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Form **990**

Return of Organization Exempt From Income Tax

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20**13**

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 private foundations)

Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

<u> </u>	For the	2013 cal	endar year, or tax year beginning	l		, and e	ending	_			
В	Check if a	pplicable	C Name of organization QUINLA	N ARTS INC		· •		D Employ	er identıfi	cation numbe	r
П	Address c	hange	Doing Business As QUINLAN A	ARTS INC				1			
\equiv			Number and street (or PO box if mail	is not delivered to street a	address)	Room/suite		58-60405	17		
	Name cha	ange	514 GREEN STREET NE					E Telepho		•	
٦	Initial retu	rn	City or town	Stat	e	ZIP code		1			
=	_		GAINESVILLE	GA		30501-331	4	(770) 536	-25/5		
	Terminate	:d		preign province/state/cour		Foreign posta		1			
X	Amended	return	- •	•	•	٠.		G Gross re	eceipts \$		423,213
=			# N		•				•		
	Application	n pending	F Name and address of principal officer					his a group retur			Yes X No
			AMANDA MCCLURE 514 GREE	<u>EN STREET NE, GA</u>	MINESVIL	LE, GA 30	🗐 Н(в) Аг	e all subordina	ates includ	ed?	Yes No
١.	Tax-exemp	ot status	X 501(c)(3) 501(c) () ◀ (insert no)	4947(a)(1)	or 527	lf.	"No," attach a	list (see ir	nstructions)	
			W QUINLANARTSCENTER OR				┨、。			_	
						т	H(c) Gr	oup exemption	n number	<u> </u>	
Κı	Form of or	ganization	X Corporation Trust A	ssociation Other	•	L Ye	ar of form	ation 1947	7 Mis	tate of legal do	micile GA
ŀ	Part I	Sur	nmary								
	1		escribe the organization's mission	n or most significant	tactivitie	s Brin	aina the	visual arts	to life a	ind to	
ဗ္ဗ		-	of the community The Quinlan Vis	•							
Ë			ng the visual arts and Georiga art								
& Governance	i i										
Š			nis box ▶ if the organization			or disposed	of mor	e than 25%	of its n	et assets	
Ö			of voting members of the govern	• • •	•				3		33
S	4	Number	of independent voting members	of the governing bo	dy (P ∤art-	√l, line_1b)_			4		33
ij	5	Total nur	mber of individuals employed in c	alendar year 2013 ((Part∮V, lı	ne z a)- (5		8
Activities	6	Total nur	mber of volunteers (estimate if ne	ecessary)	1001		- V -		6		
Ą	7a	Total unr	elated business revenue from Pa	art VIII, column (C).	line h			SC	7a		
			lated business taxable income fr			OCT 2	1 201	a iöi	7b		-112,652
	1						Τ	Prior Cear		Currer	
•	8	Contribu	tions and grants (Part VIII, line 1	h)		0000			96,457		126,856
ž	9		service revenue (Part VIII, line 2	•		UGDE	M. U	\ // 		·	
Revenue			ent income (Part VIII, column (A),						05,399		104,846
æ									44 04 4		450.004
	1		venue (Part VIII, column (A), line				11,814		159,821		
			enue—add lines 8 through 11 (must			ie 12)	 	3	13,670		391,523
			ind similar amounts paid (Part IX		- 3)						
			paid to or for members (Part IX,								
es			other compensation, employee ber		ı (A), lınes	s 5–10)	121,298				131,510
Expenses			onal fundraising fees (Part IX, co								
ĝ	b	Total fun	draising expenses (Part IX, colur	nn (D), line 25) ▶		45,759		•	ľ		
ú	17	Other ex	penses (Part IX, column (A), line	s 11a-11d, 11f-24e)			18	37,954		220,575
			penses Add lines 13-17 (must ed			25) .		30	09,252		352,085
			e less expenses Subtract line 18		` ''	,			4,418		39,438
5 8					-		Beginn	ning of Currer		End o	
Net Assets or Fund Balances	20	Total ass	sets (Part X, line 16)					_ `	57,233		3,172,423
A88	21		oilities (Part X, line 26)						32,238	-	320,099
₹.5	22		ets or fund balances Subtract line	21 from line 20					24,995	· · · · · ·	
	art II			21 110111 11116 20	· · · · · · · ·	-	<u> </u>		4,990		2,852,324
			nature Block , I declare that I have examined this return								
Jiiu Shas	belief it is	true corre	ct, and complete. Declaration of preparer	, including accompanying	scnedules d on all info	and statements	s, and to tr	ie best of my i	knowleage		
		1 1	1/2 - 1/ 4//	/ // .	u on all line	madon or wine	ii piepaie	I lias ally kilos	//S/	2-10/	
Ŝię	gn	🗗 -	(mandy ///c	cura .					0.	2-17	
He	re		Signature of officer					Date		•	
		-	Rueloc	<u></u>							
	1		Type or print name and title					·			
Pá	2	Print	Type preparer's name	Preparer's signatur	е		Date	1	оь Г	PTIN	
Ρą́	id	Eug	enia Foster	Eugenia Foster	•		10/		Check _ self-emplo		10863
Pr	parer						1 10/			1	10003
	e Only	, Firm'	s name Eugenia L Foster CPA					Firm's EIN	<u>31-18</u>	31549	
		Firm'	s address ► 418 Pirkle Ferry Rd U	101, Cumming, GA	30040			Phone no	770-20	05-1967	
Мa	v the IR	S discuss	s this return with the preparer sho	own above? (see ins	structions					X Ye	es No
	,		· · · · · · · · · · · · · · · · · · ·			,					140

Form 9	90 (2013)	QUINLAN ARTS INC	58-6040517	Page 2
Par	t III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III		
1	Briefly	describe the organization's mission		
	_	g the visual arts to life and to the life of the community The Quinlan Visual Arts		
		promots the visual arts and artist in Georgia through deverse exhibitions,		
		ional programs, community partnerships and events		
2	Did the	organization undertake any significant program services during the year which were not listed on		
-		or Form 990 or 990-EZ?	Yes	X No
		" describe these new services on Schedule O		/\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
•				
3	service	organization cease conducting, or make significant changes in how it conducts, any program	Yes	X No
			res	
		" describe these changes on Schedule O		
4		be the organization's program service accomplishments for each of its three largest program services,		
	-	ses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allo	cations to others	ı
	the tota	al expenses, and revenue, if any, for each program service reported		
4a	(Code) (Expenses \$ 270,759 including grants of \$ 13,624) (Revenue		
	Educat	ion is the mainstay for our organization. The Quinlan serves nearly 1500 adults and children		
	through	n continuing art education programming. We receive foundation support in the form of grants	••••	
		ide over 150 scholarships each year for children in underserved communities to attend our		
	summe	er art camp program, a tradition for many families in Northeast Georgia. Our camp has seen	*	
	signific	ant enrollment increases (>65% in the past 2 years) We provide low cost introductory and		
	interme	ediate classes in all media including drawing, painting, sculpture, ceramics, jewelry		
		college and figure study. Ma work to nurture developing artists at all stages of their		
	artistic	journey We take pride in providing 10 master workshops annually that are designed for		
		shad artists to have their skills. Dreviews growth from the CA Council for the Arts		
		oots Arts Program have provided the opportunity to establish a program for art educators to		
	earn th	eir Professional Learning Units, and provide other free educational events such as artist		
		ook signings and demonstrations		
4b	(Code) (Expenses \$ including grants of \$) (Revenue	e \$	<u> </u>
		unlan host up to twenty (20) major exhibitions annually and proudly showcases nearly 400	*	/
		ons produced at the center. We address specific community needs through two of our most		
		a sub-b-trans. In the annual Varith Art Manth, in callaboration with the least Viviania		
		repair in 250 young artists grade 6.12. The applied Mambaria Exhibition ages fall is our		
		t standing tradition (64 years) and our largest exhibtion where ALL Quinlan Members are		
		to submit pieces for exhibition. Artists are also afforded the opportunity to introduce		
		ork to the community and the avid art collectors in a professional gallery setting. Entry		
		white tens in free and open to the general public. Me heat poorly 0,000 violars cook		
		Four are given to study alube and schools. Each exhibition procents an expectually to		
		a valuable and far reaching impact on the quality of life in the community through the visual		
	arts	a valuable and far reaching impact on the quality of the firthe community through the visual		
4c) (Expenses \$ including grants of \$) (Revenue	- · · · · · · · · · · · · · · · · · · ·	
70	(Code) (Expenses # including grants or #) (Revenue	· · · · · · · · · · · · · · · · · · ·	/
	_			
4d		program services (Describe in Schedule O)		
	(Exper)	
4e	Total p	rogram service expenses 270,759		

<u>Part</u>	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	\Box
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		×
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		Х
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,	5		 x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	<u> </u>	-	Ë
-	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,	<u> </u>	-	É
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Ιx
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	x	
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	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	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			
	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	
	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
	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? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			١
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
L	Schedule D, Parts XI and XII	12a		X
Ŋ	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 and XII is optional	406		V
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	140		 ^
_	fundraising, business, investment, and program service activities outside the United States, or aggregate			ł
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.		l
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	X	_
13	If "Yes," complete Schedule G, Part III	10		v
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20h		

Part	t IV Checklist of Required Schedules (continued)	_		-
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government 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 or 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		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 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 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 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		x
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		×
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			6
	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		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	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 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		X
	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		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		 ^
JJ	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,	133		<u> </u>
•	III, or IV, and Part V, line 1	34		х
35a		35a		Х
	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	ļ	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
o =	organization? If "Yes," complete Schedule R, Part V, line 2	36	 -	X
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	37	,	_

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

197 Note. All Form 990 filers are required to complete Schedule O

Part V

Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response or note to any line in this Part	٧.		

					Г.:	
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	J 29		Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b			, a	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and		table		73. a	
	gaming (gambling) winnings to prize winners?	ГСРО	labic	1c	X	war war and
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax]				5
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	8			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re	turns	?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ons)			1	20
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" to line 3b, provide an explanation in Schedu			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			
	over, a financial account in a foreign country (such as a bank account, securities account, or other	financ	cial	١.		
	account)?			4a	, ,	X
b	If "Yes," enter the name of the foreign country					28
5a	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Account Was the assessment of a product of a prod	•	DAR)	5-0	- in make	
b b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.		n?	5a 5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	sacilo	1117	5c		 ^-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	l tha		30		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	1 1110		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions	or			
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).				44.16	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	or god	ods			
	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		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was				
_	required to file Form 8282?		1	7c	وما سينو	4.486.)
d	If "Yes," indicate the number of Forms 8282 filed during the year .	7d	L		3	1
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con			7f		X
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 88 if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 88 is the organization file F		•	7g 7h		$\frac{1}{x}$
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		OIII 1030-C		E CONTRACTO	4/ 4
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsorii				源	
	organization, have excess business holdings at any time during the year?	.5		8		(عَمْسِينَ
9	Sponsoring organizations maintaining donor advised funds.					
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		
0	Section 501(c)(7) organizations. Enter		1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter	مما	1			
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) .	446				
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Fo	11b	1412	12a	100	i i i
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		128		44
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	- Province	
-	Note. See the instructions for additional information the organization must report on Schedule O	•				
b	Enter the amount of reserves the organization is required to maintain by the states in which				ر بر دو	
	the organization is licensed to issue qualified health plans	13b			ž	
C	Enter the amount of reserves on hand	13c				
4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	L	Х
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sched	ule O		14b		
				Form	990	(2013)

Form 990 (2013) QUINLAN ARTS INC Part VI 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 or note to any line in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 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 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 any other officer, director, trustee, or key employee? Х 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a 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? Х 8a Х Each committee with authority to act on behalf of the governing body? 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

Sect	t ion B. Policies (This Section B requests information about policies not required by the Internal Revenue (Code.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
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	Х	
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		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy? .	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		Х
	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			
	with a taxable entity during the year? .	16a		<u> </u>
b	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			
	the organization's exempt status with respect to such arrangements?	16h		1

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and

State the name, physical address, and telephone number of the person who possesses the books and records of the

514 GREEN STREET NE, GAINESVILLE, GA 30501

X Upon request

Section C. Disclosure

19

20

Own website

List the states with which a copy of this Form 990 is required to be filed

financial statements available to the public during the tax year

organization

AMANDA MCCLURE

available for public inspection. Indicate how you made these available. Check all that apply

Another's website

Other (explain in Schedule O)

(770) 536-2575

•	1										
Form 990 (2013)	QUINLAN ARTS INC									58-60405	17 Page 7
Part VII	Compensation of Officers, Dire	•	es, K	(ey	En	plq	yee	s, I	lighest Comp	ensated	
	Employees, and Independent C							_	1.3.01		[]
	Check if Schedule O contains a re	 ·				_				•	· ·
Section A.	Officers, Directors, Trustees, Key E										
	his table for all persons required to be I	listed Report co	mper	ısat	ion 1	for t	he ca	lend	dar year ending v	with or within the	
organization's	•		, .						4		4
of compensati List all o List the who received organization a	of the organization's current officers, di on. Enter -0- in columns (D), (E), and (lo of the organization's current key emplo organization's five current highest con reportable compensation (Box 5 of Fori and any related organizations	F) if no compens yees, if any See npensated emplo m W-2 and/or Bo	sation e instr oyees ox 7 d	wa ruct (ot of Fo	s pa ions her orm	for than 109	defin n an d 9-MIS	ition offici SC)	of "key employe er, director, trusto of more than \$1	ee " ee, or key emplo 00,000 from the	yee)
	of the organization's former officers, ke eportable compensation from the organ							ed e	employees who r	eceived more that	an
 List all of 	of the organization's former directors of	or trustees that	recei	ved	, ın t	he d	capac	aty a	as a former direc	tor or trustee of	the
organization, i	more than \$10,000 of reportable compe	ensation from the	e orga	anız	atıoı	n an	id any	/ rel	ated organizatio	ns	
	n the following order individual trustees employees, and former such persons	or directors, ins	titutio	onal	trus	stee	s, offi	cers	s, key employees	s, highest	
Check this	s box if neither the organization nor any	y related organiz	ation	cor	npe	nsa	ted a	пу с	urrent officer, dır	ector, or trustee	
Check this box if neither the organization nor an (A) Name and Title		(B) Average		Pos heck		than o		(D) Reportable	(E) Reportable	(F) Estimated	
		hours per	office	er an	d a d	irecto	or/trust	ee)	compensation	compensation	amount of
		week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) AMANE	A J MCCLURE	40 00									
EXECUTIVE I			Х			X	Х		51,326		6,423
	ETH BALDWIN	2 00			,						
PAST PRESID (3) AMAND		2.00	X		Х	⊢	 				
PRESIDENT	AGRIFFIN	2 00	x	ŀ	x						
(4) BREAN	DA BAHEL	2 00		╁┈	 ^	\vdash					
TREASURER			х		Х						
(5) CINDY	WILSON	2 00									
SECRETARY			X	L	X	L	<u> </u>	L			
(6) ANN AL		1.00	l								
BOARD OF T			X	_	<u> </u>	<u> </u>					
(7) CAROL		1 00	1								
BOARD OF TI		4.00	X	H	-	<u> </u>	 	_			
(8) SANDR BOARD OF T		1 00	х								
	ARLSON-GRIFFETH	1 00	_	-	\vdash	\vdash	-	-			
BOARD OF T		1 00	х								
	LEEN CARTER	1 00	<u> </u>		T	 	l				
BOARD OF T			х								
	LLA COLLINS	1 00									
BOARD OF T	DIISTEES		l v	ŀ	1	l	I	I			

1 00

1 00

(12) CAROLE-ANN DANIEL
BOARD OF TRUSTEES
(13) DELORES DIAZ
BOARD OF TRUSTEES
(14) CARLOS DOMINGUEZ

BOARD OF TRUSTEES

Pa	Section A. Officers, Directors, Tru	ustees, Key Em	oloye	es,	and	Hi	ghes	t Co	ompensated Em	ployees (contin	ued)
					((C)		_			
	(A)	(B)	(40.	ant of		ition	than c		(D)	(E)	(E)
	Name and title	Average					is both		(D) Reportable	Reportable	(F) Estimated
		hours per week (list any					or/trust	_	compensation from	compensation from related	amount of other
		hours for	Individual trustee or director	Institutional	Officer	Key employee	Highest co employee	Former	the	organizations	compensation
		related organizations	rect	uto	ģ	emp	est o	Ę	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
		below dotted	우출	nal t		loye	e XIII		(***2 1033-111100)		and related
		line)	stee	trustee		ď	ens				organizations
				8			Highest compensated employee				
(15)	ANNE BRODIE HILL	1 00		-		\vdash					
	RD OF TRUSTEES	ļ	х								
	JOYCE HORNOR	1 00	 ^								
	RD OF TRUSTEES	1	x								
	ELISABETH KENDRICK	1 00	 ^	\vdash							
	RD OF TRUSTEES	1	х								
	SISSY LAWSON	1 00	<u> </u>	\vdash							
	RD OF TRUSTEES		х								
(19)	MARY LOU MELVIN	1 00									
BOAI	RD OF TRUSTEES	1	X								
(20)	PETE MILLER	1 00									
BOA	RD OF TRUSTEES		Х								
(21)	ANN NIXON	1 00								_	
BOA	RD OF TRUSTEES		X								
	BETSY PENNINGTON	1 00									
	RD OF TRUSTEES		X	Ш		Щ					
	TYLER SMITH	1 00									
	RD OF TRUSTEES		<u> </u>								
	MARK TAYLOR	1 00	١.,				Į				
	RD OF TRUSTEES	1.00	. X								
	DIXIE TRUELOVE	1 00									
1b	RD OF TRUSTEES Sub-total	<u> </u>	Χ	LJ				_	54.000		0.400
C	Total from continuation sheets to Part VII, So	nation A						•	51,326		6,423
d	Total (add lines 1b and 1c)	ection A							51,326	· · · · · · · · · · · · · · · · · · ·	6,423
2	Total number of individuals (including but not lir	mited to those lis	ted a	hov	e) w	/ho /	recen	hev		000 of	0,423
-	reportable compensation from the organization		icu a	504	c, ••	,,,,,	CCCI	vcu	more than \$100	,000 01	
		, , ,									Yes No
3	Did the organization list any former officer, dire	ctor, or trustee, I	kev e	lam	ove	e. oi	r hiah	est	compensated		
	employee on line 1a? If "Yes," complete Sched				-,-	-, -	5		,		3 X
4	For any individual listed on line 1a, is the sum of	of reportable com	nens	atio	n ai	nd o	ther	com	nensation from		
•	the organization and related organizations great	•							•	7	
	individual .	1101 than \$100,00	,0 - ,,	,,	Ο, (,,,,	picio	00,	ricadic o for suci	r	4 X
5		ua aamnanaatia	- 6								
J	Did any person listed on line 1a receive or accr for services rendered to the organization? If "Ye									iduai	5 X
Sect	ion B. Independent Contractors	os, complete oc	negu	10 0	101	Suci	i per	3011	· · · · · · · · · · · · · · · · · · ·		3 ^
1	Complete this table for your five highest compe	ensated independ	lent o	onti	racti	ors	that r	ece	ived more than 9	\$100,000 of	
	compensation from the organization Report co										ax
	year (A)						\neg		(B)		(C)
	Name and business addi	ress							Description of serv	rices C	ompensation
											
							\dashv				
									. <u>-</u>		
2	Total number of independent contractors (include	ding but not limite	ed to	thos	ال م	ster	l	۱۹۷	who received		
_	more than \$100,000 of compensation from the		→				. 450	. • ,			, and the second

12

Total revenue. See instructions

QUINLAN ARTS INC 58-6040517 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Unrelated Related or Revenue Total revenue business excluded from exempt function revenue tax under sections revenue 512-514 Federated campaigns Contributions, Gifts, Grants and Other Similar Amounts Membership dues 1b 54,226 Fundraising events Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 72,630 Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f 126,856 **Business Code** Program Service Revenue CAMP, CLASS, WORKSHOP & EDUCATION 713990 104,846 All other program service revenue Total. Add lines 2a-2f 104,846 Investment income (including dividends, interest, and 3 other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (ı) Real (II) Personal 6a Gross rents 15,800 **b** Less rental expenses 15,800 c Rental income or (loss) 15,800 d Net rental income or (loss) (i) Securities (II) Other 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) ▶ d Net gain or (loss) Other Revenue 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV. line 18 85,527 **b** Less direct expenses 31,690 c Net income or (loss) from fundraising events 53,837 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities. ▶ 10a Gross sales of inventory, less returns and allowances 45.694 **b** Less cost of goods sold c Net income or (loss) from sales of inventory 45,694 Miscellaneous Revenue **Business Code** Miscellanous 900099 2,353 11a Interest 900099 3,628 b Gain/Loss on Securities 900099 38,509 All other revenue Total. Add lines 11a-11d 44,490 \triangleright

391,523

	90 (2013) QUINLAN ARTS INC			58-604	0517 Page 10
	t IX Statement of Functional Expenses	- 411 - 4			
Secti	on 501(c)(3) and 501(c)(4) organizations must complete all		-	omplete column (A)	
	Check if Schedule O contains a response or note	to any line in this Pa	(B)	· (C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
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,				2000
Ū	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	51,353	35,947	2,567	12,839
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	59,397	29,699	17,818	11,880
7	Other salaries and wages				
8	Pension plan accruals and contributions (include		i		
9	section 401(k) and 403(b) employer contributions) Other employee benefits	12,288	8,602	614	3,072
10	Payroll taxes .	8,472	5,930	848	1,694
11	Fees for services (non-employees)	0,412	3,930	040	1,054
	Management .				
b	Legal				
C	Accounting .	2,250		2,250	
d	Lobbying				*.61
е	Professional fundraising services See Part IV, line 17.				
f	Investment management fees	2,368		2,368	
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	2,261	2,261		
13	Office expenses	6,950	5,560	795	595
14	Information technology	1,114	780	111	223
15	Royalties .	40.040	00.404	0.440	4.000
16 17	Occupancy	42,919	36,481	2,146	4,292
17 18	Payments of travel or entertainment expenses			-	
10	for any federal, state, or local public officials		İ		
19	Conferences, conventions, and meetings				
20	Interest .	17,516	13,137	1,752	2,627
21	Payments to affiliates				
22	Depreciation, depletion, and amortization.	35,448	26,586	3,545	5,317
23	Insurance	8,829	7,505	441	883
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If			ŀ	
	line 24e amount exceeds 10% of line 25, column			ļ	
	(A) amount, list line 24e expenses on Schedule O)	55.007	55,007		
a	CAMP/WORKSHOP EXPENSES AND CLASSES	55,927	55,927		
b	SALES EXPENSE	37,056	37,056		1 715
c d	FUNDRAISING BANK CHARGES	1,715 5,647	4,799	282	1,715 566
u e	All other expenses 575	5,647	4,799	30	56
25	Total functional expenses. Add lines 1 through 24e	352,085	270,759	35,567	45,759
26	Joint costs. Complete this line only if the	552,555	270,700	30,007	40,709
_•	organization reported in column (B) joint costs			ļ	
	from a combined educational campaign and			ļ	
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

		Check if Schedule O contains a response or	note to	any line in this Part X			
					(A) Beginning of year		(B) End of year
ĺ	1	Cash—non-interest-bearing .			38,917	_1	54,569
- 1	2	Savings and temporary cash investments		<u> </u>		2	
i	3	Pledges and grants receivable, net		L		3	
	4	Accounts receivable, net				4_	5,090
	5	Loans and other receivables from current and for		· ·			
		trustees, key employees, and highest compensations Complete Part II of Schedule L	ated en	nployees			
	6	Loans and other receivables from other disqualified person	na (aa d	ofined under costum		5	
	0	4958(f)(1)), persons described in section 4958(c)(3)(B), a					
		sponsoring organizations of section 501(c)(9) voluntary e					
ம		organizations (see instructions) Complete Part II of Sche	3 Deficilitary		6	<u> </u>	
Assets	7	Notes and loans receivable, net	duic L	·	.	-	-
As	8	Inventories for sale or use	•	F	4,047	8	3,161
	9	Prepaid expenses and deferred charges		<u> </u>	4,047	9	0,101
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	2,902,173			
	b	Less accumulated depreciation	10b	551,600	2,495,002	10c	2,350,573
	11	Investments—publicly traded securities		33,1333	207,141	11	246,903
	12	Investments—other securities See Part IV, line	11	<u> </u>	,	12	
	13	Investments—program-related See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets See Part IV, line 11	512,126	15	512,127		
	16	Total assets. Add lines 1 through 15 (must equa	al line 3	(4)	3,257,233	16	3,172,423
	17	Accounts payable and accrued expenses		708	17	491	
	18	Grants payable			18		
	19	Deferred revenue	5,538	19	4,635		
-	20	Tax-exempt bond liabilities			20		
- 1	21	Escrow or custodial account liability Complete F			21		
ies	22	Loans and other payables to current and former		· · · · · · · · · · · · · · · · · · ·			
Liabilities		trustees, key employees, highest compensated		ees, and			
ia		disqualified persons Complete Part II of Schedu				22	
7	23	Secured mortgages and notes payable to unrela			323,632	23	298,632
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines Part X of Schedule D	3 17-24	Complete	2 260	25	16 241
	26	Total liabilities. Add lines 17 through 25		-	2,360 332,238	25 26	16,341 320,099
	20				332,230	20	520,099
seor		Organizations that follow SFAS 117 (ASC 958 complete lines 27 through 29, and lines 33 ar	•	k here ► X and			
<u>a</u>	27	Unrestricted net assets		L	2,292,445	27	2,220,301
ĕ	28	Temporarily restricted net assets			630,586	28	630,586
힐	29	Permanently restricted net assets			1,964	29	1,964
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), complete lines 30 through 34.	check h	ere ▶ ☐ and		ı	
ets	30	Capital stock or trust principal, or current funds		•		30	
155	31	Paid-in or capital surplus, or land, building, or ed	quipme	nt fund		31	
t a	32	Retained earnings, endowment, accumulated in		_		32	
Ž	33	Total net assets or fund balances			2,924,995	33	2,852,851
	34	Total liabilities and net assets/fund balances			3,257,233	34	3,172,950

r Onni	930 (2013) QUINLAN ARTS INC		0040317	Pag	<u>e 12</u>
<u>Par</u>	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		391	,523
2	Total expenses (must equal Part IX, column (A), line 25).	2		352	,085
3	Revenue less expenses Subtract line 2 from line 1	3		39	,438
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,924	,995
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		2,964	433
<u>Part</u>	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			. [
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		***	翻譯	2
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			100	3443
	Schedule O				A
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	-
	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	1	3.7		
	X Separate basis Consolidated basis Both consolidated and separate basis	•			
b	Were the organization's financial statements audited by an independent accountant?		2b	X	1
	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				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			鑋	
Ū	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in			388	135
	Schedule O.		300		10 mm
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		108/118	Action 1	الحم الانتنا
	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 audite explain why in Schedule O and describe any stens taken to undergo such audite		36		

Form **990** (2013)

Continuation Sheet for Form 990

Page 1 of 1

Name of the Organization
QUINLAN ARTS INC

Employer identification number

58-6040517

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees (A) (E) (F) (C) (D) Position (check all that apply) Name and title Average Reportable Reportable Estimated Former
Highest compensated hours per compensation compensation amount of Key employee Officer Institutional trustee Individual trustee from related other week from (list any the organizations compensation hours for organization (W-2/1099-MISC) from the organization (W-2/1099-MISC) related and related organizations organizations below dotted (26) PEGGY WALTERS 1 00 **BOARD OF TRUSTEES** (27) GORDON AND JEAN SAWYER HON TRUSTEE (28) FRANCIS MATHIS 1 00 HON TRUSTEE (29) DAVID ABEE 2 00 PRESIDENT ELECT (32)