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Form **990-EZ****Short Form**
Return of Organization Exempt From Income Tax

OMB No 1545-1150

2012**Open to Public Inspection**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)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

A For the 2012 calendar year, or tax year beginning MARCH 1, 2012, and ending FEBRUARY 28, 2013**B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☒ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organizationBIKES ON THE BRICKS

Number and street (or P.O. box, if mail is not delivered to street address)

502 CHURCH ST

Room/suite

City or town, state or country, and ZIP + 4

FLINT, MICHIGAN48502**D** Employer identification number460-64-6354**E** Telephone number810 908 7717**F** Group Exemption Number ☐**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ☐**I** Website: BIKES ON THE BRICKS.COM**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**J** Tax-exempt status (check only one) - ☒ 501(c)(3) ☐ 501(c)() (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check ☒ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 45,436**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (see the instructions for Part I)Check if the organization used Schedule O to respond to any question in this Part I ☒

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	<u>12,500</u>
	2	Program service revenue including government fees and contracts	2	<u>0</u>
	3	Membership dues and assessments	3	<u>0</u>
	4	Investment income	4	<u>0</u>
	5a	Gross amount from sale of assets other than inventory	5a	<u>0</u>
	b	Less: cost or other basis and sales expenses	5b	<u>0</u>
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	<u>0</u>
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	<u>0</u>
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income exceeds \$15,000)	6b	<u>11,075</u>	
c	Less: direct expenses from gaming and fundraising events	6c	<u>0</u>	
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	<u>11,075</u>	
7a	Gross sales of inventory, less returns and allowances	7a	<u>12,136</u>	
b	Less: cost of goods sold	7b	<u>10,834</u>	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	<u>1,302</u>	
8	Other revenue (describe in Schedule O)	8	<u>3,725</u>	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	<u>34,602</u>	
Expenses	10	Grants and similar amounts paid (list in Schedule O)	10	<u>10,000</u>
	11	Benefits paid to or for members	11	<u>0</u>
	12	Salaries, other compensation, and employee benefits	12	<u>0</u>
	13	Professional fees and other payments to independent contractors	13	<u>0</u>
	14	Occupancy, rent, utilities, and maintenance	14	<u>3,942</u>
	15	Printing, publications, postage, and shipping	15	<u>1,760</u>
	16	Other expenses (describe in Schedule O)	16	<u>18,537</u>
17	Total expenses. Add lines 10 through 16	17	<u>34,239</u>	
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<u>363</u>
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	<u>0</u>
	20	Other changes in net assets or fund balances (explain in Schedule O)	20	<u>28,140</u>
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	<u>28,503</u>

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2012)

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Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☒

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	0	22 363
23 Land and buildings	0	23 0
24 Other assets (describe in Schedule O)	0	24 28,140
25 Total assets	0	25 28,503
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	0	27 28,503

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☒What is the organization's primary exempt purpose? TO HOST AN ANNUAL MOTORCYCLE EVENT

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

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

28 <u>SEE SCHEDULE O; PAGE 2</u>		
(Grants \$ <u>10,000.00</u>) If this amount includes foreign grants, check here ☐	28a	
29		
(Grants \$) If this amount includes foreign grants, check here ☐	29a	
30		
(Grants \$) If this amount includes foreign grants, check here ☐	30a	
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here ☐	31a	
32 Total program service expenses (add lines 28a through 31a)	32	

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
BRUCE ED HENDERSON BOARD CHAIR	6	0	0	0
DAVE BENDER VICE CHAIR	4	0	0	0
KIRK BOWLES TREASURER	6	0	0	0
CHRIS EVERSON SECRETARY	10	0	0	0
BILL BEASINGER BOARD	2	0	0	0
RICK BESSON BOARD	2	0	0	0
GERARD BURNASH BOARD	2	0	0	0
AILEEN ENGLAND BOARD	6	0	0	0
PAULLA SCHERR BOARD	6	0	0	0
RON LONSWAY BOARD	2	0	0	0
CHRISTOPHER ESTES BOARD	2	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		☒
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		☒
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		☒
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		☒
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		☒
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		☒
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?		☒
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		☒
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9	39a	
b Gross receipts, included on line 9, for public use of club facilities	39b	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b	☒
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	☒
41 List the states with which a copy of this return is filed ▶ <u>MICHIGAN</u>		
42a The organization's books are in care of ▶ <u>DONALD BOWLES</u> Telephone no. ▶ <u>810-694-1105</u> Located at ▶ <u>9212 TIMBERLINE CT, GRAND BLANC, MI</u> ZIP + 4 ▶ <u>48439</u>		
b 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)?	42b	☒
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 .		
c At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c	☒
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	☒
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	☒
c Did the organization receive any payments for indoor tanning services during the year?	44c	☒
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d	
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	☒
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45b	☒

- 46** Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		☒

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI ☐

- 47** 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

	Yes	No
47		☒

- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48		☒
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- 49a** Did the organization make any transfers to an exempt non-charitable related organization?

49a		☒
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- b** If "Yes," was the related organization a section 527 organization?

49b		☒
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- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee paid more than \$100,000	(b) Average hours per week devoted to position	(c) Reportable compensation (Form's W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE NONE				

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

NONE

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

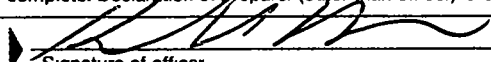
- d** Total number of other independent contractors each receiving over \$100,000

NONE

- 52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

☐ Yes ☒ No

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

Sign Here	Signature of officer 	Date 4-15-13
	Type or print name and title KIRK BOWLES, TREASURER	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Firm's name	Firm's EIN			
	Firm's address	Phone no.			

May the IRS discuss this return with the preparer shown above? See instructions

☐ Yes ☒ No

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization

BIKES ON THE BRICKS

Employer identification number

460-64-6354

PART I, LINE 8: SPACE RENTAL @ THE EVENT	3,725
LINE 10: DONATIONS TO CHARITY GROUPS	10,000
- YOUNG MARINES	500
- McLAREN Hospice	1,500
- FRIENDS OF FLINT POLICE	3,000
- OLD NEWSBOYS ED	5,000
LINE 16: OTHER EXPENSES	18,537
- FIRE HYDRANTS & TENT BARRELS	400
- EMBLEMS FOR VOLUNTEERS	654
- INFRASTRUCTURE & DEVELOPMENT	5,078
- 1 WHEEL REVOLUTION	2,500
- WEB PAGE UPDATE	420
- ARCHES & FLAGS	275
- TROPHIES & PRIZES	4,145
- POLICE ACTIVITIES	1,365
- SECURITY	1,120
- TAG DAY PERMIT	50
- D.J. FOR THE EVENT	1,200
- LANYARDS FOR VOLUNTEERS	230
- ADVERTISING, THUNDER ROAD	1,100
LINE 20: FUNDS TRANSFERRED FROM DDA - START	28,140
PART II, LINE 24: FUNDS TRANSFERRED FROM DDA - START	28,140

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

Employer identification number

Form 990, Part III, Line 28

• Bikes on the Bricks serves the motorcycle community by providing a free 3 day event in the heart of downtown Flint. This event features a Police motorcycle skills competition that brings in officers from all over the Midwest. A motorcycle show on Sunday with free entry. A fashion show, tattoo contest and a police escorted ride. Our event in 2012 was held September 14th-16th We estimate our attendance at 25,000 people over a 3 day period

• To Train Police motorcyclist through the Police skills competition. Part of the competition is 2 days of training for the officers on their bikes Also to promote downtown Flint as a safe and biker friendly destination.

• We estimate the crowd of 25,000 for the weekend. Friday is our slowest day at about 2,000-3,000, Saturday is our busiest with about 14,000 people and the show on Sunday brings in about 10,000.

Step 4. This organization received a \$10,000 grant from the CS Mott Foundation via the Flint Downtown Development Authority.

Step 5. No other programs Our only event is the September Motorcycle Show