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Form 990

Return of Organization Exempt From Income Tax

Inspection

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. For the 2012 calendar year, or tax year beginning OCTOBER 1, 2012 **SEPTEMBER 30, 2013** and ending C Name of organization D Employer identification number Check if applicable FOND DU LAC FESTIVALS, INC. Address change Doing Business As 39-1387857 Number and street (or P.O box if mail is not delivered to street address) Name change E Telephone number Initial return 650 NORTH MAIN STREET (920) 923-6555 Terminated City, town or post office, state, and ZIP code FOND DU LAC WI 54935 G Gross receipts \$ 390.482 Amended return F Name and address of principal officer Application pending Yes X H(a) Is this a group return for affiliates? DEAN VOLLMER 130 S. MAIN STREET, FOND DU LAC, WI 54935 H(b) Are all affiliates included? If "No," attach a list (see instructions) 501(c)(3) X 501(c) (Tax-exempt status 4) **◄** (insert no) 4947(a)(1) or Website: ► WWW.FDLFEST.COM H(c) Group exemption number X Corporation K Form of organization Trust Other > L Year of formation M State of legal domicile Association 1983 WI Part I Summary Briefly describe the organization's mission or most significant activities: DIRECT, PROMOTE, AND SUPPORT FESTIVALS AND SPECIAL EVENTS THAT SHOWCASE THE FOND DU LAC COMMUNITY. WITH A GREAT DEAL OF HELP AND Activities & Governance SUPPORT FROM THE COMMUNITY, WALLEYE WEEKEND, LIGHT UP THE CITY, AND FESTIVAL FOODS' TASTE OF FOND DU LAC EVENTS TAKE PLACE, THESE EVENTS BENEFIT MORE THAN 100 LOCAL NON-PROFITS. Check this box | if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 10 Number of independent voting members of the governing body (Part VI, line 1b) . 4 10 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) . . . 3 Total number of volunteers (estimate if necessary) . .CAN'T. ESTIMATE (MORE.THAN.500) 6 0 Total unrelated business revenue from Part VIII, column (C), line 12. 7a Net unrelated business taxable income from Form 990-Taline 34 7b 0 **Current Year** 0 8 Contributions and grants (Part VIII, line 1h) ຼີ 9 379,064 389,093 1,239 10 1,982 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 14e): 150 11 390,482 381,046 ₹12 Total revenue—add lines 8 through 11 (must equal Part VIII column (A) line 12 Grants and similar amounts paid (Part IX, column (A), lines 1=3). 13,000 13 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 82,285 128.946 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10). Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 516a Total fundraising expenses (Part IX, column (D), line 25) ▶ 253,097 301,615 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e). 335,382 443,561 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 19 Revenue less expenses. Subtract line 18 from line 12 45.664 -53.079 Beginning of Current Year **End of Year** 20 Total assets (Part X, line 16) . . . 361,772 307.800 21 Total liabilities (Part X, line 26) 3,728 2,835 22 Net assets or fund balances. Subtract line 21 from line 20 358,044 304,965 Signature Block Under penalties of penjury, 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 preparat (other liban officer) is based on all information of which preparer has any knowledge Sign of officer 12-17-13 Here leau Type or print name and title Print/Type preparer's name Preparer's signature PTIN Paid self-employed P01230545 EDWARD L FOY Preparer Firm's EIN ► 39-1551663 ► FOY & SPRINGBORN, S.C Firm's name **Use Only** Firm's address ► 560 FOND DU LAC AVENUE, FOND DU LAC, WI 54985 Phone no (920) 922-2100 X Yes May the IRS discuss this return with the preparer shown above? (see instructions).

	990 (2012)	FOND DU LAC FESTIVALS, INC.	39-1387857	Page 2
Pa	rf III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response to any question in this Part III		
1	Briefly	describe the organization's mission:		<u> </u>
•		[, PROMOTE, AND SUPPORT FESTIVALS AND SPECIAL EVENTS THAT SHOWCASE THE	EOND DILLAC	
		JNITY. WITH A GREAT DEAL OF HELP AND SUPPORT FROM THE COMMUNITY, WALLEY		1
		CITY, AND FESTIVAL FOODS' TASTE OF FOND DU LAC EVENTS TAKE PLACE. THESE I	EVENTS	
		IT MORE THAN 100 LOCAL NON-PROFITS		
2	Did the	organization undertake any significant program services during the year which were not listed	on	
	the prio	r Form 990 or 990-EZ?	T Yes	X No
		describe these new services on Schedule O.		٠٠٠
3		organization cease conducting, or make significant changes in how it conducts, any program		
•			☐ v	□ N-
		\$?	· · · L Yes	X No
	-	describe these changes on Schedule O.		
4		e the organization's program service accomplishments for each of its three largest program se		
	expens	es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants a	ind allocations to oth	ers,
	the tota	expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 27,515 including grants of \$) (Reve	nue \$ 55	,686)
74				
		OF FOND DU LAC - ONE DAY FESTIVAL HELD AT THE FDL COUNTY FAIRGROUNDS EX		
	FOR TH	IE COMMUNITY AND VISITORS TO TASTE VARIOUS FOODS FROM MANY RESTAURANT	S - TICKET ADMISS	SION
				_
	-			
			· · · · · · · · · · · · · · · · · · ·	
4b	(Code:) (Expenses \$ 227,185 including grants of \$) (Reve	enue \$333	<u>,407</u>)
	WALLE	YE WEEKEND - 2 1/2 DAY JUNE FESTIVAL - COMMUNITY / VOLUNTEER ORIENTED - FR	EE ADMISSION	
	FESTIV	AL AT LAKESIDE PARK, FOND DU LAC. LOTS OF EVENTS, ENTERTAINMENT, COMPET	ITIONS, AND	
	CONCE	SSIONS FOR THE WHOLE FAMILY AND VISITORS.		
				• • • • • • • • • • • • • • • • • • • •
				• • • • • • • • • • • • • • • • • • • •
4c	(Code:) (Expenses \$ 1,079 including grants of \$) (Reve	enue \$)
		PROMOTIONS - LIGHT UP THE CITY		
	T			
44	Othern	rogram services. (Describe in Schedule O.)		
4d	Other p	rogram services. (Describe in Schedule O.) es \$ 0 including grants of \$ 0) (Revenue \$	0)	

			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	res	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		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	3		х
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		х
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		×
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		_^ 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		<u>х</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		Χ
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	
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		Х
	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		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "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		Х
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
b	Schedule D, Parts XI and XII	12a		X
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII 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		X
	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		Х
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? If "Yes," complete Schedule F, Parts III and IV	16		Х
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? If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

			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 United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
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		х
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		^
	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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		Х
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	256		
20	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
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			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, 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		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	206		v
_	Schedule L, Part IV	28b		X
С	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,	١.,		
	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		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		<u> </u>
JJ	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34	ļ	X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, 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," 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 organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part	27		ļ
	VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	38	x	

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
			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	* i		^
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
•	gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		,	*'≆:
h		2b	X	-
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	20 20		<u> </u>
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	<u> </u>		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91	;	
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
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			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		<u></u>
7	Organizations that may receive deductible contributions under section 170(c).	13 5 15 15 15 15		- 1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods N/A		v`'	12.5
	and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7c		
	required to file Form 8282?	が記	: (ŝ	n-()
ď	If "Yes," indicate the number of Forms 8282 filed during the year	7e		ناست
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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 N/A		1	
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			1
	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?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		734	2 2
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			
	against amounts due or received from them.)	10.	EAC S	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? N/A	12a	Late 24	251. 251.
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1.0
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	13a	A (08)	نسيا
а	Is the organization licensed to issue qualified health plans in more than one state?	ısa		
b	Enter the amount of reserves the organization is required to maintain by the states in which	4	X. 4	
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Form 990 (2012) • Part VI FOND DU LAC FESTIVALS, INC.

39-1387857

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 instru

	Check if Schedule O contains a response to any question in this Part VI			sırucı 1	ons.
Cast		· · · · · · ·		<u>· 1</u>	Щ.,
Sect	ion A. Governing Body and Management			Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	1a	10	162	100
10	If there are material differences in voting rights among members of the governing body, or		10		
	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	1b	10		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relati	onship with			
	any other officer, director, trustee, or key employee?		. 2		X
3	Did the organization delegate control over management duties customarily performed by or unc	er the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or of	ther person?	3		_X_
4	Did the organization make any significant changes to its governing documents since the prior Form 990 w	as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization	's assets?	5_		X
6	Did the organization have members or stockholders?		6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect				
	one or more members of the governing body?		7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members		١		,,
_	stockholders, or persons other than the governing body?		- 7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertained the contemporaneously document the meetings held or written actions undertained to the contemporaneously document the meetings held or written actions undertained to the contemporare of the	iken during	ļ		
_	the year by the following: The governing body?		8a	Х	
a b	The governing body?		. 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot t		100		
3	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule		9		x
Sect	on B. Policies (This Section B requests information about policies not required by the				
0000	on bit one of the design broaden members about persons and a second persons and a second persons are a second persons and a second persons are a second persons and a second persons are a second person are a second persons are a second person are a second perso			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of su				
	affiliates, and branches to ensure their operations are consistent with the organization's exemp		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body bet	ore filing the form?.	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	-	ļ
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could		? 12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy?	It "Yes,"	140		
	describe in Schedule O how this was done		12c	$\overline{}$	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	X	
15	Did the process for determining compensation of the following persons include a review and ap independent persons, comparability data, and contemporaneous substantiation of the deliberat				
а	The organization's CEO, Executive Director, or top management official.		15a	Х	
-	Other officers or key employees of the organization		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 arr	angement			
	with a taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev		J		
	participation in joint venture arrangements under applicable federal tax law, and take steps to s				
	the organization's exempt status with respect to such arrangements?	<u></u>	16b		<u> </u>
Secti	on 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	11(c)(3)s	only))
	available for public inspection. Indicate how you made these available. Check all that apply.	,	0)		
		kplain in Schedule			
19	Describe in Schedule O whether (and if so, how), the organization made its governing document	nts, conflict of inter	est		
20	policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the body	ske and recorde of	the		
20	t d	(000) 000			
	organization: LEANNE DUYLE	79507920	2000		

Form 990 (2012)	FOND DU LAC FESTIVALS, INC.	•			39-13878	357 Page 7
Part VII	Compensation of Officers, Dire		es, Key Employees, H	ighest Comp	ensated	
	Employees, and Independent C			_		
	Check if Schedule O contains a r	esponse to an	y question in this Part \	<u>/II</u> .		<u> </u>
Section A.	Officers, Directors, Trustees, Key	Employees, an	d Highest Compensated	Employees		
1a Complete organization's	this table for all persons required to be tax year.	e listed. Report	compensation for the cale	endar year endi	ng with or within	the
of compensat List all List the who received	of the organization's current officers, tion. Enter -0- in columns (D), (E), and of the organization's current key emperorganization's five current highest correportable compensation (Box 5 of Foundamental and any related organizations.	(F) if no compe loyees, if any. S empensated em	ensation was paid. See instructions for definit ployees (other than an of	ion of "key emp ficer, director, to	loyee." rustee, or key en	nployee)
	of the organization's former officers, le eportable compensation from the orga			d employees wi	no received more	e than
	of the organization's former directors more than \$10,000 of reportable com			-		of the
	n the following order. individual trusted l employees; and former such persons		institutional trustees; offic	ers; key employ	ees; highest	
X Check th	is box if neither the organization nor a	ny related organ	nization compensated any	current officer	, director, or trus	itee.
	(A) Name and Title	(B) Average hours per week (list any	Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	Position (do not check more than one box, unless person is both an officer and a director/trustee) Compensated Compensat		(D) Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from the organization (W-2/1099-MISC)				
(1) LIV MOYER DIRECTOR	1.00	Х					0	0	0
(2) ALEX ULLENBERG DIRECTOR	1.00						0		0
(3) KARYN MERKEL DIRECTOR	1.00				 		0		
(4) LORI GARBISCH DIRECTOR	1.00	_		-	 		0		
(5) BARB KNUTZEN DIRECTOR	1.00	_					0		0
(6) DENNIS WINKLER DIRECTOR	1.00	х					0	0	0
(7) DEAN VOLLMER PRESIDENT	1.00			х			0	0	0
(8) SAM MCCLONE VICE PRESIDENT	1.00			x			0	0	0
(9) RAY LAPIERRE SECRETARY	1.00			х			0	0	0
(10) BILL MAUTHE TREASURER	1.00			x			0	0	0
(11)									
(12)									
(13)									
(14)									

F	Part VII Section	A. Officers, Directors, To	ustees, Key Er	nplo	yee	s, a	nd	High	est	Compensated	Employees (co	ontinued)
		(A) and title	(B) Average hours per week (list any	(C) Position (do not check more than of box, unless person is both officer and a director/trust						(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estima amoun	nated unt of
			hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	ey employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from organ and re	nsation in the ization elated zations
(15)						_							
(16)						_							
(17)													
(18)									-				
(19)						ļ ,							
(20))								-				
(21)	<u> </u>			-			-		-				
(22))							-				ļ	
(23))											 	
(24)												 	
(25)	<u> </u>		•••••										
1b c	Total from continu	uation sheets to Part VII,	Section A						. ▶	0	(
2	Total number of ind	lividuals (including but not sation from the organizatio	limited to those	listed	da b	ove	e) wl			ed more than \$	100,000 of	· I	
3	Did the organization	n list any former officer, die a? If "Yes," complete Sche	rector, or trustee	e, key	en en	nplo	yee		_	•		3	es No X
4	the organization and	sted on line 1a, is the sum d related organizations gre	ater than \$150,	000?	If "	Yes	, " c	ompl				4	X
5		ed on line 1a receive or acced to the organization? If "										5	X
Sec	ction B. Independent		roo, comprote	00,10	<u></u>		0. 0		<u> </u>	30.7	<u> </u>	1	
1	Complete this table	for your five highest comp the organization. Report c											
	N/A	(A) Name and business add	ress							(B) Description of se	rvices	(C) Compensa	tion
									ļ				
									-	 			
									 				
													(
2		ependent contractors (incl	_		to t	hos	e lis	sted a		ve) who receive	d		

Form 990 (2012) FOND DU LAC FESTIVALS, INC.

Part VIII Statement of Revenue

, ai	t VIII	Check if Schedule O contain	s a response to	any question in	this Part VIII .			. \square
					(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	b c d e	Federated campaigns Membership dues	1b 1c 1d ns) 1e			·	,	, ,
Contributi	g	similar amounts not included ab Noncash contributions included in I	ove <u>1f</u> ines 1a-1f: \$,
 -	n	Total. Add lines 1a-1f		Business Code	,			
Program Service Revenue		MALLEYE MEEKEND			222 407	322 407		-
eve		WALLEYE WEEKEND		900099	333,407	333,407		
Š.	b	TASTE OF FOND DU LAC		900099	55,686	55,686		
V.C.	С				·			
Ser	d			<u> </u>				
E	е							
ogr	f	All other program service revenue	ле					
ď	g	Total. Add lines 2a-2f			389,093	<u>.</u>	•	•
	3	Investment income (including di						
					1,239			
	4	Income from investment of tax-e			.,,			
	5			occcus				
	5	Royalties	(i) Real	(ii) Personal		····· , · · · · · · · · · · · · · · · ·		7.5
	_	•	(7)166	(.,,, ., ., .,	,			
	6a	Gross rents				· .	•	,
	b	Less: rental expenses				,		
	С	Rental income or (loss)		L				
	d	Net rental income or (loss)	<u> </u>					
	7a	Gross amount from sales of	(i) Secunties	(II) Other		•		
		assets other than inventory.	_		•	•	- *	,
	b	Less: cost or other basis					•	" - 1
		and sales expenses		1		,	- ,	
	C	Gain or (loss)						
		Net gain or (loss)	<u> </u>	<u> </u>				
•								
Other Revenue	ва	Gross income from fundraising events (not including \$ of contributions reported on line See Part IV, line 18			3			
Ë.	h	Less: direct expenses				;		
ŏ		Net income or (loss) from fundra						
		Gross income from gaming active See Part IV, line 19	vities.		-	**************************************		
	h	Less: direct expenses				,	•	1
		Net income or (loss) from gamir						
		· , ,	ig activities	· · · · · · · · · · · · · · · · · · ·		·		· · · · · · · · · · · · · · · · · · ·
	ıva	Gross sales of inventory, less		ļ				
		returns and allowances			↓			
		Less: cost of goods sold			<u> </u>			
,	<u> </u>	Net income or (loss) from sales	of inventory					
1		Miscellaneous Revenue		Business Code				
	11a	GAIN ON SALE OF FIXED ASS	ET	900099	150			
	b							
	C		-					
	d	All other revenue						
		Total. Add lines 11a–11d		<u> </u>	150			
	12	Total revenue. See instructions			390,482		0	0

Form **990** (2012)

Form 990 (2012) FOND DU LAC FESTIVALS, INC. Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must complete al	l columns. All other	organizations mus	t complete column ((A)
	Check if Schedule O contains a response to any				, <u>,,,</u>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	13,000	13,000		
2	Grants and other assistance to individuals in the				
	United States. See Part IV, line 22				
3	Grants and other assistance to governments,			i	
	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	80,128	60,096	20,032	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		1		
-	persons described in section 4958(c)(3)(B)	20.250	20,000	7.500	
7	Other salaries and wages	30,250	22,688	7,562	· · · · · · · · · · · · · · · · · · ·
8	Pension plan accruals and contributions (include]		
	section 401(k) and 403(b) employer contributions)	9,375		9,375	
9 10	Other employee benefits	9,193	6,895	2,298	
11	Payroll taxes	9,193	0,083	2,250	
	Management	405	304	101	
a b	Legal	403	304	101	
C	Accounting	6,360		6,360	
٦	Lobbying			0,000	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
a q	Other (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	9,716	7,309	2,407	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	4,920		4,920	
17	Travel	3,241		3,241	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings [3,614		3,614	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,001		1,001	·
23	Insurance	9,529		9,529	
24	Other expenses. Itemize expenses not covered		ļ		
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	AWARDS / APPRECIATION NIGHT	5,110	3,758	1,352	
þ	OTHER TAXES	25		25	
C	BUILDINGS & GROUNDS	53,770	53,770		
d	CONCESSION	19,459	19,459	40.000	
	All other expenses STATEMENT 1	184,465	171,483	12,982	
25	Total functional expenses. Add lines 1 through 24e.	443,561	358,762	84,799	0
26	Joint costs. Complete this line only if the]	1	
	organization reported in column (B) joint costs		į	1	
	from a combined educational campaign and			1	
	fundraising solicitation. Check here If following SOP 98-2 (ASC 958-720)		İ		

		Check if Schedule O contains a response to any question in this Part X	<u> </u>	<u>.</u>	<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	166,695	1	194,767
	2	Savings and temporary cash investments	194,095	2	109,256
	3	Pledges and grants receivable, net		_3_	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section		Ť	
	١	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
Ø		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 11,303			
	b	Less: accumulated depreciation	982	10c	3,777
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	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)	361,772		307,800
	17	Accounts payable and accrued expenses	3,728		2,835
	18	Grants payable	· · · · · · · · · · · · · · · · · · ·	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors,			
Ĕ		trustees, key employees, highest compensated employees, and		22	
ia		disqualified persons Complete Part II of Schedule L		23	
	23	Secured mortgages and notes payable to unrelated third parties		24	
	24 25	Other liabilities (including federal income tax, payables to related third			
	25	parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	3,728		2,835
		Organizations that follow SFAS 117 (ASC 958), check here ► X and			
S		complete lines 27 through 29, and lines 33 and 34.			
Š		•	358,044	27	304,965
ala	27	Unrestricted net assets	330,044	28	304,300
8	28 29	Permanently restricted net assets		29	
Š	29	· —			
or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here and and			
8		complete lines 30 through 34.		00	
Net Assets	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31 32	
let	32	Retained earnings, endowment, accumulated income, or other funds	358,044		304,965
~	33	Total net assets or fund balances	358,044		307,800
	34	Total liabilities and net assets/fund balances	301,112	J**	307,000

Form 9	990 (2012) `FOND DU LAC FESTIVALS, INC.	3	<u>9-138785</u>	7 р	age 12
Part	XI Reconciliation of Net Assets		-		
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		39	0,482
2	Total expenses (must equal Part IX, column (A), line 25)	2		44	3,561
3	Revenue less expenses. Subtract line 2 from line 1	3		5	3,079
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		35	8,044
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10		30	4,965
Part					_
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
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		ij	1	
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 22	<u> </u>	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:			-	
	X Separate basis Consolidated basis Both consolidated and separate basis				i e
b	Were the organization's financial statements audited by an independent accountant?		. 21		X
_	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:			i	
	Separate basis Consolidated basis Both consolidated and separate basis			i	
		4 ~ 6		1	ĺ.
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh			: X	4
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 20		
	If the organization changed either its oversight process or selection process during the tax year, explain in	d.			
_	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		. 3		×
	the Single Audit Act and OMB Circular A-133?		· 3	"	+^
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		31		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits				(2012)
			FOI	111 フラし	/ (2012)

SCHEDULE D (Form 990)

Supplemental Financial Statements

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. OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer Identification number

FOND	D DU LAC FESTIVALS, INC.		39-1387857
Part		or Advised Funds or Other Similar F	unds or Accounts. Complete if
	the organization answered "Yes" to	o Form 990, Part IV, line 6	N/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		Ad in door advised
5	Did the organization inform all donors and d	-	
6	funds are the organization's property, subjection of the organization inform all grantees, do		
O	used only for charitable purposes and not for		
	purpose conferring impermissible private be		
Part		lete if the organization answered "Yes	
1	Purpose(s) of conservation easements held		n of an historically important land area
	Preservation of land for public use (e.g., reci	• =	
	Protection of natural habitat	Preservatio	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization	ation held a qualified conservation contrib	ution in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
_	Total number of concentation accoments		
a	Total number of conservation easements . Total acreage restricted by conservation ea		
b b	Number of conservation easements on a ce		
d	Number of conservation easements include		
_	historic structure listed in the National Regis		2d
3	Number of conservation easements modifie	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		
	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monito	oring, inspecting, and enforcing conservati	on easements during the year
-	Amount of expenses incurred in monitoring	increating and enforcing conservation e	asements during the year
7	► \$	inspecting, and emorcing conservation co	asements during the year
8	Does each conservation easement reported	on line 2(d) above satisfy the requiremen	nts of section
•	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization r	eports conservation easements in its reve	nue and expense statement, and
_	balance sheet, and include, if applicable, th	e text of the footnote to the organization's	financial statements that describes
	the organization's accounting for conservati	on easements.	
Part		ons of Art, Historical Treasures, or Oth	er Similar Assets. N/A
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted und	fer SFAS 116 (ASC 958), not to report in i	its revenue statement and balance sheet
	works of art, historical treasures, or other si	milar assets held for public exhibition, edu	cation, or research in furtherance
	of public service, provide, in Part XIII, the te		
b	If the organization elected, as permitted und	der SFAS 116 (ASC 958), to report in its re	evenue statement and balance sheet
	works of art, historical treasures, or other si		ication, or research in furtherance
	of public service, provide the following amo		▶ \$
	(i) Revenues included in Form 990, Part VI		
•	(ii) Assets included in Form 990, Part X If the organization received or held works or	fart historical transuras or other similar s	essets for financial gain, provide the
2	following amounts required to be reported u		
•	Revenues included in Form 990, Part VIII, I		
a h	Assets included in Form 990 Part X		> \$

Sched	ule D (Form 990) 2012 FOND DU LAC F	ESTIVALS, INC.			39-13878	157	p	ege 2				
Par			rt. Historical T	reasures, or Other				age a				
3	Using the organization's acquisition, use of its collection items (check all	accession, and oth										
а	Public exhibition	арр.уу.	d Loa	n or exchange progra	ıms							
b	Scholarly research		===									
C	Preservation for future genera				4:t							
4	Provide a description of the organization Part XIII.					pose in						
5	During the year, did the organization		·				\Box					
	assets to be sold to raise funds rathe					Ye	_=	No				
Par	IV Escrow and Custodial Arr IV, line 9, or reported an arr	_			"Yes" to Form 99	90, Par 	t N/A	١				
1a	Is the organization an agent, trustee		•				_					
	included on Form 990, Part X?					Ye	s 📙	No				
þ	If "Yes," explain the arrangement in	Part XIII and comple	ete the following	table:	· •							
				 		nount						
C	Beginning balance			<u></u>	<u>c </u>							
d	Additions during the year											
e	Distributions during the year				e f							
f	Ending balance					<u> </u>						
2a	Did the organization include an amo					Ye		No				
b	If "Yes," explain the arrangement in	Part XIII. Check her	e if the explanati	on has been provided	l in Part XIII							
Part	V Endowment Funds. Comp	lete if the organiz	ation answered	"Yes" to Form 990	Part IV, line 10.		N/A					
•		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Fo	ur years	back				
1a	Beginning of year balance											
b	Contributions					ļ						
С	Net investment earnings, gains,											
	and losses											
d	Grants or scholarships		ļ			 						
е	Other expenditures for facilities											
_	and programs					-						
f	Administrative expenses			-								
g	End of year balance		<u> </u>									
2	Provide the estimated percentage of			g, column (a)) neid a	S :							
a	Board designated or quasi-endowme		<u>%</u>									
b	Permanent endowment	<u>%</u> .										
С	Temporarily restricted endowment The percentages in lines 2a, 2b, and											
2-	Are there endowment funds not in the	•		at are held and admin	istered for the							
3a	organization by:	e possession or the	organization the	at are ricid and admin	istered for the	ſ	Yes	No				
						3a(i)						
						17:71						
						13a(ii)						
h	(ii) related organizations					3a(ii) 3b						
b 4			required on Sche	dule R?		3a(ii) 3b						

(b) Cost or other basis (other) (c) Accumulated depreciation (a) Cost or other basis (d) Book value Description of property (investment) 1a Land Buildings b Leasehold improvements . C 11,303 7,526 3,777 d Equipment Other . Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . • 3,777

Part VII	Investments—Other Securiti	es. See Form 990, Part X,	line 12. N/A	····
((a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-year	
(1) Financia	al derivatives			
	-held equity interests			· · · · · · · · · · · · · · · · · · ·
			· · · · - · ·	
(D)		·		
\£\.				
(F)				
(G)				
(H)				
<u>(l)</u>				
Part VIII	(b) must equal Form 990, Part X, col (B) line 12) Investments—Program Rela	ted See Form 990 Part X	l	
Patt VIII	(a) Description of investment type	(b) Book value	(c) Method of	
	(a) Description of investment type	(5) 255% (4.125	Cost or end-of-year	r market value
		· · · · · · · · · · · · · · · · · · ·		
(2)				
(3)		 		· ·
(5)				
(6)				
(7)				
(8)		<u> </u>		
(9)				<u></u>
(10)	(I) A Company of (I) In (I)			
Part IX	(b) must equal Form 990, Part X, col (B) line 13) Other Assets. See Form 990,	Part Y line 15	N/A	
raitin	Other Assets. See Form 990,	(a) Description	N/A	(b) Book value
(1)		(a) Bookington		
(2)	· · · · · · · · · · · · · · · · · · ·			
(3)				
(4)				
(5)				
(6)				
(8)				
<u>(9)</u> (10)				
	lumn (b) must equal Form 990, Part X,	col. (B) line 15.)		•
Part X	Other Liabilities. See Form 9		N/A	
1.	(a) Description of liability	(b) Book value		
(1) Feder	al income taxes]	
(2)			4	
(3)				
(4)		 	-	
(5)			1	
(6)			1	
<u>(7)</u> <u>(8)</u>			1	
(9)			1	
(10)]	
(11)				
	(b) must equal Form 990, Part X, col (B) line 25)			
2. FIN 48 (AS	SC 740) Footnote. In Part XIII, provide the text of	of the footnote to the organization's	financial statements that reports the c	organization's liability
for uncertain	tax positions under FIN 48 (ASC 740). Check I	nere if the text of the footnote has be	en provided in Part XIII	

Scriedi	BIE D (FOITH 890) 2012 FOND DU LAC FESTIVALS, INC.	<u> 39-</u> 13878	.5/_ P	Page 4
Parl	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	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:			
а	Net unrealized gains on investments			
b	Donated services and use of facilities			
С	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a			
b	Other (Describe in Part XIII.)			
C	Add lines 4a and 4b	4c		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		
Part		er Returi	ı N/A	
1	Total expenses and losses per audited financial statements	1	- 14171	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities			
b	Prior year adjustments			
c	Other losses			
d	Other (Describe in Part XIII.)			
e	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII.)			
c	Add lines 4a and 4b	4c		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		
_	XIII Supplemental Information			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	rt IV lines	1h and 2h	p.
Part \	/, line 4; Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to onal information.			•,
	N/A			
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Schedule D (Form	990) 2012	FOND DU LAC FESTIVALS, IN	IC.	<u>39-1387857</u>	Page 5
Part XIII	Supple	FOND DU LAC FESTIVALS, IN mental Information (continue	rd)	 	
				 	•••••
			N/A		
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SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

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Ö	the
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Grants and Other Assistance to Organizations,	sovernments, and Individuals in the United States
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Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, X Yes No (h) Purpose of grant or assistance 39-1387857 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and non-cash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of noncash assistance 13,000 (d) Amount of cash General Information on Grants and Assistance the selection criteria used to award the grants or assistance? (c) IRC section if applicable 170(c)(1) 39-6005450 (p) EIN (1) CITY OF FOND DU LAC 160 S MACY ST, FDL, WI 54935 FOND DU LAC FESTIVALS, INC. 1 (a) Name and address of organization or government Name of the organization Part I Part II

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

Enter total number of other organizations listed in the line 1 table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

Schedule I (Form 990) (2012)

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39-1387857

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III

ľ	assistance								<u>-</u>						; ; ; ;	6 7 8 6 6 6 7 9		•
	(f) Description of non-cash assistance							-	er additiona	THE BOAR						•	• • • • • • • • •	
	(f) Descript								nd any oth∈	BOARD. 1				1 1 1 1 1 1 1 1 1	! ! ! ! !	1 1 1 1 1 1 1 1	: : : : : :	•
	(e) Method of valuation (book, FMV, appraisal, other)								2, Part III, column (b), ar	IS DONE THROUGH THE					, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,	1	
	(d) Amount of non-cash assistance								quired in Part I, line	AT FUNDS IN THE US	V					, , , , , , , , , , , , , , , , , , ,		
	(c) Amount of cash grant								ide the information re	IG THE USE OF GRAN	THEIR BOARD MEETINGS.		P P B P P P P P P P P P P P P P P P P P	• • • • • • • • • • • • • • • • • • •			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
space is needed	(b) Number of recipients								e this part to prov	FOR MONITORIN	S MATTER AT THE		1 4 4 5 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				1 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Part III can be duplicated if additional space is needed	(a) Type of grant or essistance								Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	Part I Line 2 THE ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS IN THE US IS DONE THROUGH THE BOARD. THE BOARD	DISCUSSES AND MAKES DECISIONS ABOUT THIS MATTER A							
	;	-	8	m	4	40	မှ	7	Part IV	Part I Line 2	DISCUSSES		1 1 1 1 1 1 1 1					

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

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, 2013

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

DESCRIPTION	TOTAL EXPENSES	PROGRAM SERVICE	MANAGEMENT <u>& GENERAL</u>	FUNDRAISING
EXPENSES				
ENTERTAINMENT	168,291	168,291		
POSTAGE	684	19	665	
PRINTING	1,226	1,123	103	
SUPPLIES	2,960	262	2,698	
BANK CHARGES	156		156	
TELEPHONE	2,301		2,301	
MISCELLANEOUS	709	709		
OTHER EVENTS	1,079	1,079		
WEBSITE EXPENSES	7,059		7,059	
TOTAL	184,465	171,483	12,982	0