in order to facilitate economic stability and growth in the City of Lakewood.

Board Structure: LakewoodAlive is led by a volunteer board and a full-time, salaried executive director. In 2008 activities were guided by 4 committees using the National Main Street Four-Point Approach™.

Statement 5 - Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments**Description**

Downtown Lakewood is a volunteer-based program of LakewoodAlive dedicated to the revitalization of Lakewood's historic commercial district located on Detroit Avenue between Arthur Avenue and Bunts Road. Our purpose is to facilitate investment in downtown Lakewood by working to create an environment where residents, employees and guests want to come to live, work, shop and play. Using the National Main Street volunteer-based Four Point Approach, Downtown Lakewood's revitalization marked significant progress in 2008. Accomplishments included diversifying LakewoodAlive's funding streams and creating policies and procedures to assure the organization uses best practices in all its activities. We brought three new events to the district in 2008 and expanded two others. We also provided community education via forums on issues related to economic development.

Please see the enclosed 2008 annual report for further detail on the many accomplishments of this volunteer-based effort to revitalize Downtown Lakewood.

Form **8868**

(Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

◆ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only Part I and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print File by the due date for filing your return. See instructions.	Name of Exempt Organization LAKEWOODALIVE frmly LAKEWOOD COMMUNITY PROGRESS	Employer identification number 55-0793987
	Number, street, and room or suite no. If a P.O. box, see instructions. 14701 DETROIT AVENUE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LAKEWOOD OH 44107	

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|---|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

● The books are in the care of ◆ **TIMOTHY P. LASKEY, CPA**

Telephone No. ◆ **216-521-2100** FAX No. ◆

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **8/17/09** , to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ◆ calendar year **2008** or
- ◆ tax year beginning _____ , and ending _____ .

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 4-2009)



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
10/06/2008	200828001028	TRADE NAME/ORIGINAL FILING (RNO)	50.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

OTT & ASSOCIATES CO., LPA
 55 PUBLIC SQUARE, STE 1400
 CLEVELAND, OH 44113

**STATE OF OHIO
 CERTIFICATE**

Ohio Secretary of State, Jennifer Brunner

1810422

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

LAKEWOODALIVE

and, that said business records show the filing and recording of:

Document(s)

Document No(s):

TRADE NAME/ORIGINAL FILING

200828001028

Date of First Use: 09/18/2008
 Expiration Date: 10/03/2013

LAKEWOOD COMMUNITY PROGRESS,
 INC.
 14701 DETROIT AVENUE, SUITE 130
 LAKEWOOD, OH 44107



United States of America
 State of Ohio
 Office of the Secretary of State

Witness my hand and the seal of the
 Secretary of State at Columbus, Ohio
 this 3rd day of October, A.D. 2008.

Ohio Secretary of State