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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶The organization may have to use a copy of this return to satisfy state reporting requirements

A	For the	e 2011 cal	endar year, or tax year beginning OCTOBER 1, 2011 , and endir	ng SEPTEMBE	R 30, 2012				
В	•	applicable	C Name of organization FOND DU LAC FESTIVALS, INC	D Employer ide	entification number				
L	Address	change	Doing Business As	39-1387857					
	Name ch	nange	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone nu	ımber				
L	Initial ret	um	650 NORTH MAIN STREET	(920) 923-655	55				
	Terminat	ted	City or town, state or country, and ZIP + 4						
	Amende		FOND DU LAC WI 54935	G Gross receipt	s \$ 381,046				
	Application	on pending	l ·	a) Is this a group return	for affiliates? Yes X No				
_				b) Are all affiliates includ					
1	Tax-exem	npt status	501(c)(3) X 501(c) (4) ◀ (insert no) 4947(a)(1) or 527	If "No," attach a list ((see instructions)				
J	J Website: ► WWW FDLFEST.COM H(c) Group exemption number ►								
K	Form of o	rganization	X Corporation Trust Association Other ► L Year of t	formation 1983	M State of legal domicite WI				
	Part I		nmary						
	1				D SUPPORT FESTIVALS				
a	, [ECIAL EVENTS THAT SHOWCASE THE FOND DU LAC COMMUNITY W						
200			RT FROM THE COMMUNITY, WALLEYE WEEKEND, LIGHT UP THE CIT						
Governance			DU LAC EVENTS TAKE PLACE. THESE EVENTS BENEFIT MORE THAN		PROFIIS.				
, ç	2		nis box • If the organization discontinued its operations or disposed of more than 25 of voting members of the governing body (Part VI, line 1a)		3 9				
Activities &	3 4		of independent voting members of the governing body (Part VI, line 1a).		3 9 4 9				
1 5	5		mber of individuals employed in calendar year 2011 (Part V, line 2a)	<u></u>	5 3				
7 7	6		mber of volunteers (estimate if necessary) . CAN'T ESTIMATE (MORE	E THAN 500)	6				
7	7a		related business revenue from Part VIII, column (C), line 12		'a 0				
7_	b	Net unre	elated business taxable income from Form 990-T, line 34	7	7b 0				
S	- 1			Prior Year	Current Year				
Sevenue Revenue	, 8		itions and grants (Part VIII, line 1h)	205.5	070.004				
	9	_	n service revenue (Part VIII, line 2g)	385,5					
3	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)	2,4	1,982				
	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	387,9	381,046				
_	13		and similar amounts paid (Part IX, column (A), lines 1–3)	307,3	001,040				
	14		paid to or for members (Part IX, column (A), line 4)	·- 					
er.	15		other compensation, employee benefits (Part IX, column (A), lines 5–10)	136,4	20 82,285				
Expenses	16a	Professi	onal fundraising fees (Part IX, column (A), line 11e)						
XDe	b	Total fur	ndraising expenses (Part IX, column (D), line 25) ▶0						
Ш	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)	215,7					
	18		penses. Add lines 13–17 (must equal-Rant X column (A), line 25)	352,2					
	<u> 19</u>	Revenue	e less expenses. Subtract line 18 from line 12	35,7					
ts or	20	Total ac	1 1	eginning of Current Ye 326,7					
Asse	21		sets (Part X, line 16)	14,3					
Net Assets	를 22		ets or fund balances. Subtract line 21 from line 20.	312,3					
	art II		nature Block OGUEN, UI						
Und	der penalti	es of perjun	r, I declare that I have examined this return, including accompanying schedules and statements, a						
and	belief, it i	s true, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which p	preparer has any knowl	edge				
Si	gn	- ▶ -	Signature of officer	Date	20/1				
He	ere		Dean 12 Vollage, President	11/20	110				
		· [] ·	Type or print name and title	77 , 20	,				
_	-		Type preparer's name Preparer's signature	Date /	PTIN				
Pa	ıid		VARD L. FOY Edward L. FOY (PA)	10/15/1) Chec					
	eparer				1,3,2,2,3				
Us	se Only		s name FOY & SPRINGBORN, S.C.	Firm's EIN ► 39					
_			s address • 560 FOND DU LAC AVENUE, FOND DU LAC, WI 54935	Phone no (9	20) 922-2100				
			s this return with the preparer shown above? (see instructions)	· · · · · ·	X Yes No				
EA	Panen	vork Redii	ction Act Notice, see the senarate instructions		Form MMU (2011)				

	990 (2011)	FOND DU LAC FESTIVALS, INC.	39-1387857	Page 2
Pa	ırt'lll	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III		
1	DIRECT COMMU LIGHT U BENEFI	escribe the organization's mission. PROMOTE, AND SUPPORT FESTIVALS AND SPECIAL EVENTS THAT SHOWCASE THE NITY. WITH A GREAT DEAL OF HELP AND SUPPORT FROM THE COMMUNITY, WALLEY P THE CITY, AND FESTIVAL FOODS' TASTE OF FOND DU LAC EVENTS TAKE PLACE. T MORE THAN 100 LOCAL NON-PROFITS.	'E WEEKEND, HESE EVENTS	
2	the prior	rganization undertake any significant program services during the year which were not listed of Form 990 or 990-EZ?		X No
3	services ^e	rganization cease conducting, or make significant changes in how it conducts, any program ?	Tes	X No
4	Describe expense	the organization's program service accomplishments for each of its three largest program sers. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to add allocations to others, the total expenses, and revenue, if any, for each program service report	report the amount o	
4a	TASTE C) (Expenses \$ 29,362 including grants of \$ 0) (Rever OF FOND DU LAC - ONE DAY FESTIVAL HELD AT THE FDL COUNTY FAIRGROUNDS EXF E COMMUNITY AND VISITORS TO TASTE VARIOUS FOODS FROM MANY RESTAURANTS	PO CENTER - GEAF S - TICKET ADMISS	RED
4b	WALLEY FESTIVA) (Expenses \$ 180,161 including grants of \$ 0) (Reve E WEEKEND - 2 1/2 DAY JUNE FESTIVAL - COMMUNITY / VOLUNTEER ORIENTED - FRE L AT LAKESIDE PARK, FOND DU LAC LOTS OF EVENTS, ENTERTAINMENT, COMPETI SSIONS FOR THE WHOLE FAMILY AND VISITORS.	EE ADMISSION TIONS, AND	
4c	(Code: LOCAL F) (Expenses \$ 1,000 including grants of \$ 0) (Reversed) (ROMOTIONS - LIGHT UP THE CITY	nue \$	0.)
4d	-	gram services. (Describe in Schedule O.)		
	(Expense	s \$ 0 including grants of \$ 0) (Revenue \$ gram service expenses > 210.523	0)	

Form 990 (2011) FOND DU LAC FESTIVALS, INC. Part IV Checklist of Required Schedules

		The state of the s	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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?			X
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	2		 X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7		X
	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, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	Section in his
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		×
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	110		_^_
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		X
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>	11f		<u>X</u>
	Schedule D, Parts XI, XII, and XIII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
20~	If "Yes," complete Schedule G, Part III	19 20a		X_ X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	in 100 to and 200, and the organization attach a copy of its addited initialization into tection :	لستنا	990 ((2011)
				/

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	T		
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_x_
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25	24a		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		L
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			1
	to defease any tax-exempt bonds?	24c		<u> </u>
	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			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		_X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	00		V
^ ≠	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	27		X
20	entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	21		37
28	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	**********	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			Γ
•	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?	_		
	If "Yes," complete Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		J
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	24		V
2F-	III, IV, and V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within	33a		 ^-
IJ	the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	1000		 ^
J0	organization? If "Yes," complete Schedule R, Part V, line 2	36		ĺ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>i — </u>
J,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part]	
	VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		r
J	19? Note. All Form 990 filers are required to complete Schedule O	38	х	ĺ
	The state of the s			(2011)

Form 990 (2011)

Statements Regarding Other IR	S Filings and Tax	Compliance
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	Check if Schedule O contains a response to any question in this Part V.			<u> </u>
		lac ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	130 (2)	4 4 7	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		A Carry	
_	gaming (gambling) winnings to prize winners?	1c	X	1 1 (2 a a c)
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
_	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 3	Sea. 10. 12. 12. 12. 12. 12. 12. 12. 12. 12. 12	الأدن	liit
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	× 1/4
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	1 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	T. Ar	<u>X</u>
b	If "Yes," enter the name of the foreign country:	N. C.		#3-83 \$
-	See instructions for 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		 ^-
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	60		V
b	organization solicit any contributions that were not tax deductible?	6a		_ X_
D	gifts were not tax deductible?	6b		ĺ
7	Organizations that may receive deductible contributions under section 170(c).	7.7.	W.,	1. MZ 4
ʻa	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods N/A			1.00
-	and services provided to the payor?	7a	all similar	SetF
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
-	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	72. 73.		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Ĺ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?.	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	100		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring N/A	أأستسار		
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. N/A			
а	Did the organization make any taxable distributions under section 4966?	9a		-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9ь	500.2° 57	27.35
10	Section 501(c)(7) organizations. Enter:	於海		
а	Initiation fees and capital contributions included on Part VIII, line 12	1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter: N/A			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	N.		
12-	against amounts due or received from them)	12a	<u>aria</u>	استنتدا
12a		12a	- 4 gr	1-18
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a	B	1.25
а	Note. See the instructions for additional information the organization must report on Schedule O.	10a	7/12/3	35.30
ь	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans		高學	
С	Enter the amount of reserves on hand	BE	i vii	
I4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI

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FOND DU LAC FESTIVALS, INC. Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI. Section A. Governing Body and Management 1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? . . . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . 5 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? . . 8a 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? . . . b If "Yes." did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? . 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13. 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 14 Х Did the organization have a written document retention and destruction policy? . . 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? Х 15a 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its

	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard	200
	the organization's exempt status with respect to such arrangements?	16b
Sec	tion C. Disclosure	
17	List the states with which a copy of this Form 990 is required to be filed	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50	1(c)(3)s onl
	available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest	est
	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 t	:he
	organization: ► LEANNE DOYLE (920) 923-	6555
	650 N. MAIN STREET, FOND DU LAC, WI 54935	

Form 990 (2011) FOND DU LAC FESTIVALS, INC.									39-13878	57 Page 7
Part VII Compensation of Officers, Dire Employees, and Independent C Check if Schedule O contains a re	ontractors		-		-	•	-		ensated	🗇
Section A. Officers, Directors, Trustees, Key I		<u> </u>								
1a Complete this table for all persons required to be organization's tax year									ng with or within	the
 List all of the organization's current officers, of compensation Enter -0- in columns (D), (E), and List all of the organization's current key emple. List the organization's five current highest compensation (Box 5 of Foorganization and any related organizations. List all of the organization's former officers, keys 	(F) if no compe loyees, if any. S empensated emp orm W-2 and/or	nsati ee in ploye Box 7	on v stru es (7 of	vas ctio othe For	pai ns f er th m 1	d. for de nan a 099-1	finit n of MIS	ion of "key emp ficer, director, tr C) of more than	loyee " ustee, or key en \$100,000 from	nployee) the
\$100,000 of reportable compensation from the orga										
List all of the organization's former directors organization, more than \$10,000 of reportable complist persons in the following order: individual trusted compensated employees; and former such persons Check this box if neither the organization nor all	or trustees that pensation from t es or directors, i	at rec he or nstitu	eive gan ition	ed, i izat al ti	n th tion rust	e cap and a ees, o	aci any offic	related organiza ers; key employ	ations. ees; highest	
Chock the bex in ricities are organization for the	I	I						, carrotte cincor,	1.00.01, 0. 1.00	
(A) Name and Title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)				is both or/trust	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ALEX ULLENBERG DIRECTOR	1.00	х						0	0	0
(2) MATTHEW DOLL DIRECTOR	1.00	х						0	0	0
(3) SAM MCCLONE DIRECTOR	1.00	x						0	0	0
(4) LIV MOYER DIRECTOR	1.00	x						0	0	0
(5) PAM BEHNKE DIRECTOR	1.00	x						0	0	0
(6) DENNIS WINKLER PRESIDENT	1.00			Х				0	0	0
(7) DEAN VOLLMER VICE PRESIDENT	1.00			х				0	0	0
(8) RAY LAPIERRE SECRETARY	1.00	_		Х				0	0	0
(9) BILL MAUTHE TREASURER (10)	1.00			х				0	0	0
(11)			_							
(12)										

	Section A. Officers, Directors, T	rustees, Key Ei	mplo	yee	s, a	nd	High	<u>est</u>	Compensated	Employees	(coi	<u>ntinue</u>	}d)	
(A) Name and title		(B) Average hours per week	Position (do not check more than box, unless person is bott officer and a director/trust					an ee)	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amoun		
		(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	s [com fr org and	ipensation the anization related anization	e on ed
(15)											\dashv			
(16)						-					7			
(17)											1			
(18)														-
(19)											1			
(20)										-	┪		-	
(21)														
(22)											_			
(23)											7			
(24)														
(25)		<u></u>						-			\exists			
1b c d	Sub-total Total from continuation sheets to Part VII, Total (add lines 1b and 1c).						•	> >	0 0 0		0			0
2	Total number of individuals (including but not reportable compensation from the organization	limited to those	listed	ab	ove		no red		· · · · · · · · · · · · · · · · · · ·	100,000 of				
3	Did the organization list any former officer, die employee on line 1a? If "Yes," complete Sche									d 		3	Yes	No (설) X
4	For any individual listed on line 1a, is the sum the organization and related organizations greindividual											4		X
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "											5		ŽŽ.
Sec	tion B. Independent Contractors	,			-									
1	Complete this table for your five highest comp compensation from the organization. Report c year											n's tax	·	
	N/A Name and business add	ress							(B) Description of ser	vices	С	(C) ompen		
							,							0
														0
														0
														<u>0</u> 0
2	Total number of independent contractors (inclumore than \$100,000 of compensation from the	_	nited	to ti	nos	e lis	ted a	bov	ve) who received	1 2	400	, , , ,	يا جو المراجعة المراجعة المراجعة	

Form 990 (2011) FOND DU LAC FESTIVALS, INC.						39-13878	57 Page 9
Par	t VIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d	Federated campaigns 1a Membership dues . 1b Fundraising events . 1c Related organizations . 1d					
Contributions, and Other Simi	e f	Government grants (contributions) . 1e All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f: \$					
	h		Business Code				
Program Service Revenue	1		900099 900099	321,070 57,994	321,070 57,994		
gram Serv	d e f	All other program service revenue					
	g	Total. Add lines 2a-2f		379,064	# - (F.).	表。"说道。	Page Control
	3	Investment income (including dividends, interest other similar amounts)	•	1,982			
	6a b c	Royalties	(II) Personal				
	d 7a b	Less: cost or other basis and sales expenses	(II) Other				
ø	d d	Gain or (loss)	•				
Other Revenue		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18					
돌	Ь	Less: direct expenses b	_				
J	c 9a	Net income or (loss) from fundraising events Gross income from gaming activities See Part IV, line 19	•				
	С	Less: direct expenses	▶		200 Sec.	74-2-2	1 32 19 39
	b	returns and allowances a Less. cost of goods sold b				4	*
		Net income or (loss) from sales of inventory Miscellaneous Revenue	Business Code	چې د د د د د د د د د د د د د د د د د د د		,	\$ 72 ·
	11a b c						
	d e	All other revenue				755.	
	12	Total revenue. See instructions.		381,046			

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)

Do not include amounts reported on lines 65, 76, 85, 95, and 10b of Part VIII. 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 discrimination of the assistance to individuals in the United States. See Part IV, line 22 discrimination of their assistance to individuals in the United States. See Part IV, line 25 discriminations, and individuals outside the United States. See Part IV, line 25 discriminations, and individuals outside the United States. See Part IV, line 15 and 16. 4 Benefits paid to or for members. 5 Compensation of current of lines, directors, trustees, and key employees. 6 Compensation of current of lines, directors, trustees, and key employees. 7 Compensation of current of lines, directors, trustees, and key employees. 8 39,247 29,435 9,812 compensation of current of lines, directors, trustees, and key employees. 9 Compensation of current of lines, directors, trustees, and key employees. 10 Compensation of current of lines, directors, trustees, and key employees. 11 Penalon plan accruals and contributions (include section 401(k) and 403(b) employer contributions. 12 Penalon plan accruals and contributions (include section 401(k) and 403(b) employer contributions. 13 Penalon plan accruals and contributions. 14 Exes for services (non-employees): 15 Assistance of the services (non-employees): 16 Assistance of the services (non-employees): 17 Fees for services (non-employees): 18 Payorill kases. 19 Payorill kases. 19 Payorill kases. 10 Payorill kases. 10 Payorill kases. 10 Payorill kases. 10 Payorill kases. 11 Payorill kases. 12 Payorill kases. 13 Payorill kases. 14 Information sechnology. 15 Payorilles. 16 Occupancy. 16 Occupancy. 17 Tavel. 18 Payments to affiliates. 19 Payorill kases. 19 Payorilles. 20 Payorilles (No. 10 Payorill): 10 Payorill kases. 21 Payments to affiliates. 22 Depreciation, depletion, and amortization. 23 Ins	Check if Schedule O contains a response to any question in this Part IX						
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16. 4 Benefits paid to or for members. 5 Compensation of current officers, directors, trustees, and key employees. Compensation for unrent officers, directors, trustees, and key employees. Compensation not incuted above, to disqualified persons (as defined under section 4958(f)(f1)) and persons described in section 4958(f)(f1) and f1) and f1		not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	Fundraising	
2 Grants and other assistance to individuals in the United States. See Part IV, line 22. 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16. 4 Benefits paid to or for members. 5 Compensation of current officers, directors, trustees, and key employees and key employees. 6 Compensation not included above, to disqualified persons, careful expersions, careful exp	1	Grants and other assistance to governments and		,	CONTRACTOR STREET		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22. 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16. 4 Benefits paid to or for members. 5 Compensation of current officers, directors, trustees, and key employees and key employees. 6 Compensation not included above, to disqualified persons, careful expersions, careful exp		organizations in the United States. See Part IV, line 21	ł				
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line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) a AWARDS / APPRECIATION NIGHT 5,577 5,524 53 b OTHER TAXES 31 c BUILDINGS & GROUNDS 37,987 d CONCESSION 19,711 e All other expenses STATEMENT 1 152,681 145,406 7,275 25 Total functional expenses. Add lines 1 through 24e . 335,382 275,061 60,321 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ If		above (List miscellaneous expenses in line 24e. If					
a AWARDS / APPRECIATION NIGHT b OTHER TAXES C BUILDINGS & GROUNDS C CONCESSION C All other expenses STATEMENT 1 C Total functional expenses. Add lines 1 through 24e. 25 Total functional expenses. Add lines 1 through 24e. 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here		line 24e amount exceeds 10% of line 25, column					
b OTHER TAXES c BUILDINGS & GROUNDS d CONCESSION e All other expenses STATEMENT 1 Total functional expenses. Add lines 1 through 24e . 335,382 31 37,987 37,987 19,711 19,711 152,681 145,406 7,275 25 Total functional expenses. Add lines 1 through 24e . 335,382 275,061 60,321 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if							
c BUILDINGS & GROUNDS d CONCESSION 19,711 e All other expenses STATEMENT 1 152,681 145,406 7,275 7 Total functional expenses. Add lines 1 through 24e. 335,382 275,061 60,321 0 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if	а			5,524			
d CONCESSION 19,711 19,711 e All other expenses STATEMENT 1 152,681 145,406 7,275 25 Total functional expenses. Add lines 1 through 24e . 335,382 275,061 60,321 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	b				31		
e All other expenses STATEMENT 1 152,681 145,406 7,275 25 Total functional expenses. Add lines 1 through 24e . 335,382 275,061 60,321 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	С						
Total functional expenses. Add lines 1 through 24e . 335,382 275,061 60,321 0 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if							
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here							
organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if			335,382	275,061	60,321	0	
from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if	26						
fundraising solicitation. Check here ▶ ☐ ıf			1				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 133,037 166,695 Cash—non-interest-bearing 1 2 2 192,290 194,095 Savings and temporary cash investments 3 3 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) 7 7 8 Inventories for sale or use . . . 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D | 10a 8.164 1,432 10b 7,182 10c Less: accumulated depreciation . . . 11 11 12 12 Investments—other securities. See Part IV, line 11. 13 Investments—program-related See Part IV, line 11. 13 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 326,759 361,772 16 14,379 17 3,728 17 18 18 19 19 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key 22 employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . 23 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete 25 14,379 26 Total liabilities. Add lines 17 through 25. Organizations that follow SFAS 117, check here ► X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 312,380 Unrestricted net assets. 27 28 Temporarily restricted net assets 29 29 Permanently restricted net assets . . Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds . . . 32 312,380 33 358,044 33 326,759 361,772 Total liabilities and net assets/fund balances.

Form 9	990 (2011) FOND DU LAC FESTIVALS, INC	39	9-1387857	Pag	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	· · <u> </u>			\Box
1	Total revenue (must equal Part VIII, column (A), line 12)	1		381	,046
2	Total expenses (must equal Part IX, column (A), line 25)	2			,382
3	Revenue less expenses. Subtract line 2 from line 1	3			,664
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4			,380
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6		358	3,044
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>	<i>.</i>	· !	
1	Accounting method used to prepare the Form 990. X Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			Yes	Po
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a	Х	
b	Were the organization's financial statements audited by an independent accountant?		2b		Χ
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:				
	X Separate basis		2.2		ار آھا۔ استامات
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	;			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2011)

SCHEDULE D (Form 990)

Supplemental Financial Statements

2011

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► See separate instructions.

Employer identification number

Mame	or the organization		Employer identification number	
FON	D DU LAC FESTIVALS, INC		39-1387857	
Par		or Advised Funds or Other Simila	r Funds or Accounts. Complete if	
	the organization answered "Yes" to		, N/A	A
		(a) Donor advised funds	(b) Funds and other accounts	
1	Total number at end of year			
2	Aggregate contributions to (during year)			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year		- 	
5	Did the organization inform all donors and de	oper advisors in writing that the assets	hold in depar advised	
J	•			No
	funds are the organization's property, subject			NO
6	Did the organization inform all grantees, dor	-	_	
	used only for charitable purposes and not fo			
	purpose conferring impermissible private be			No
Par	II Conservation Easements. Comp	lete if the organization answered "	es" to Form 990, Part IV, line 7 N/	Α
1	Purpose(s) of conservation easements held	by the organization (check all that app	ly).	
•	Preservation of land for public use (e.g., recre	· · · · · · · · · · · · · · · · · · ·	tion of an historically important land area	а
	Protection of natural habitat	Preserva	tion of a certified historic structure	
	Preservation of open space			
2	Complete lines 2a through 2d if the organiza	ition held a qualified conservation conf	ribution in the form of a conservation	
	easement on the last day of the tax year.			
			Held at the End of the Tax Y	'ear
а	Total number of conservation easements.		. 2a	
b	Total acreage restricted by conservation eas	sements	. 2b	
С	Number of conservation easements on a cer		. 2c	
d	Number of conservation easements included			
	historic structure listed in the National Regis		2d	
3	Number of conservation easements modified	d, transferred, released, extinguished,	or terminated by the organization	
	during the tax year		•	
4	Number of states where property subject to	conservation easement is located	•	
5	Does the organization have a written policy i		ection, handling of	
•	violations, and enforcement of the conserval	·		No
6	Staff and volunteer hours devoted to monitor		ation easements during the year	
•		g,g coming, and comercing comercing		
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation	easements during the year	
•	► \$	mspecting, and emoloning content value	reasonione during the year	
8	Does each conservation easement reported	on line 2/d) above satisfy the requirer	ents of section	
O	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?			No
9				,10
9	In Part XIV, describe how the organization rebalance sheet, and include, if applicable, the			
			is illiancial statements that describes	
Dos	the organization's accounting for conservation Organizations Maintaining Collection	on easements.	ther Similar Appets	
Par			ther Similar Assets. N/A	
	Complete if the organization answered			
1a	If the organization elected, as permitted und			eet
	works of art, historical treasures, or other sin	nilar assets held for public exhibition, e	ducation, or research in furtherance	
	of public service, provide, in Part XIV, the tex	kt of the footnote to its financial statem	ents that describes these items	
b	If the organization elected, as permitted und	er SFAS 116 (ASC 958), to report in it	revenue statement and balance sheet	
	works of art, historical treasures, or other sin			
	of public service, provide the following amou			
	(i) Revenues included in Form 990, Part VIII		▶ \$	
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of			
-	following amounts required to be reported ur			
•	Revenues included in Form 990, Part VIII, III		▶ \$	
a h	Assets included in Form 900 Part Y		• • •	

o	FOND DU LAC FESTIV	/ALS, INC				39-1	387857	
Part	ule D (Form 990) 2011	allastiana af A	4 11:-4	! T		\4b C	:	Page 2
3 3	Using the organization's acquisition, ac							
5	use of its collection items (check all that		er records,	CHECK ally	or the lond	wing th	at are a signific	an
a	Public exhibition	чрр.ј/	d \square	Loan or	exchange	progran	าร	
Ь	Scholarly research		e \Box	Other				
•	=		و ا	Other				
С 4	Preservation for future generation		ا منمامنم اد	and than fire	-thartha -			urnaaa lu
•	Provide a description of the organization Part XIV.	in's collections ar	id explain i	iow triey tu	rmer me o	rganiza	tion's exempt pt	urpose in
5	During the year, did the organization so	olicit or receive do	onations of	art. historic	cal treasure	es. or o	ther similar	
	assets to be sold to raise funds rather t							Yes No
Part	IV Escrow and Custodial Arrar	ngements. Com	plete if th	e organiza	ation ansv	vered "	Yes" to Form 9	990. Part
	IV, line 9, or reported an amou	_	•	-				990, Fait N/A
	Is the organization an agent, trustee, ci				ibutions or	other a	ssets not	
-	included on Form 990, Part X?			-				Yes No
b	If "Yes," explain the arrangement in Pa	rt XIV and comple	ete the follo	wing table				
							<i> </i>	Amount
C	Beginning balance					1c		·
d	Additions during the year					1d		
е	3 ,					<u>1e</u>		
f	Ending balance		•			1f	<u>.l</u>	
2a	Did the organization include an amount	t on Form 990, Pa	art X, line 2	17				Yes No
	If "Yes," explain the arrangement in Pa							
Part	V Endowment Funds. Complet		1					
		(a) Current week	(b) Pnoi	war I.	(c) Two years	hack I	(d) Three veers hack	
		(a) Current year	(0) Filo	year	(0) 1110) cars		(d) Three years back	(e) Four years back
1a	Beginning of year balance	(a) Current year	(6) Filo	year	(0) 1110 (0113	Daok	(u) Three years back	(e) Four years back
b	Contributions	(a) Current year	(0) Filor	year	(c) 1 llo years		(u) Times years back	(e) Four years back
	Contributions	(a) Current year	(D) Phot	yeai	(6) 1110 years	Jack	(u) Tillee years back	(e) Four years back
b c	Contributions	(a) Current year	(D) Phot	yeai	(6) 1110 years	Jack	(u) Tillee years back	(e) Four years back
b c d	Contributions	(a) Current year	(0) Files	yeal	(c) Two years	Daoix	(u) Timee years back	(e) Four years back
b c	Contributions	(a) Current year	(0) Files	yeal	(c) Two years	Duck	(u) Timee years back	(e) Four years back
b c d	Contributions	(a) Current year	(0) Files	yeal	(c) Two years		(u) Timee years back	(e) Four years back
b c d e	Contributions . Net investment earnings, gains, and losses . Grants or scholarships . Other expenditures for facilities and programs . Administrative expenses .	(a) Current year	(0) Files	yeai	(c) Two years		(u) Timee years back	
b c d	Contributions						(u) Timee years back	(e) Four years back
b c d e f g	Contributions . Net investment earnings, gains, and losses . Grants or scholarships . Other expenditures for facilities and programs . Administrative expenses .	e current year en					(u) Timee years back	
b c d e f g	Contributions	e current year en	d balance				(u) Timee years back	
b c d e f g 2 a	Contributions	e current year en	d balance				(u) Timee years back	
b c d e f g 2 a b	Contributions	e current year en	d balance %	(line 1g, co	lumn (a)) ł	neld as		
b c d e f g 2 a b	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses. End of year balance. Provide the estimated percentage of th Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the percentages.	e current year en	d balance %	(line 1g, co	lumn (a)) ł	neld as		
b c d e f g 2 a b c	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses. End of year balance. Provide the estimated percentage of th Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2d Are there endowment funds not in the porganization by:	e current year en % % c should equal 10 possession of the	d balance%	(line 1g, co	lumn (a)) ł	neld as		Yes No
b c d e f g 2 a b c	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses End of year balance. Provide the estimated percentage of th Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2d Are there endowment funds not in the proganization by: (i) unrelated organizations.	e current year en % % c should equal 10 possession of the	d balance %	(line 1g, co	lumn (a)) h	neld as		Yes No
b c d e f g 2 a b c 3a	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses End of year balance. Provide the estimated percentage of th Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2d Are there endowment funds not in the proganization by: (i) unrelated organizations.	e current year en % % c should equal 10 possession of the	d balance %	(line 1g, co	lumn (a)) h	neld as	tered for the	Yes No 3a(i) 3a(ii)
b c d e f g 2 a b c 3a	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses. End of year balance. Provide the estimated percentage of the Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2c Are there endowment funds not in the programization by: (i) unrelated organizations. (ii) related organizations. If "Yes" to 3a(ii), are the related organizations.	e current year en % % c should equal 10 possession of the	d balance % 00%. organization	(line 1g, co	held and a	neld as	tered for the	Yes No
bcdefg2abc3abc	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses. End of year balance. Provide the estimated percentage of the Board designated or quasi-endowment. Permanent endowment Temporarily restricted endowment. The percentages in lines 2a, 2b, and 2c. Are there endowment funds not in the proganization by: (i) unrelated organizations. (ii) related organizations. If "Yes" to 3a(ii), are the related organizations bescribe in Part XIV the intended uses.	e current year en % % c should equal 10 possession of the cations listed as r	d balance % 00%. organization	(line 1g, co	held and a	neld as	tered for the	Yes No 3a(i) 3a(ii)
b c d e f g 2 a b c 3a	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses End of year balance. Provide the estimated percentage of th Board designated or quasi-endowment Permanent endowment Temporarily restricted endowment The percentages in lines 2a, 2b, and 2d Are there endowment funds not in the progranization by: (i) unrelated organizations. (ii) related organizations. If "Yes" to 3a(ii), are the related organization bescribe in Part XIV the intended uses VI Land, Buildings, and Equiptions.	e current year en % % c should equal 10 possession of the cations listed as r of the organizationent. See Form	d balance % 00%. organization equired on on's endow	(line 1g, co	held and a	adminis	tered for the	Yes No 3a(i) 3a(ii) 3b
bcdefg2abc3abc	Contributions. Net investment earnings, gains, and losses. Grants or scholarships. Other expenditures for facilities and programs. Administrative expenses. End of year balance. Provide the estimated percentage of the Board designated or quasi-endowment. Permanent endowment Temporarily restricted endowment. The percentages in lines 2a, 2b, and 2c. Are there endowment funds not in the proganization by: (i) unrelated organizations. (ii) related organizations. If "Yes" to 3a(ii), are the related organizations bescribe in Part XIV the intended uses.	e current year en % % c should equal 10 possession of the cations listed as r	d balance % 00%. organization equired on on's endown 1 990, Par	(line 1g, co	held and a	adminis	tered for the	Yes No 3a(i) 3a(ii)

Р	а	g	е	,

Part VII Investments—Other Securities	es. See Form 990, Part X	, line 12. N/A	, age 0
(a) Description of security or category	(b) Book value	(c) Method of va	
(including name of security)		Cost or end-of-year	market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			· 图 · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12) Part VIII Investments—Program Relat	Soo Form 990 Part X	1. 22 - 1. 23	THE PROPERTY OF THE PROPERTY OF
		(c) Method of vi	aluation
(a) Description of investment type	(b) Book value	Cost or end-of-year	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
(10)	C		F. 2. 78 . Adv. 5 2 200 . 27 2 . 3
Total (Column (b) must equal Form 990, Part X, col (B) line 13)		HARDON AND TOTAL	经发达等的基础。
Part IX Other Assets. See Form 990,		N/A	(h) Parkurtur
	(a) Description		(b) Book value
(1)	,		
(2)			
(3)			
(4)			
(6)			
(7)			
(8)			
(9)			
(10)	! (D) line (E)	•	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 99		N/A	
	(b) Book value		· 梦,在李兰等就是一切
1. (a) Description of liability (1) Federal income taxes	(b) Book Value	操练等于是一块 了	
(2)			TA TO THE PARTY.
(3)			
(4)			
(5)			
(6)	·		
(7)		The graph of the state of the s	
(8)			
(9)			
(10)			
(11)	 		

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

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sched	dule D (Form 990) 2011				Pa	ge 4
Par	Reconciliation of Change in Net Assets from Form 990 to Au	dited Financial S	tatem	ents	N/A	·
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses	, , , , , , , , , , , , , , , , , , ,	6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net). Add lines 4 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3	and 9	10			
Par	t XII Reconciliation of Revenue per Audited Financial Statements		er Re	turn	N/A	
1	Total revenue, gains, and other support per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		ž(\$	2		
а	Net unrealized gains on investments	2a	墨	<i>3</i> ,5		
b	Donated services and use of facilities	2b		· 18		
С	Recoveries of prior year grants	?c				
d	Other (Describe in Part XIV)	?d	'`~	29		
е	Add lines 2a through 2d		20	e		
3	Subtract line 2e from line 1		3			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	J		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4	la 📗				
b	Other (Describe in Part XIV.)	lb		۶۴۰) نماند		
C	Add lines 4a and 4b			-		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)					
Par	t XIII Reconciliation of Expenses per Audited Financial Statements	s With Expenses	per F	<u>Return</u>	N/A	
1	Total expenses and losses per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	3.5			
а		2a				
b		2b		£ .		
C	Other losses		-1.3	,		
d	Other (Describe in Part XIV.)			خنا		
е	Add lines 2a through 2d		2			
3	Subtract line 2e from line 1		3 29 45	S 7	-	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	.	437	o.24		
a		la	— [4]	2		
b	Other (Describe in Part XIV)			<u> </u>		
c			4			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	· · · · · · · · ·	5	<u>' </u>		
	XIV Supplemental Information				·	—
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part					
	2b; Part V, line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part X	.III, lines 20 and 4b.	AISO (complet	е	
tnis p	part to provide any additional information.					
	N/A					
	•••••••••••••••••••••••••••••••••••••••					

FOND DU LAC FESTIVALS, INC. 39-1387857 Schedule D (Form 990) 2011 Page 5 Supplemental Information (continued) N/A

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury

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

Open to Public Inspection

Attach to Form 990 or 990-EZ. Internal Revenue Service Name of the organization Employer Identification number

FOND DU LAC FESTIVALS, INC 39-1387857 PART VI, LINE 11A - THE GENERAL LEDGER RECORDS ALONG WITH SUPPORTING DOCUMENTATION ARE GIVEN TO THE TREASURER WHO REVIEWS ALL TRANSACTIONS AND ONCE SATISFIED WITH THE ACCURACY OF THE ACCOUNTS, THE OUTSIDE TAX ACCOUNTANT COMPLETES THE FORM 990. A COPY OF THE 990 IS MAINTAINED IN THE OFFICE AND IS AVAILABLE FOR REVIEW BY INTERESTED PARTIES. PART VI, LINE 12C - THE POLICY IS REVIEWED ANNUALLY BY THE BOARD AT WHICH TIME OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST. PART VI, LINE 15 - THE OFFICERS AND DIRECTORS REVIEW THE WAGES OF EACH EMPLOYEE IN THE FALL OF EACH YEAR A WAGE INCREASE FOR THE FOLLOWING FISCAL YEAR IS SUGGESTED BASED UPON WORK EXPERIENCE, COMPARABLE WAGES IN THE COMMUNITY, AND ANTICIPATED REVENUES FOR THE UPCOMING YEAR. THE OFFICERS AND DIRECTORS PRESENTS ITS FINDINGS AS PART OF THE ENTIRE BUDGET FOR APPROVAL. PART VI, LINE 19 - THE BOARD MAINTAINS RECORDS OF ALL MEETINGS. THE FINANCIAL STATEMENTS ARE SUMMARIZED AND PRESENTED FOR APPROVAL AT EACH MONTHLY MEETING. ALL DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE MAINTAINED IN THE OFFICE AND ARE AVAILABLE UPON REQUEST.

FOND DU LAC FESTIVALS, INC. EIN # 39-1387857 YEAR ENDED SEPTEMBER 30, 2012

STATEMENT 1 - FORM 990, PART IX, LINE 24f - OTHER FUNCTIONAL EXPENSES

DESCRIPTION	TOTAL EXPENSES	PROGRAM SERVICE	MANAGEMENT <u>& GENERAL</u>	<u>FUNDRAISING</u>
EXPENSES				
ENTERTAINMENT	140,441	140,441		
LICENSE/ FEES	64	64		
POSTAGE	1,352	179	1,173	
PRINTING	2,202	1,755	447	
SUPPLIES	3,033	377	2,656	
REPAIRS AND MAINTENANCE	119		119	
BANK CHARGES	68		68	
TELEPHONE	2,812		2,812	
MISCELLANEOUS	1,590	1,590		
OTHER EVENTS	1,000	1,000		
TOTAL	152,681	145,406	7,275	0