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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 1545-0047 2008

| Department | of th | e Tr | easury |
|--------------|-------|------|--------|
| Internal Rev | enue | 3 Se | NICE |

Open to Public Inspection

| | | ue Service | ▶ | The organization may | have to use a c | opy of this ret | urn to sa | atisfy state rep | porting red | uirements | tr | nspection |
|---|---|---|--|---------------------------------------|----------------------|--------------------|---------------------------------------|--|-------------|--|-----------------|-----------------------|
| A Fo | or the | 2008 calendar | r year, or | tax year beginning | | | 0-01 | , 2008, and | ending | 0 | 9-30 ,2 | 0 09 |
| B Cr | heck if a | applicable | Please | C Name of organization AT | HFEST INC | | | | | | D Employe | er identification no. |
| <u> </u> | | change | use IRS label or | Doing Business As | | | | | | | 20-042 | 5341 |
| ليسيا | ame ch | - 1 | print or | Number and street (or P C | box if mail is not d | elivered to street | address) | | Roon | √suite | E Telephor | ne number |
| | ıtıal retu | _ | type. See | PO BOX 327 | | | • | | | | (706) 5 | 48-1973 |
| 一 | minat | 1 | Specific | City or town, state or coun | atry and 7IP + 4 | | | | | | G Gross re | cents \$ |
| $\overline{\Box}$ | | return | Instruc- tions. | ATHENS, GA 306 | - | | | | | |] | 164,545 |
| 一三 | | on pending | E Name | and address of principal office | | | | | | | | |
| L) ^ | pilead | on pending | , itemio | and address of principal office | | | | | H(a) | Is this a group i | etum for | Yes X No |
| | | npt status X | 501(c) (| 3) ◀ (insert no) | 4947(a)(1) or | 527 | | | | | | |
| | ebsite | | ATHFES | | 4347(a)(1) 01 | | | | H(c) | Are all affiliates if "No," attach a Group exempti | list (see instr | uctions) |
| | | | Corporation | · | Other ► | | l. ve | ar of formation | 2004 | M State of leg | | GA |
| Part | | Summary | | | Culei P | | 1 - 10 | di Orioniation | | in Otate or log | ar contraic | |
| <u> Fan</u> | 1 | | | anization's mission or r | nost significant | activities | EDU | CATION OF | MUSIC | AND ARTS | | |
| | l ' | Cherry describ | oc the org | amzation 5 mission 6: 1 | noor olgilinooni | _ | | | | | | |
| A C G | 1 | | | | | | | | | | | |
| c G t o | | | | | | | | | | | | |
| i y V e | 2 | Check this has | v N if | the organization discor | atinued its opera | tions or dispo | sed of r | nore than 25 | % of its as | sets | | |
| ř | 3 | | | bers of the governing b | | | | | | | ł | 9 |
| ia | ١. | | _ | t voting members of the | | | | | | | | 9 |
| e n | 4 | | | yees (Part V, line 2a) | | | | | | | | <u></u> |
| ě | 5 | | | | | | | | | 6 | | |
| ^ | 6 | | | eers (estimate if necess | | | | | | 7. | | |
| | ł . | | | usiness revenue from F | | | | | • • • • • | 71 | | |
| | <u>D</u> | Net unrelated | business | taxable income from F | orm 990-1, line | 34 · · · · | | | | ior Year | | <u> </u> |
| R | | 0 11 1 | • | | 1 | HEC | TENT | 213 | PI | | | rent Year |
| e | 8 | | - | ts (Part VIII, line 1h) | | | Can V E | | | 125,06 | - | 161,013 |
| ė | | 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII column (A), line 12) | | | | | | | | | 0 | |
| n u | 10 | Investment inc | come (Pa | rt VIII, column (A), lines | 3, 4, and 7d) | ₿ MAR | 0 2 9 | 0.10 . 85 | | | | 669 |
| e | 11 | Other revenue | e (Part VII | I, column (A), lines 5, 6 | id, 8c, 9c, 10c a | and 11e) " • | · · · · · | | | 9,88 | | 2,310 |
| | 12 | 10tar revenue | - aud mit | sa o unough in (music | quai i ait viiigo | Oldring (73), 1114 | C 12) | | | 134,95 | - | 163,992 |
| | 13 | | | unts paid (Part IX, colu | L. | | C14, | $\mathbf{U} \cdot \cdots \cdot \mathbf{U}$ | | | | 1,998 |
| E | 14 | • | | nembers (Part IX, colun | | | · · · · · · · · · · · · · · · · · · · | | | | | 0 |
| X D | 15 | ` | | sation, employee bene | | | | | | 15,00 | 00 | 16,148 |
| é | | | | g fees (Part IX, column | | | | | | | <u> </u> | 0 |
| n s | | | | ises (Part IX, column (E | | | | <u> </u> | <u> </u> | | _ | |
| e s | | • | • | K, column (A), lines 11a | | | | | ļ | 113,69 | | 127,767 |
| | i | | | nes 13-17 (must equal l | | | | | | 128,69 | | 145,913 |
| | 19 | Revenue less | expense | Subtract line 18 from | line 12 • • • | <u> </u> | • • • • | · · · · · · | | 6,25 | | 18,079 |
| _Net ⊆Assets | | | | | | | | | Beginn | ing of Year | | d of Year |
| ⊂or ∣ | 20 | Total assets (F | Part X, Im | e 16) • • • • • • • | | | | • • • • • • | | 55,27 | | 73,440 |
| Fund Bal- | 21 | Total liabilities | (Part X, | line 26) · · · · · · | • • • • • • | | • • • • | • • • • • | | 36 | | 459 |
| ම <mark>ances</mark> | 22 | Net assets or f | fund bala | nces Subtract line 21 | from line 20 · | · · · · · · · | · · · · | • • • • • • | | 54,90 | 2 | 72,981 |
| Part | | Signature | <u>e Block</u> | <u> </u> | | | | | | | | |
| Ą | | | | declare that I have examined | | | | | | | | |
| ≥ | 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 Signature of officer 12 - 8 - 2010 | | | | | | | | | | | |
| | 2-8-2010 | | | | | | | | | | | |
| Sign | | Signatur | of officer (| · · · · · · · · · · · · · · · · · · · | | | | | | Ε | ate | |
| Z Here | | N | Alic | iA Nickles | Pre | 5 | | | | | | |
| | | Type or pri | int name an | d title | | | | | | | | |
| \$\int_{\infty}^{\infty}_{\inft | | Preparer's | | | | Da | te | Chec | | | dentifying num | ber |
| Paid | | signature | \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ | Charles and the second | | 01 | -12-20 | 10 self- | loyed ► | see instruc | tions) | |
| Prepar | | Firm's name (or | VOLUE | PAUL A THOMAS | CPA PC | | | | EIN | • | | |
| Use O | nly | if self-employed) |). | 3001 MONROE H | WY, BLDG 60 | 0, STE A | | | | | | |
| | | address, and ZII | P+4 | WATKINSVILLE, | GA 30677 | | | | Phone n | o ▶ 770-7 | 25~1433 | |
| May th | May the IRS discuss this return with the preparer shown above? (see instructions) | | | | | | | | | | | |
| | | | | duction Act Notice, see | | | | | | EEA | | orm 990 (2008) |

| Form | n 990 (2008) ATHFEST INC | 20-0425341 | Page 2 |
|------|---|----------------|-------------|
| Par | rt III Statement of Program Service Accomplishments (see instructions) | | |
| 1 | Briefly describe the organization's mission | | |
| | EDUCATION OF MUSIC AND ARTS | | |
| | | | |
| | | | |
| | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | | |
| | the prior Form 990 or 990-EZ? | · · · · X Yes | No No |
| | If "Yes," describe these new services on Schedule O | | |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | | |
| | services? | · · · · · Tyes | X No |
| | If "Yes," describe these changes on Schedule O | | |
| 4 | Describe the exempt purpose achievements for each of the organization's three largest program services by expenses | | |
| | Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants | and | |
| | allocations to others, the total expenses, and revenue, if any, for each program service reported | | |
| | | | |
| 4a | (Code) (Expenses \$ 111,966 including grants of \$) (Revenue | \$ 147 | ,325) |
| | EDUCATE THE PUBLIC ABOUT MUSIC AND ARTS IN GENERAL | | |
| | SPECIFICALLY ABOUT ATHENS MUSIC AND ARTS. THE ATHENS CONVENTION AND VISITORS BY | JREAU | |
| | ESTIMATED THAT APPROX 60,000 PEOPLE ATTENDED THE FESTIVAL IN JUNE OF 2009. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| _ | | | |
| 4b | (Code) (Expenses \$ 2,289 including grants of \$) (Revenue | \$ 1 | .,023) |
| | TO EDUCATE CHILDREN AND ADULTS ABOUT MUSIC AND ARTS | | |
| | THROUGH HANDS ON ACTIVITIES AND DEMONSTRATIONS | | |
| | RELATED TO MUSIC AND THE ARTS | | |
| | APPROXIMATELY 2000 CHILDREN AND THEIR PARENTS ATTENDED KIDSFEST THIS PAST YEAR. | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 4c | (Code) (Expenses \$ 1,067 including grants of \$) (Revenue | \$ |) |
| | TO EDUCATE MUSICIANS AND ARTISTS ABOUT THE | | |
| | MUSIC AND ARTS BUSINESS THROUGH MUSIC PANELS, | | |
| | SEMINARS AND WORKSHOPS IN CONJUNCTION WITH THE | | |
| | UNIVERSITY OF GEORGIA MUSIC BUSINESS PROGRAM | | |
| | AND VARIOUS INDUSTRY LEADERS | | |
| | APPROXIMATELY 200MUSICIANS AND ARTISTS ATTENDED THE PROGRAM HELD THIS PAST YEAR | · | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 4d | , , , , , , , , , , , , , , , , , , , | | |
| | (Expenses \$ 6,451 including grants of \$) (Revenue \$ |) | |
| 4e | Total program service expenses > \$ 121,773 (Must equal Part IX, Line 25, column (B)) | | |

| Pa | art IV Checklist of Required Schedules | | | |
|-----|---|--|-----|----------|
| | • 177 | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | _ |
| | complete Schedule A · · · · · · · · · · · · · · · · · · | 1 | X | |
| 2 | is the organization required to complete Schedule B, Schedule of Contributors? | 2 | | Х |
| 3 | 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 | 3 | | _X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete | | | |
| | Schedule C, Part II- · · · · · · · · · · · · · · · · · · | 4 | | Х |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) | | | |
| | notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any accounts where donors have the right to | | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete | | | |
| | Schedule D, Part I | 6 | | X |
| 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 | 7 | ĺ | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | |
| | complete Schedule D, Part III | 8 | | Х |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part | | | |
| - | X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," | [] | | |
| | complete Schedule D, Part IV · · · · · · · · · · · · · · · · · · | 9 | | Х |
| 10 | Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If "Yes," complete Schedule D, | | | |
| •• | Parts VI, VIII, IX, or X as applicable · · · · · · · · · · · · · · · · · · · | 11 | } | X |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return | | | |
| - | that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12 | | Х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the US? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | | | |
| | business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I | 14b | | Х |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | 1.12 | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Part II | 15 | | v |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | • | | <u>X</u> |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Part III | 16 | | v |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | X |
| 20 | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | X |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II • • • • • | 21 | | X |
| 22 | Did the organization report more than \$5,000 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, questions 3, 4, or 5? If "Yes," complete | | | Λ_ |
| -0 | Schedule J · · · · · · · · · · · · · · · · · · | 23 | x | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | - | - | |
| _70 | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions | | | |
| | 24b-24d and complete Schedule K. If "No," go to question 25 ··································· | 24a | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | 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 | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | | | |
| 54 | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | v |
| b | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified | -50 | | <u>X</u> |
| | person from a prior year? If "Yes," complete Schedule L, Part I | 25b | | v |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | 235 | | X |
| _0 | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | v |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or | <u> </u> | | X |
| | substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | | v |
| | Constitution Contribution, or to a person related to addit all individuals in 100, Complete Concedure L, 1 all III | 1 - 1 | 1 | Χ |

| | | | Yes | No |
|----|---|------|--------|------------|
| 28 | During the tax year, did any person who is a current or former officer, director, trustee, or key employee | | | i |
| а | Have a direct business relationship with the organization (other than as an officer, director, trustee, or | | ' | ĺ |
| | employee), or an indirect business relationship through ownership of more than 35% in another entity | 1 | | ł |
| | (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, | | | l |
| | Part IV · · · · · · · · · · · · · · · · · · | 28a | Х | |
| b | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," | | | |
| | complete Schedule L, Part IV · · · · · · · · · · · · · · · · · · | 28b | х | Ì |
| С | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a | | | |
| | professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV | 28c | x | |
|) | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | > |
|) | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | <u> </u> |
| | conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · · | 30 | | լչ |
| | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | <u> </u> |
| | Part I | 31 | | լչ |
| 2 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | r |
| | Schedule N, Part II | 32 | | |
| 3 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | Ē |
| | sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I | 33 | | _ > |
| | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, | | | Ē |
| | III, IV, and V, line 1 · · · · · · · · · · · · · · · · · · | 34 | | > |
| ; | is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete | | | r |
| | Schedule R, Part V, line 2 · · · · · · · · · · · · · · · · · · | 35 | | > |
| ; | 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 | | <u>}</u> |
| , | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | _ <u>_</u> |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part |] | | ŀ |
| | VI | 37 | | X |
| | EEA | Form | 990 (2 | |

| Pa | ort V Statements Regarding Other IRS Filings and Tax Compliance | | | |
|------------------|---|----------------|-----|-----------|
| | | | Yes | No |
| 1a | | | | |
| | U.S. Information Returns Enter -0- if not applicable | | | |
| b | · ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | | | |
| C | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| _ | gaming (gambling) winnings to prize winners? | 1c | X | |
| 2a | | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return 2a 1 | | | |
| b | · · · · · · · · · · · · · · · · · · · | 2b | X | <u> </u> |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see | | | |
| 2- | instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | 3a | | |
| h | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O · · · · · · · · · · · · · · · · · · | 3b | | X |
| b 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | - 55 | | - |
| - 7-a | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? · · · · · · · · · · · · · · · · · · · | 4a | | X |
| b | 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 | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? • • • • • • • • • • • • • • • • • • • | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| С | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity | | | - |
| | Regarding Prohibited Tax Shelter Transaction? • • • • • • • • • • • • • • • • • • • | 5c | | |
| 6a | Did the organization solicit any contributions that were not tax deductible? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| | gifts were not tax deductible? | 6ь | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? | 7a | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | |
| | required to file Form 8282? • • • • • • • • • • • • • • • • • • • | 7с | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year · · · · · · · · · · · · · · · · · · · | | | |
| е | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal | | | |
| | benefit contract? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7 f | | <u>X</u> |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | <u>X</u> |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as | | 1 | |
| _ | required? · · · · · · · · · · · · · · · · · · · | 7h | | X |
| 8 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section | | | į |
| | 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring | :- | | |
| _ | organization, have excess business holdings at any time during the year? | 8 | | _X_ |
| 9 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | | | |
| a | Did the organization make any taxable distributions under section 4966? | 9a | | <u>X</u> |
| ь 10 | | 9b | | <u>X</u> |
| | Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 | | 1 | i |
| a h | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | · ! |
| b 11 | <u> </u> | | - 1 | ! |
| | Section 501(c)(12) organizations. Enter: Gross income from members or shareholders | l | | ! |
| | <u></u> | ļ | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | 1 | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | , |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 124 | | |
| ~ | 125, Since the different of the exempt interest received of decided during the jedi | 1. | 1. | |

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 X 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? 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? Х 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b X R Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Each committee with authority to act on behalf of the governing body? b Х Х If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at 11 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies Yes No 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? 13 Х Does the organization have a written document retention and destruction policy? 14 Х 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision. 15a Other officers or key employees of the organization? X 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 with a taxable entity during the year? 16a X b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ GA 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization PAUL THOMAS, TREASURER (770) 725-1433 3001 MONROE HWY 600A WATKINSVILLE, GA 30677

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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
- 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.

| (A) | (B) | (C) | | | | | | (D) | (E) | (F) |
|------------------|------------------------------|--|--------------------------|----------|-----------------------|------------------------------------|------|---|--|---|
| Name and Title | Average hours per week | Posi I t d nri dur i s e v t c i e t | l t n r s u t s | Of | K e y e m | H c e I o m g mp h p I e e o s n y | ForE | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the |
| | | de o u r a o l r | u e l o n a l | Ē | P O y e e | t s é a e t e d | | (VV-2) 1039-MISC) | | organization and related organizations |
| ALICIA NICKLES | | | | | | | | | | |
| PRESIDENT | | l | | X | | | | 0 | 0 | (|
| WILLIAM FAY | | | | | | | | | | |
| AT-LARGE | | \ | | | | | X | 0 | 0 | (|
| PAUL THOMAS | | | | | | | | | | |
| TREASURER | | | <u>L</u> . | X | | | | 0 | 0 | |
| JARED BAILEY | | | | | | | | | | |
| DIRECTOR | | X | | | X | Х | | 15,000 | 0 | |
| RUSSELL HALLAUER | | | | | | | | | | |
| VICE PRESIDENT | | ļ | | X | | | | 0 | 0 | |
| TROY AUBREY | | | | | | | | | | |
| CHAIR | | <u> </u> | | X | | | | 0 | 0 | |
| LAURIE LOFTIN | | | | | | | | | | |
| CHAIR | | <u> </u> | | X | | | | 0 | 0 | |
| ANDY PAYNE | 1 | ĺ | İ | | | | i | | | |
| SECRETARY | | <u> </u> | | X | | | | 0 | 0 | |
| SANDII BRIMBLE | | | - | | | | | | | |
| CHAIR | | ļ | | X | | | | 0 | 0 | |
| JENNIFER KUMNICK | 1 | | | | | | | | | |
| CHAIR | | | _ | Х | | | | 0 | 0 | |
| | | | | | | | | | | |
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20-0425341

| P | art VII Section A. Officers, Directors, Trustees, Key | Employees | s, and | Higi | nesi | Cor | npens | ated | Employees (conti | | | | |
|-----|---|---|------------|-------------------|--------|----------|-----------------------|------------|---------------------------------------|-----------------|--|---------------------|-------|
| | (A) | (B) | | | (C) | | | | (D) | (E) | | (F) | |
| | Name and title | Name and title Average Position (check all that apply) hours | | | | | Reportable | Reportable | | Estimate | | | |
| | | | | 1. | Τ_ | IK a | Нсе | F | compensation | compensation | | amount o | of |
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| | | | d eo | i e | e r | y e | s s y | r | (W-2/1099-MISC) | (W-2/1099-MISC) | | organiz and rela | |
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| 1b_ | Total | | | | | ••• | | | 15,000 | | L | | 0 |
| 2 | Total number of individuals (including those in 1a) who | received mo | ore tha | ın ş | 100, | ,000 | ın rep | опас | ne compensation t | rom the | | | |
| | organization • | | | | | | | | · · · · · · · · · · · · · · · · · · · | | - | Yes | No |
| 3 | Did the organization list any former officer, director or t | rustee kevie | emnlo | /ee | or h | uahe | est con | nnen | sated | | | 163 | |
| • | employee on line 1a? If "Yes," complete Schedule J for | - | | | | | | | | | 3 | х | |
| 4 | For any individual listed on line 1a, is the sum of report | | | | | | | | | | - | | |
| | the organization and related organizations greater than | | | | | | | | | | | | |
| | Individual · · · · · · · · · · · · · · · · · · · | | | | | | | | | | 4 | | Х |
| 5 | Did any person listed on line 1a receive or accrue comp | pensation fro | om any | un: | rela | led c | rganız | ation | n for | | | | |
| | services rendered to the organization? If "Yes," comple | te Schedule | J for s | such | n pei | rson | | | | | 5 | | X |
| Se | ction B. Independent Contractors | | | | | | | | | | | | |
| 1 | Complete this table for your five highest compensated in | ndependent | contra | acto | rs th | at re | ceive | d mo | re than \$100,000 | of | | | |
| | compensation from the organization | | | | | | | | | | | | |
| | (A) | | | | | | | | (B) | | | (C) | |
| | Name and business address | | | | | | | | Description of se | ervices | Compe | ensation | · |
| | | | | | | | | | | | | | |
| | | | - | | | | | | | | | | |
| | | | | | | | | _ | | | | | |
| — | | | | | | | | | | | | | |
| 2 | Total number of independent contractors (including the | se in 1) who | recen | /ed i | mor | e tha | n \$10 | 0 00 | O in | | | | |
| | compensation from the organization | | . 5561 | Ju 1 | | | Ψ10 | 2,00 | - ··· | | | | |

| C | Net income or (loss) from sales of inventory • • | · · · · · • • • • • • • • • • • • • • • | | _ | | |
|-----|--|---|---------|-------|---|--|
| П | Miscellaneous Revenue | Business Code | | | | |
| 11a | | | | | | |
| b | , | | | | | |
| 0 | | | | | | |
| d | All other revenue | | | | | |
| e | Total. Add lines 11a-11d · · · · · · · · · · | • • • • • • | | | | |
| 12 | Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 9c. 10c. and 11e | | 163,992 | 2,979 | d | |

20-0425341

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (C) Management and (D) Fundraising (B) Program service Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to governments and 1,998 1,998 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 · · · · · · · · · · · · · · · · Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members • • • • • • • • • 5 Compensation of current officers, directors, 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) · · · · · · 3,000 7 15,000 12,000 Other salaries and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) q 230 918 10 1,148 11 Fees for services (non-employees) а Management b Accounting 275 275 C d Professional fundraising services See Part IV, line 17 е Investment management fees · · · · · · · · · · · · f g 12 Advertising and promotion - - -8,395 8,395 4,072 4,072 13 Office expenses · · · · · · 2,000 1,000 1,000 14 Information technology 15 Occupancy · · · · · · · · · 16 17 1,131 1.131 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings · · · 20 21 22 Depreciation, depletion, and amortization 1,484 1,484 23 Insurance 24 Other expenses litemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below) 1,028 SALES TAX 1,028 SEE ATTACHED 107,198 101,867 5,331 BANK CHARGES 1,515 1,215 300 C d INTERNET AND EMAIL 425 425 POSTAGE SHIPPING 244 244 121,773 Total functional expenses. Add lines 1 through 24f · · 145,913 24,140 25 0 26 Joint Costs. Check here ▶ If following \ SOP 98-2 Complete this line only if the organization organization reported in column (B) joint costs from a combined educational campaign and

| Pa | <u>rt X _</u> | Balance Sheet | | | · |
|------------|-----------------|--|---|--|--------------|
| | | | (A) | ì | (B) |
| _ | | | Beginning of year | <u> </u> | End of year |
| | 1 | Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · · | 25,270 | 1 | 43,440 |
| | 2 | Savings and temporary cash investments | 30,000 | 2 | 30,000 |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | | 4 | |
| | 5 | Receivables from current and former officers, directors, trustees, key | | | |
| | | employees, or other related parties. Complete Part II of Schedule L | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section | | | |
| | | 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete | , | 1 | |
| | | Part II of Schedule L · · · · · · · · · · · · · · · · · · | | 6 | |
| A s | 7 | Notes and loans receivable, net | | 7 | |
| 5 5 | 8 | Inventories for sale or use | | 8 | |
| е | 9 | Prepaid expenses and deferred charges | | 9 | |
| t s | 10a | Land, buildings, and equipment cost basis · · · · · 10a | | | |
| 3 | Ь | Less accumulated depreciation Complete | - , . | | _ |
| | " | Part VI of Schedule D · · · · · · · · · · · · · · · · 10b | | 10c | |
| | | Investments - publicly traded securities | | 11 | |
| | 11 | | | 12 | |
| | 12 | Investments - other securities See Part IV, line 11 - · · · · · · · · · · | | | |
| | 13 | Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets See Part IV, line 11 · · · · · · · · · · · · · · · · · · | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 55,270 | 16 | 73,440 |
| | 17 | Accounts payable and accrued expenses | 368 | 17 | 459 |
| | 18 | Grants payable • • • • • • • • • • • • • • • • • • • | | 18 | |
| Ļ | 19 | Deferred revenue | | 19 | |
| i a | 20 | Tax-exempt bond liabilities · · · · · · · · · · · · · · · · · · · | | 20 | |
| b | 21 | Escrow account liability Complete Part IV of Schedule D · · · · · · · · · [| | 21 | |
| į | 22 | Payables to current and former officers, directors, trustees, key | | | ** |
| ¦ | | employees, highest compensated employees, and disqualified | | , | `` |
| t | | persons. Complete Part II of Schedule L | | 22 | |
| i e | 23 | Secured mortgages and notes payable to unrelated third parties · · · · · · · · | | 23 | |
| S | 24 | Unsecured notes and loans payable | | 24 | |
| | 25 | Other liabilities Complete Part X of Schedule D | | 25 | |
| | 26 | Total liabilities. Add lines 17 through 25 | 368 | 26 | 459 |
| | + | Organizations that follow SFAS 117, check here | | | |
| | Ì | complete lines 27 through 29, and lines 33 and 34. | | | |
| 1 F | 27 | Unrestricted net assets · · · · · · · · · · · · · · · · · · · | 54,902 | 27 | 72,981 |
| n | 28 | Temporarily restricted net assets | | 28 | |
| ď | 29 | Permanently restricted net assets | | 29 | |
| В | 23 | Organizations that do not follow SFAS 117, check here | | . 23 | |
| а | | _ | | | |
| e I a | 1 20 | and complete lines 30 through 34. | | | |
| n . | 30 | Capital stock or trust principal, or current funds | | 30 | |
| C | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| e s | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| • | 33 | Total net assets or fund balances | 54,902 | 33 | 72,981 |
| | 34 | Total liabilities and net assets/fund balances | 55,270 | 34 | 73,440 |
| <u>Par</u> | t XI | Financial Statements and Reporting | | | |
| | | | | | Yes No |
| 1 | Accoun | nting method used to prepare the Form 990 💢 Cash 🔲 Accrual 🔲 Other | r | | |
| 2a | Were th | he organization's financial statements compiled or reviewed by an independent accounta | nt? | | · · · 2a X |
| b | Were th | he organization's financial statements audited by an independent accountant? | • | | · · · 2b X |
| | | to lines 2a or 2b, does the organization have a committee that assumes responsibility fo | r oversight of | | - - |
| | | lit, review, or compilation of its financial statements and selection of an independent acco | | | 2c |
| | | sult of a federal award, was the organization required to undergo an audit or audits as se | | | |
| | | gle Audit Act and OMB Circular A-133? | • • • • • • • • • • | | · · · 3a X |
| | | " did the organization undergo the required audit or audits? | | | |
| | | | | | 1 1 1 |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

OMB No 1545-0047

2008

Open to Public

Department of the Treasury ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions. Inspection Internal Revenue Service Name of the organization Employer identification number 20-0425341 ATHFEST INC Public Charity Status (All organizations must complete this part) (see instructions)

| | THE | | | y Status (All olganiz | | | | (366 11311 | uctions) | | | | |
|-----|---------------|-------------------------|---|-------------------------------|--|--------------|--|--------------|--|-------------|-----------|--------|------------|
| The | orgai | nization is not a priva | ite foundation beca | iuse it is (Please check | only one o | rganizatıor | ۱) | | | | | | |
| 1 | | A church, convention | on of churches, or a | issociation of churches d | lescribed i | n section 1 | 170(b)(1)(A | .)(i). | | | | | |
| 2 | | A school described | ın section 170(b)(1 |)(A)(ii). (Attach Schedule | eE) | | | | | | | | |
| 3 | | A hospital or a coop | erative hospital se | rvice organization descri | bed in sec | tion 170(b |)(1)(A)(iii). | (Attach So | chedule H |) | | | |
| 4 | | A medical research | organization opera | ited in conjunction with a | hospital d | escribed ii | n section 1 | 70(b)(1)(A |)(iii). Ente | r the hospi | tal's nam | ıe, | |
| | _ | city, and state | | | | | | | | | | | |
| 5 | \Box | An organization ope | erated for the benef | fit of a college or univers | ity owned | or operate | by a gove | ernmental | unıt descri | bed in | | | |
| | | section 170(b)(1)(A) |)(iv). (Complete Pa | rt II) | | | | | | | | | |
| 6 | | A federal, state, or le | ocal government o | r governmental unit desc | ribed in se | ection 170 | b)(1)(A)(v) | | | | | | |
| 7 | \mathbf{x} | • | • | a substantial part of its | | | | | the genera | oublic | | | |
| | لحما | described in section | • | · | | J | | | 3 | | | | |
| 8 | | | | 170(b)(1)(A)(vi). (Comp | lete Part II | ١ | | | | | | | |
| 9 | H | • | | | | • | ntributions | member | shin fees: | and arnee | | | |
| • | ш | • | n organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross | | | | | | | | | | |
| | | | receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses | | | | | | | | | | |
| | | • • | | | | | | 11 (01) 1101 | ii Dusiliess | 003 | | | |
| 10 | $\overline{}$ | | | e 30, 1975 See section | | | | n)/4) /non | .notruotion | a) | | | |
| 10 | H | • | • | ed exclusively to test for p | | • | - | | | • | | | |
| 11 | Ш | • | • | ed exclusively for the ben | • | | | | - | | | | |
| | | • • | | orted organizations desc | | • | | , | | section | | | |
| | | <u> </u> | . — | s the type of supporting of | ~ ~ | _ | | | | <u> </u> | | | |
| | ~ | a Type I | b Typ | _ | _ •. | -Functiona | | | d | туре | III-Other | | |
| е | \Box | - | • | organization is not contro | | - | | | | | | | |
| | | • | - | ers and other than one or | more pub | licly suppo | rted organ | izations de | escribed in | section | | | |
| | | 509(a)(1) or section | * | | | | | | | | | | |
| f | | If the organization re | eceived a written de | etermination from the IRS | S that it is | a Type I, T | ype II, or T | ype III sup | porting | | | | |
| | | organization, check | | • • • • • • • • • • • • | | • • • • • | • • • • • | • • • • • | • • • • • | • • • • • | • • • • | • • • | • • ∟ |
| g | | Since August 17, 20 | 006, has the organi | zation accepted any gift | or contribu | tion from a | iny of the | | | | | | |
| | | following persons? | | | | | | | | | | | |
| | | (i) A person who | directly or indirectly | controls, either alone or | together v | vith persor | ns describe | ed in (ii) | | | | Yes | No |
| | | and (III) below, | the governing bod | y of the supported organ | ization? | • • • • • | • • • • • | • • • • • | • • • • • | • • • • • | 11g(i) | | |
| | | (ii) A family memb | er of a person desc | cribed in (i) above? •• | | • • • • • | • • • • • | • • • • • | • • • • • | • • • • • | 11g(ii) | | |
| | | (iii) A 35% controlle | ed entity of a perso | in described in (i) or (ii) a | bove? · | • • • • • | • • • • • | • • • • • | • • • • • | • • • • • | 11g(iii) | | |
| h | | Provide the following | g information about | the organizations the or | rganization | supports | | | | | | | |
| | ∩ Nai | me of supported | (ii) EIN | (iii) Type of organization | (N) is the (| organization | (v) Did y | ou notify | (vi) | s the | (Arii) | Amount | of. |
| | • • | organization | [[, | (described on lines 1-9 | | sted in your | the organiza | • | | tion in col | | upport | U , |
| | | | | above or IRC section | governing | document? | (i) of your | support? | (i) organize | S? | | | |
| | | | | (see instructions)) | Yes | No | Yes | No | Yes | No | 1 | | |
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| - | | | | | | <u> </u> | | | | · | <u> </u> | | |
| | | | | | [| | [| | { | | | | |
| | | | | | | | | | | | <u> </u> | | |
| | | | | | [| [| | | [| | [| | |

18

| Sched | ule A (Form 990 or 990-EZ) 2008 ATHFEST INC | | | | | 20-0425341 | Page 2 |
|--------------------|--|---------------------------------------|----------------------|-------------------|------------------|-------------------|-------------------|
| | t II Support Schedule for Organiza | tions Descri | bed in Section | ons 170(b)(1 |)(A)(iv) and | 170(b)(1)(A)(v | ri) |
| | (Complete only if you checked the box on | | | | | | · |
| Sec | tion A. Public Support | | | | | | |
| Cale | endar 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 | ĺ | | | | | |
| | include any "unusual grants") | 78,090 | 95,426 | 113,965 | 125,066 | 161,013 | 573,560 |
| 2 | Tax revenues levied for the organization's | | İ | | | | |
| | benefit and either paid to or expended on | | | | | | |
| | its behalf · · · · · · · · · · · · · · · · · · · | | | | | | |
| 3 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | ĺ | | | |
| | organization without charge · · · · · · · | | | | | | |
| 4 | Total. Add lines 1-3 | 78,090 | 95,426 | 113,965 | 125,066 | 161,013 | 573,560 |
| 5 | The portion of total contributions by each | _ | _ | • | | l | |
| | person (other than a governmental unit or | ١٨ | , , | | - 1 | | |
| | publicly supported organization) included | | | • | ٠, | | |
| | on line 1 that exceeds 2% of the amount | | • | | | | |
| _ | shown on line 11, column (f) | | | - : | * | | |
| 6 | Public support. Subtract line 5 from line 4 · · | | | | | <u>.</u> | 573,560 |
| | tion B. Total Support | · · · · · · · · · · · · · · · · · · · | | | | | |
| | ndar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 7 | Amounts from line 4 | 78,090 | 95,426 | 113,965 | 125,066 | 161,013 | 573,560 |
| 8 | Gross income from interest, dividends, payments received on securities loans, | | | I | | | |
| | rents, royalties and income from similar | | 207 | 7.40 | | | |
| | sources | 65 | 387 | 748 | 738 | 669 | 2,607 |
| 9 | Net income from unrelated business | | | | | | |
| | activities, whether or not the business is | | | J | , | ļ | |
| | regularly carried on | | | | | | |
| 10 | Other income Do not include gain or | | | ţ | } | | |
| | loss from the sale of capital assets | 11,910 | i | Í | 9,884 | 2,310 | 24 104 |
| 11 | (Explain in Part IV) | 11,910 | | | 9,004 | 2,310 | 24,104 600,271 |
| ' I 12 | Total support. Add lines 7 through 10 { Gross receipts from related activities, etc. (see instri | ~ - | | | ···· | 12 | 600,271 |
| | , , , | • | | | | | |
| 13 | First five years. If the Form 990 is for the organization check this box and stop here | on's first, second | l, third, fourth, or | fifth tax year as | a section 501(c) | (3) organization, | |
| | ion C. Computation of Public Support | | | | | | • • • • • |
| <u> 2eci</u> 4 | Public support percentage for 2008 (line 6, column (| | 11 column (ft) | | | 14 9 | 5.55 % |
| 5 | Public support percentage from 2007 Schedule A, F | | | | F | 15 | |
| | 33 1/3% support test - 2008. If the organization did i | | | | L | | |
| • | and stop here. The organization qualifies as a public | | | | | | · · · · ▶ 🗓 |
| b | 33 1/3% support test - 2007. If the organization did i | | = | | | | لما ا |
| - | box and stop here. The organization qualifies as a p | | | | | | ▶ 🗀 |
| 7a | 10%-facts-and-circumstances test - 2008. If the org | | = | | | | |
| | more, and if the organization meets the "facts-and-c | | | | | | |
| | organization meets the "facts-and-circumstances" te | | | | | | ▶ □ |
| | 10%-facts-and-circumstances test - 2007. If the org. | - | | | _ | | ۔ ۔ |

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

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)

| <u>Sec</u> | tion A. Public Support | | T | | | · · · · · · · · · · · · · · · · · · · | |
|-----------------|--|-------------------|-------------------|--------------------|---|---------------------------------------|----------------|
| Cal | endar 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 | | | | ļ | ļ <u>.</u> | |
| 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 | | | | | | |
| С | Add lines 7a and 7b · · · · · · · · · · · · · · · · · · | | | | | | |
| 8 | Public support (Subtract line 7c from line 6) | <u> </u> | <u> </u> | | | ., | <u>:</u> |
| | tion B. Total Support | | | 1 | T | T | |
| | endar year (or fiscal year beginning in) | (a) 2004 | (b) 2005 | (c) 2006 | (d) 2007 | (e) 2008 | (f) Total |
| 9 10a | Amounts from line 6 | | | | | | |
| 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) | <u> </u> | <u> </u> | <u></u> | <u> </u> | <u> </u> | <u> </u> |
| 4 | First five years. If the Form 990 is for the organizate check this box and stop here | | | | | | |
| _ | tion C. Computation of Public Support | <u>Percentage</u> | | | | T T | |
| 5 | Public support percentage for 2008 (line 8, column | | | | | 15 | |
| 6 | Public support percentage from 2007 Schedule A, F | | | | • | 16 | %_ |
| <u>Sec</u> 7 | tion D. Computation of Investment Inco Investment income percentage for 2008 (line 10c, co | | | mn (fl) | | 17 | |
| 8 | Investment income percentage for 2006 (line 10c, or Investment income percentage from 2007 Schedule | | • | | | 18 | % _ |
| 9a | 33 1/3% support tests - 2008. If the organization did | d not check the b | ox on line 14, ar | nd line 15 is more | | and line 17 is | 76 |
| b | not more than 33 1/3%, check this box and stop her 33 1/3% support tests - 2007. If the organization did | - | | | _ | | ▶ [] ne 18 |
| 20 | is not more than 33 1/3%, check this box and stop be Private Foundation: If the organization did not check | - | · · | | • | | ▶ [] |

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

► To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

2008

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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

If the organization answered "Yes," to 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

| | organization answered "Yes," to Form | · · · · · · · · · · · · · · · · · · · | | | |
|-----|---|---|-----------------------|---|--|
| | Section 501(c)(4), (5), or (6) organization | s Complete Part III | | | |
| | me of organization | | | ' ' | lentification number |
| | HFEST INC | | | 20-042 | |
| Pa | To be completed by a See the instructions for Sche | all organizations exempt under | r section 501 | (c) and section 527 | organizations. |
| 1 | Provide a description of the organization | | | | |
| 2 | Political expenditures · · · · · · · · | · • • • • • • • • • • • • • • • • • • • | | • • • • • • • • • • • • • • • • • • • | |
| 3 | Volunteer hours · · · · · · · · · | | | | |
| | | | | | |
| Pa | See the instructions for Sche | | | | |
| 1 | Enter the amount of any excise tax incur | rred by the organization under section 4 | 955 | · · · · · · • • \$ | |
| 2 | Enter the amount of any excise tax incur | red by organization managers under se | ction 4955 | • • • • • • • • • • • • • • • • • • • | |
| 3 | If the organization incurred a section 499 | 55 tax, did it file Form 4720 for this year | , | • • • • • • • • • • • • • | Yes No |
| 4a | Was a correction made? | | | • • • • • • • • • • • • • | · Yes No |
| b | If "Yes," describe in Part IV | | | | |
| Pai | To be completed by a See the instructions for Sche | all organizations exempt under | r section 501 | (c), except section | 501(c)(3). |
| 1 | Enter the amount directly expended by the | he filing organization for section 527 exe | empt function | | |
| | activities | | | · · · · · · • \$ | |
| 2 | Enter the amount of the filing organization | on's funds contributed to other organizat | ons for section | | |
| | 527 exempt function activities • • • • • | | | · · · · · · • \$ | |
| 3 | Total of direct and indirect exempt functi | on expenditures Add lines 1 and 2 and | enter here and | | |
| | on Form 1120-POL, line 17b · · · · | | | • • • • • • • • • • • • • • • • • • • | |
| 4 | Did the filing organization file Form 1120 |)-POL for this year? | | · · · · · · · · · · · · · · · · · · · | · Yes No |
| 5 | State the names, addresses and employ | er identification number (EIN) of all sec | tion 527 political of | rganizations to which payr | nents |
| | were made. Enter the amount paid and i | ndicate if the amount was paid from the | filing organization | 's funds or were political | |
| | contributions received and promptly and | directly delivered to a separate political | organization, such | n as a separate segregate | d |
| | fund or a political action committee (PAC | c) If additional space is needed, provide | information in Pa | rt IV | _ |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds if none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0- |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Sche | dule C (Farm 990 or 990-EZ) 2008ATHFEST INC | | | | 20-042 | 5341 Page 2 |
|--------|--|---------------------------------------|-----------------------|---------------------|---------------------------------------|----------------|
| Pa | rt II-A To be completed by organ | izations exemp | t under section | n 501(c)(3) that f | iled Form 5768 | |
| | (election under section 50 | | | e C for details | | |
| 4 | Check if the filing organization belongs | • . | | | | |
| B | Check if the filing organization checked | box A and "limited c | ontrol" provisions ap | oply. | | |
| | Limits on Lob | bying Expenditures | i | | (a) Filing | (b) Affiliated |
| | (The term "expenditures" r | , | | | organization's totals | group totals |
| | | | | | tours | |
| 1a | Total lobbying expenditures to influence public | . ,- | • | | | |
| b | | • • | | | | |
| ۲ C | Total lobbying expenditures (add lines 1a and 1 | | | | } | |
| d | Other exempt purpose expenditures • • • • | | | | | |
| e f | Total exempt purpose expenditures (add lines | | | | | |
| • | Lobbying nontaxable amount Enter the amoun columns | t from the following t | able in botti | | | j |
| ١ | If the amount on line 1e, column (a) or (b) is: | The lebbying | nontaxable amount | lie · | | |
| | Not over \$500,000 | 20% of the an | nount on line 1e | . 15 . | • | . . |
| | 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 | | 10% of the excess | | _ | , |
| | Over \$1,500,000 but not over \$17,000,000 | | 5% of the excess o | ver \$1,500,000 | Co- | |
| Į | Over \$17,000,000 | \$1,000,000 | | | , , | İ |
| g | Grassroots nontaxable amount (enter 25% of li | ne 1f) · · · · · | | | <u> </u> | |
| h | | | | | | |
| i | Subtract line 1f from line 1c Enter -0- if line f is | more than line c . | | | | |
| j | If there is an amount other than zero on either li | ine 1h or line 1i, did | the organization file | Form 4720 reporting | | |
| | section 4911 tax for this year? - · · · · | · · · · · · · · · · · · · · · · · · · | | | · · · · · · · · · · · · · · · · · · · | Yes No |
| | (Some organizations that | | h) election do not h | | | |
| | Lobb | ying Expenditures (| Ouring 4-Year Avera | iging Period | | |
| | · · · · · · · · · · · · · · · · · · · | | | | (4) 0000 | (a) T-1-1 |
| | Calendar year (or fiscal year beginning in) | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total |
| | | | | | | |
| 2a | Lobbying non-taxable amount | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | , | | • | , . | |
| С | Total lobbying expenditures | | | | | |
| d | Grassroot non-taxable amount | | | | | |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | ` | 2,5 | ٠. | |
| f | Grassroots lobbying expenditures | | | | | |

EEA

Schedule C (Form 990 or 990-EZ) 2008

| Sched | ule C (Form 990 or 990-EZ) 2008ATHFEST INC | 20- | 0425 | 341 | Page 3 |
|--------|--|---------------------|---------------------------------------|----------------|--------|
| Pa | To be completed by organizations exempt under section 501(c)(3) that have N 5768 (election under section 501(h)). See the instructions for Schedule C for details | OT fi | led F | orm | |
| | | (; | a) | (b) | |
| | | Yes | No | Amou | unt |
| 1 | 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 | iki ne : | | 2 | - |
| | referendum, through the use of. | | | | |
| a | Volunteers? | | _X_ | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | X | | |
| q | Mailings to members, legislators, or the public? | | X | | |
| d e | Publications, or published or broadcast statements? | | X | | |
| f | Grants to other organizations for lobbying purposes? | | $\frac{\wedge}{x}$ | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? • • • • • • • • • • • • • • • • • • • | | $\frac{\hat{\mathbf{x}}}{\mathbf{x}}$ | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? • • • • • • • • • • • • • • • • • • • | | X | | |
| i | Other activities? If "Yes," describe in Part IV | | X | | |
| j | Total lines 1c through 1: | | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | Х | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | , | | | |
| С | 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? | | Х | | |
| Par | To be completed by all organizations exempt under section 501(c)(4), section section 501(c)(6). See the instructions for Schedule C for details | 501 | (c)(5), | or | |
| | | | | Ye | s No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | • • • | | 2 | |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | • • • | • • • | 3 | |
| 1 | section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR question 3 is answered "Yes." See Schedule C instructions for details Dues, assessments and similar amounts from members | if Pa | rt III- <i>A</i> | \ , | |
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of | | | | |
| | political expenses for which the section 527(f) tax was paid). |]. | | | |
| а | Current year · · · · · · · · · · · · · · · · · · · | ٠٠ | 2a | | |
| b | Carryover from last year · · · · · · · · · · · · · · · · · · · | ٠٠ | 2b | | |
| С | Total | ١٠٠ | 2c | | |
| | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues · · · · · · · | ٠٠ | 3 | | |
| | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess | 1 | - 1 | | |
| | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political | : | | | |
| | expenditure next year? | ` | 4 | | |
| | Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) · · · · · · · · · · · · · · · · · · | | 5 | | |
| | t IV Supplemental Information lete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, and Part II-B, line complete this part for any additional information. | i | | | |
| _ | | | | | |
| | | | | | |
| | | | | | |
| | | | | - | |
| | | | | | |
| | | | | | |

| . 990 | Overflow Statement | 2008 Page 1 |
|----------------------------|--------------------|-----------------------|
| Name(s) as shown on return | | FEIN |
| ATHFEST INC | | 20-0425341 |

| Description | | | Amount |
|-------------------------|---------------|-----|---------|
| ACTIVITY FEE | | \$ | 1,405 |
| ARTIST AWARD EXPENSE | | | 1,402 |
| AFTER SCHOOL PROGRAM | | | 3,200 |
| BARRICADES TENTS TABLES | | | 5,083 |
| CD PRODUCTION | | | 4,002 |
| COMMISSIONS | | | 9,530 |
| DUES MEMBERSHIPS | | | 376 |
| EQUIPMENT | | | 200 |
| LEGAL PROFESSIONAL | | | 219 |
| MEALS ENTERTAINMENT | | | 1,720 |
| MUSIC ACTS - INDOORS | | | 6,925 |
| MUSIC - OUTDOORS | | | 16,425 |
| OTHER EXPENSES | | | 1,858 |
| PERMITS | | | 2,004 |
| PRINTED MATERIALS | | | 7,314 |
| PROFESSIONAL SERVICES | | | 8,421 |
| PURCHASES | | | 9,856 |
| SECURITY | | | 2,540 |
| STAGING LIGHTS SOUND | | | 6,992 |
| TRASH PORTA JONS | | | 1,856 |
| UTILITIES GENERATORS | | | 5,254 |
| VOLUNTEER EXPENSES | - | | 2,285 |
| RENTAL SPACE | · | | 3,000 |
| | Total: | _\$ | 101,867 |

| Description | ; | Amount |
|----------------|------|--------|
| OTHER EXPENSES | \$ | 5,331 |
| Total: | \$ | 5,331 |
| | ==== | |

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ATHFEST INC

Employer identification number 20-0425341

| Pa | rt I Questions Regarding Compensation | | | |
|----|--|--|-----|-----|
| | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form | | | |
| | 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items | | | |
| | First-class or charter travel Housing allowance or residence for personal use | | | |
| | Travel for companions Payments for business use of personal residence | | | , , |
| | Tax indemnification and gross-up payments Health or social club dues or initiation fees | | | , |
| | X Discretionary spending account Personal services (e.g., maid, chauffeur, chef) | | | |
| ь | If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or | | | |
| | provision of all of the expenses described above? If "No," complete Part III to explain | 1b | X | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all | | | |
| | officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2 | X | L |
| _ | | | | |
| 3 | Indicate which, if any, of the following the organization uses to establish the compensation of the | | | - |
| | organization's CEO/Executive Director Check all that apply. | | | |
| | Compensation committee Written employment contract | | ĺ | ~ |
| | Independent compensation consultant Compensation survey or study | | | j l |
| | Form 990 of other organizations X Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, Part VII, Section A, line 1a | 1 1 | | - |
| а | Receive a severance payment or change of control payment? | 4a | | X |
| b | Participate in, or receive payment from, a supplemental nonqualified retirement plan? • • • • • • • • • • • • • • • • • • • | 4b | | X |
| С | Participate in, or receive payment from, an equity-based compensation arrangement? | 4c | | X |
| | If "Yes" to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III | | | |
| | | | | |
| _ | Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. | 1 1 | ļ | i i |
| 5 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: | . | | |
| а | | 5a | | X |
| b | | 5b | | X |
| | If "Yes," to line 5a or 5b, describe in Part III | | | |
| 6 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any | 1 [| | |
| | compensation contingent on the net earnings of | <u> </u> | j | |
| а | The organization? • • • • • • • • • • • • • • • • • • • | 6a | | X |
| b | Any related organization? | 6b | | X |
| | If "Yes," to line 6a or 6b, describe in Part III | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed | | | |
| | payments not described in lines 5 and 6? If "Yes," describe in Part III | 7 | | Х |
| 8 | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was | | | |
| | subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe | |] | |
| | ın Part III | 8 | I | x |

ATHFEST INC

Schedule J (Form 990) 2008

Page 2

20-0425341

Use Schedule J-1 if additional space is needed Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is ne For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note: The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

| | (B) Breakdown of | (B) Breakdown of W-2 and/or 1099-MISC compensation | C compensation | | | | |
|--------------|------------------|--|---------------------------|--------------|----------------|----------------------|----------------------------------|
| omeN (A) | 0000 | 16.00 | | (C) Deferred | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|) (C) | compensation | (ii) bonus & incentive compensation | (m) Orner compensation | compensation | benefits | (B)(ı)-(D) | reported in prior Form 990 or |
| | | | | | | | Form 990-EZ |
| | (i) 15,000 | | | | | 15,000 | 15,000 |
| JARED BAILEY | (ii) | | | | | | |
| | () | | | | | | |
| 1 | (II) | | | | | | |
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| | (II) | | | | | | |
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| | | | | | | | Schedule J (Form 990) 2008 |

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

▶ Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury or Form 990-EZ, Part V, line 38b or 40b. Internal Revenue Service Name of the organization

Employer identification number

| ATHFEST | | | | | | | | 2 | 0-04 | 2534 | 1 | | |
|-------------|---|-------------|---|----------------|----------------------|--|-------------------|--|----------------|--|--------------|------------------------------|-----------------|
| Part I | Excess Benefit Transaction To be completed by organizations t | ns (section | 1 (501(c) |)(3) and se | ection 501(c) | (4) organiz | zations only) | m 990 | .F7 P | art V | line 40 |)h | |
| 1 | (a) Name of disqualified person | nat answere | eu res | on roma s | | | on of transaction | | LE, 1 | ait v, | 1116 40 | (c) Cor | rected? |
| | (a) Haine of disqualities person | | | | | | | | | | | Yes | No |
| | | | | <u></u> | | | | | | | | <u> </u> | <u> </u> |
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| | the amount of tax imposed on the org | | | | | | | ! | > \$ | | | | |
| 3 Enter | the amount of tax, if any, on line 2, ab | ove, reimbu | irsed by | the organ | ization • • | • • • • • | • • • • • | •• | \$ | | | | |
| Part II | Loans to and/or From Inte | | | | | | | | | - 22- | | | |
| | To be completed by organizations t | nat answere | ed "Yes" | | | line 26, or | Form 990-E. | Z, Par | t V, IIN | e 38a | | | |
| (a) (| Name of interested person and purpose | (b) Loan to | to or from nization? | 1 '' | Onginal al amount | (d) Ba | lance due | (e) In d | efault? | by boa | ard or | (g) W agree | Intten ment? |
| | | То | From | ┪ | | | | Yes | No | Yes | No | Yes | No |
| | | 10 | From | | | | | 1.00 | | 100 | | 1.03 | |
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| Total · · | | | <u> </u> | | | 1 | | | l | | Щ | <u> </u> | <u> </u> |
| Part III | Grants or Assistance Ber To be completed by organizations | nefiting li | nteres | ted Per | sons. | line 27 | | l | | <u></u> | | L | |
| | (a) Name of interested person | (b) Rela | ationship b | oetween intere | ested person and | d the | (c) Ar | nount of | grant o | r type of | f assista | nce | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | - | | | | | | | | | | | |
| | | <u> </u> | | | | | | | | | | | |
| Part IV | Business Transactions In To be completed by organizations | | | | | line 28a, | 28b, or 28c | | | | | | |
| | (a) Name of interested person | interester | tionship b d person a rganizatioi | and the | (c) Amor transac | | (d) Des | cription | of trans | action | | (e) Sha organiz reveni | ation's |
| | | | | | 1 | | | | | | | Yes | No |
| LICIA N | ICKLES | OFFICER | \ | | | 2,808 | COMMISSI | ONS | | | | | X |
| RUSS HALI | LAUER | OFFICER | | | | 1,500 | CD PRODU | CTIO | <u>N</u> | | \neg | | X |
| PAUL THO | | OFFICER | | | | 275 | PROFESSI | ONAL | SER | VICE | | | X |
| ROY AUBI | REY | BOARD M | EMBER | | | | OFFICE R | | | | | | X |
| | | | | | | | | | | | | | |
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule L (Form 990, or 990-EZ) 2008

SCHEDULE O (Form 990)

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

ATHFEST INC

Employer identification number 20-0425341

| 01. Officer, directors, etc. family relationship (Part VI, line 2) |
|--|
| ALICIA NICKLES (PRESIDENT, SPONSORSHIP CHAIR) IS CO-OWNER OF FLAGPOLE MAGAZINE, A WEEKLY |
| PUBLICATION THAT COVERS THE MUSIC AND ARTS SCENE IN AND AROUND ATHENS, GEORGIA. THE |
| ORGANIZATION CONTRACTS WITH FLAGPOLE MAGAZINE TO PROVIDE COORDINATION OF SPONSORSHIP SALES |
| AND PRINTING OF THE FESTIVAL GUIDE. ATHFEST PAYS COMMISSIONS ON SPONSORSHIP SALES AND |
| SPONSOR TRADES TO FLAGPOLE AND IT'S EMPLOYEES WHO GENERATE SPONSOR REVENUES TO THE |
| ORGANIZATION AS WELL AS REIMBURSES FLAGPOLE FOR THE PRINTING COSTS OF THE FESTIVAL |
| GUIDE. |
| PAUL THOMAS (TREASURER, MERCHANDISE CHAIR) IS A CPA IN THE ATHENS AREA. HIS CLIENTS |
| INCLUDE MUSICIANS, BANDS, AGENTS, RECORD LABLES AND OTHERS IN THE MUSIC AND ARTS INDUSTRY |
| IN AND AROUND ATHENS. PAUL HAS BUSINESS RELATIONSHIPS WITH SEVERAL OF THE BOARD MEMBERS, |
| COMMITTEE CHAIRS AND/OR THEIR BUSINESSES. HIS FIRM IS COMPENSATED FOR THE PREPARATION OF |
| ANNUAL FORM 990. |
| RUSS HALLAUER (VICE-PRESIDENT, MARKETING CHAIR). HIS EMPLOYMENT IN THE MARKETING |
| AND ADVERTISING FIELD ADD TO THE ABILITY OF THE ORGANIZATION TO BETTER PROMOTE IT'S |
| PROGRAMS AND EVENTS. RUSS IS OWNER OF GHOSTMEAT RECORDS, WHICH IS CONTRACTED BY THE |
| ORGANIZATION TO PRODUCE AN ANNUAL COMPILATION MUSIC CD THAT FEATURES ATHENS AREA BANDS. |
| THE CD IS USED TO PROMOTE THE ANNUAL FESTIVAL AS WELL AS EDUCATE THE LISTENERS ABOUT THE |
| VARIETY OF MUSIC IN THE ATHENS AREA. SALES OF THE CD HELP FUND THE ORGANIZATION'S |
| EDUCATIONAL PROGRAMS. |
| TROY AUBREY (BOOKING CHAIR) IS RESPONSIBLE FOR COORDINATING AN AVERAGE OF 200 |
| BANDS THAT PERFORM AT THE ANNUAL FESTIVAL ON THREE OUTDOOR STAGES AND AS MANY AS 20 INDOOR |
| VENUES. TROY OWNS NOMAD ARTISTS, A BOOKING AGENCY FOR MUSICIANS, BANDS AND MUSIC VENUES. |
| THE ORGANIZATION CONTRACTS WITH NOMAD ARTISTS FOR THE BOOKING OF THE OUTDOOR STAGE BANDS. |
| THE ORGANIZATION ALSO RENTS OFFICE SPACE FROM ATHENSMISIC NET (CO-OWNED BY TROY) TROY'S |

| Schedule O (Form 990) 2008 | | age 2 |
|---|---------------------------------------|-------|
| Name of the organization | Employer identification number | |
| ATHFEST INC | 20-0425341 | |
| WIFE WORKS FOR FLAGPOLE MAGAZINE AND GENERATES SPONSORSHIP REVENUES FOR THE C | RGANIZATION | |
| AND SUBSEQUENTLY RECEIVES COMMISSIONS FROM THE ORGANIZATION. | | |
| | <u> </u> | |
| | | |
| 02. Member election for additional members (Part VI, line 7a) | | |
| COMMITTEE CHAIRS ARE NOMINATED BY THE BOARD FROM THOSE WHO VOLUNTEER FOR THE | POSITION. | |
| THE EXISTING COMMITTEE CHAIRS VOTE FOR THE NEXT YEARS SLATE OF CHAIR POSITION | S. COMMITTEE | |
| CHAIRS OF THE ORGANIZATION ELECT THE BOARD OF OFFICERS FOR THE YEAR. | | |
| | | |
| 03. Governing body decisions (Part VI, line 7b) | · · · · · · · · · · · · · · · · · · · | |
| DECISIONS BY THE BOARD ARE SUBJECT TO APPROVAL BY THE COMMITTEE CHAIRS. COMM | ITTEES ARE | |
| GIVEN BUDGETS AND ANY EXPENSES OUTSIDE THOSE BUDGETED ARE APPROVED BY THE BOA | RD IN | |
| ADVANCE. | · | |
| | ~ | |
| 04. Form 990 governing body review (Part VI, line 10) | · · · · · · · · · · · · · · · · · · · | |
| THE FORM 990 IS REVIEWED BY THE BOARD AND THE COMMITTEE CHAIRS PRIOR TO THE F | ILING OF THE | |
| RETURN. | | |
| | | |
| 05. Conflict of interest policy compliance (Part VI, line 12c) | | |
| A CONFLICT OF INTEREST POLICY IS REVIEWED AND SIGNED BY THE BOARD AND ALL COM | MITTEE CHAIRS | |
| ON AN ANNUAL BASIS. ALL EXISTING OR POTENTIAL CONFLICTS ARE MADE KNOWN TO TH | E BOARD AND | |
| THE CHAIRS. | | |
| | | |
| 06. CEO, executive director, top management comp (Part VI, line 15a) | | |
| JARED BAILEY IS THE DIRECTOR OF THE ORGANIZATION, AND THE ONLY PAID EMPLOYEE. | FOR | |
| 2008-2009 FISCAL YEAR HE IS A PART-TIME EMPLOYEE. JARED HAS EXTENSIVE TIES TO | O THE ATHENS | |
| JUSIC SCENE, FOUNDING SEVERAL NIGHTCLUBS AS WELL AS FLAGPOLE MAGAZINE OVER TH | E YEARS. | |
| | | |

| -Schedule @ (Form 990) 2008 | | Page 2 | |
|--|--------------------------------|--------|--|
| Name of the organization | Employer identification number | | |
| ATHFEST INC | 20-0425341 | | |
| JARED HAS BEEN WITH ATHFEST SINCE IT'S INCEPTION UNDER THE ATHENS DOWNTOWN DEVELOPMENT | | | |
| AUTHORITY OVER 13 YEARS AGO. HIS KNOWLEDGE OF THE COUNTY AND CITY PROCESSES NECESSARY TO | | | |
| PERMIT THE EVENT AND HIS CONTACTS THROUGHOUT THE MUSIC INDUSTRY ARE A VALULABLE ASSET TO | | | |
| THE ORGANIZATION. HIS PAY AND BENEFITS ARE DETERMINED BY THE EXECUTIVE BOARD AND SUBJECT | | | |
| TO APPROVAL BY THE COMMITTEE CHAIRS. | | | |
| | | | |
| 07. Other officer or key employee compensation (Part VI, line 15b | | | |
| CONTRACTS WITH OFFICERS, BOARD MEMBERS, COMMITTEE CHAIRS OR THEIR RELATED BUSINESS | | | |
| ENTITIES ARE ALL MADE THROUGH WRITTEN CONTRACTS AND APPROVED IN ADVANCE BY THE UNRELATED | | | |
| BOARD OFFICERS AND COMMITTEE CHAIRS. | | | |
| | | | |
| 08. Governing documents, etc, available to public (Part VI, line 19) | | | |
| CURRENTLY COPIES OF THE ORGANIZATIONS FORM 990 ARE MADE AVAILABLE FOR PUBLIC INSPECTION AT | | | |
| THE ORGANIZATION'S OFFICES DURING NORMAL BUSINESS HOURS. CONSIDERATION IS UN | DERWAY TO ADD | | |
| THE 990 TO THE WEB PAGE OR LINK TO THE GUIDESTAR SITE THAT CONTAINS COPIES OF THE | | | |
| ORGANIZATION'S 990. OTHER FINANCIAL REPORTS AND DOCUMENTS ARE ALSO OPEN TO PUBLIC | | | |
| INSPECTION AS REQUESTED. THERE ARE NO CURRENT PLANS TO POST FINANCIAL REPORTS TO THE WEB. | | | |
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Page 2

Schedule O (Form 990) 2008

| , | Statement of Program Service Accomplishments | 2008 ₀₁ |
|----------------------------|--|-----------------------------|
| Name(s) as shown on return | | Your Social Security Number |
| ATHFEST_INC | | 20-0425341 |

FORM 990, PART III(D)

PROGRAM SERVICE EXPENSES \$6451
GRANTS AND ALLOCATIONS INCLUDED IN ABOVE EXPENSE \$0
PROGRAM SERVICES REVENUE \$0

EXPLANATION

ATHFEST AFTERSCHOOL PROGRAM HOLDS MUSIC RELATED INFORMATIONAL AND EDUCATIONAL PROGRAMS FOR SCHOOL CHILDREN IN ATHENS. THIS PAST YEAR ATHFEST PRESENTED THIS EDUCATIONAL PROGRAM 40 TIMES TO 1000 SCHOOL CHILDREN. FIFTEEN MUSICIANS FROM THE ATHENS AREA PARTICIPATED IN THIS PROGRAM THAT TOTALED MORE THAN 50 HOURS OF LEARNING EXPERIENCE FOR THESE CHILDREN.