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. Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

OMB No 1545-0047

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.

Open to Public Inspection

_	Α	For the	2014 cal	endar year, or tax year b			ER 1, 2014	, and e			
	B 0	heck if	applicable	C Name of organization	FOND DU L	AC FESTIV	ALS, INC.		D Employer	identificati	on number
[A	ddress	change	Doing business as							
Г	╗.			Number and street (or P C	box if mail is no	t delivered to s	treet address)	Room/suite	39-1387857	•	
L	^	lame ch	ange	650 NORTH MAIN STI	REET				E Telephone	number	
ſ	lr	nitial retu	ırn	City or town			State	ZIP code	(020) 022 0		
r	Ξ.			FOND DU LAC			WI	54935	(920) 923-6	555	
L		inai return	/terminated	Foreign country name	Foreign	province/state/	county	Foreign postal	code		
		mended	l return						G Gross rece	ipts \$	385,043
Г	٦,	nnlinatio	n pending	F Name and address of princ	cinal officer	. <u>-</u>			11/23/12/15		es? Yes X No
L	^	ppiicalic		· ·	•	OT COND	5111 46 140	54005	H(a) is this a group return f		
-				RAY LAPIERRE 54 CC		-			H(b) Are all subordinate		
ı	l Ta	ax-exem	pt status	501(c)(3) X 501(c)	(4)◀	(insert no)	4947(a)(1)	or 527	If "No," attach a lis	t (see instr	uctions)
-	JW	ebsite	: ▶ WV	/W FDLFEST COM					H(c) Group exemption r	umber 🕨	
-					🗆 🐧	4.a. D 015		I Vac			of local decide
			rganization	_==_	ist Associa	tionOth	er ▶	Litez	ar of formation 1983	M State	of legal domicile WI
ı	P	art l		nmary							
		1	Briefly d	escribe the organization	n's mission or	most signi	ficant activit	ies: <u>S</u> E	E SCHEDULE O		
	ည										
	īā.	l									
	Æ	2	Check tl	nis box 🕨 If the org	anization dis	continued if	s operation	s or dispose	ed of more than 25%	of its ne	et assets
	Ó	3		of voting members of t						3	10
	Activities & Governance	1 4		of independent voting	-	• •			`	4	10
	es			mber of individuals em					/	5	2
	₹	3	Total nu	mber of individuals empty mber of volunteers (est	mote if see	iluai yeai 2	AN'T FST	MATE (M	ORE THAN 500)	6	
	ਝ	9	Total nu	mber of volunteers (est	imate if neces	ssary)•	(O) 1 = - 40	+ (m.	ا (مؤم) الالالان		
	⋖	7a		related business reven						7a	0
_		b	Net unre	elated business taxable	income from	Form 990-	1, line 34	··	 	7b	0
-, '									Prior Year		Current Year
5	ē	8 Contributions and grants (Part VIII, line 1h)									
•	en	9 Program service revenue (Part VIII, line 2g)							396	,053	384,093
	Revenue	10		ent income (Part VIII, c						625	950
•	œ	11	Other re	venue (Part VIII, colum	n (A), lines 5,	6d, 8c, 9c,	10c, and 11	le)	29	,500	0
		12	Total rev	enue-add lines 8 through	n 11 (must equ	al Part VIII, c	column (A), lii	ne 12) .	426	<u>,178</u>	385,043
Ξ		13	Grants a	and similar amounts pai	d (Part IX, co	lumn (A), lir	nes 1-3) .		5	,000	0
		14	Benefits	paid to or for members	(Part IX, colu	umn (A), line	e 4)	 1			
٠,	S	15	Salaries.	other compensation, emp	lovee benefits	(Part IX. coli	min (AF. lines	5-10).	123	,213	129,668
=	Se	16a	Professi	onal fundraising fees (F	art IX colum	REP	7e)	181			
intrated.	Expenses	ь		ndraising expenses (Pa				101 0			
3	Ä		Otheres	manage (Part IV colum	n (A) lined	10), iiie 20)	672715	13.1	331	972	325,665
Ĵ.		17 18	Total	penses (Part IX, colum penses. Add lines 13–1	7 (must only	$F_{-}NK_{\Lambda}$	Lump (A) lu	196		,085	455,333
J.			Dovern	e less expenses Subtra	ot inc. 10 from	prairix, co	(A), 10	- Pri 201		,907	-70,290
-	_ v	19	Revenue	e less expenses Subira	ict line 10 libi	OGL	JEN U		Beginning of Current	$\overline{}$	
	Net Assets or Fund Balances	20	T-4-1	nate (Dart V. June 40)	I.	000					End of Year
	Bala	20		sets (Part X, line 16).				•		,535	203,625
	et A	21		bilities (Part X, line 26)						477	2,857
				ets or fund balances Su	ibtract line 21	from line 2	20	• • • •	2/1	,058	200,768
	Pai			nature Block							
				 I declare that I have examine ict, and complete, Declaration 							
-	and b	ellet, it i	s true, corre	ict, and complete. Declaration	or preparer (otner	than officer) is	baseu on an in	ioimation of wit	ich preparer has any kno	wieuge	
•	Sig	n	🕽 .	<u> </u>	me						
	Her		'	Signature of officer KAPU ()	100 E 0 1/	T	P	, <u>, , , , , , , , , , , , , , , , , , </u>	Date	ے ا م	
-					MERK	ے ت	resid	Jul .		12	
_		_		Type or print name and title					T=		
	n - ·		Print	Type preparer's name	j	Preparer's sign	lature	1-1 A	Date Ch	eck	PTIN
	Paid		EDV	VARD L FOY	ļ	נוגלם צ	uil I	tan (11/1 - 7///	f-employed	
1	Pre	parer			NOBORN	<u> </u>	~1010	- July - 1	· · · / · / · · · ·		
Į	Use	Only		s name ► FOY & SPR					/ Firm's EIN ▶		
_			Firm	's address ► 560 FOND [U LAC AVE	NUE, FOND	DU LAC, V	VI 54 9 35	Phone no	920) 922	<u>!-2100</u>
١	Mav	the IR	S discus	s this return with the pr	eparer shown	above? (se	ee instructio	ns) . 🕽			X Yes No
-				iction Act Notice, see the				 			Form 990 (2014)
,	· U/ /	apelv	いいれ へせはし	ionon moi Nonce, see the	separate iliSt	, 4660115.					1 Juli 999 (2014)

	990 (2014)	FOND DU LAC FESTIVALS, INC.	39-1387857	Page 2
Pa	rt III 🦻	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III	<u></u>	L
1	DIRECT COMMU LIGHT U	escribe the organization's mission: , PROMOTE, AND SUPPORT FESTIVALS AND SPECIAL EVENTS THAT SHOWCASE THE INITY WITH A GREAT DEAL OF HELP AND SUPPORT FROM THE COMMUNITY, WALLEY IP THE CITY, AND SOCIETY INSURANCE TASTE OF FOND DU LAC EVENTS TAKE PLACE S BENEFIT MORE THAN 100 LOCAL NON-PROFITS.	YE WEEKEND,	
2	the prior If "Yes,"	organization undertake any significant program services during the year which were not listed Form 990 or 990-EZ?		X No
3	services'	organization cease conducting, or make significant changes in how it conducts, any program ?	Yes	X No
4	Describe expense:	e the organization's program service accomplishments for each of its three largest program sees. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants as expenses, and revenue, if any, for each program service reported		
4a	WALLEY FESTIVA) (Expenses \$ 244,864 including grants of \$) (Reve YE WEEKEND - 2 1/2 DAY JUNE FESTIVAL - COMMUNITY / VOLUNTEER ORIENTED - FRE AL AT LAKESIDE PARK, FOND DU LAC LOTS OF EVENTS, ENTERTAINMENT, COMPETI SSIONS FOR THE WHOLE FAMILY AND VISITORS.	EE ADMISSION TIONS, AND	
4b	TASTE C) (Expenses \$ 36,052 including grants of \$) (Revenience of FOND DU LAC - ONE DAY FESTIVAL HELD AT THE FDL LAKESIDE PARK - GEARED FOR TO TASTE VARIOUS FOODS FROM MANY RESTAURANTS - TICKET ADMISSION	nue \$ 45	5,702) ITY
4c	(Code ⁻ LOCAL F) (Expenses \$ 965 including grants of \$) (Rever	nue \$1	, <u>0</u> 000_)
4d	Other pro	ogram services. (Describe in Schedule O.) es \$ 0 including grants of \$ 0) (Revenue \$	0)	
		gram service expenses 281.881		

FOND DU LAC FESTIVALS, INC 39-1387857 Form 990 (2014) Page 3 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 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 98-197 If "Yes," complete Schedule C, 5 Х 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 6 Х 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х complete Schedule D, Part III . 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 Χ 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted 10 Х endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI. VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete 11a X b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more Х 11b c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X. 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E... 13 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking. fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b 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 Х 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 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

18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

18

19

20a

20b

Form 990 (2014) FOND DU LAC FESTIVALS, INC Part 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 domestic 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 or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	20		
~~	·	22		_X
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		Х
b	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		•
4	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	-		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24d		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u>X</u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	1 1	İ	
	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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any		1	
	current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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,	<u> </u>		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).	00-		V
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	_	X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	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	_	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Χ
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		i	
	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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	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	
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	1	
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			
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	$_{X}$	
			990 0	2014)

Pal	Check if Schedule O contains a response or note to any line in this Part V.			
	Check it Schedule O contains a response of note to any line in this Part V	<u>·</u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	7	103	
b		5		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	7		
	gaming (gambling) winnings to prize winners?	1c	x	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 2	2		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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 Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			ĺ
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR)	_		
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		<u> X</u>
С	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	6a		Х
L.	organization solicit any contributions that were not tax deductible as charitable contributions?	0a	\vdash	^
þ	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.0		
7 a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods N/A			
а	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
•	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
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. Did a donor advised fund maintained by the N/A		1 1	!
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.) I	1
а	Did the sponsoring organization make any taxable distributions under section 49667	9a	\vdash	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			1
a	Initiation fees and capital contributions included on Part VIII, line 12	-		1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		1
11	Section 501(c)(12) organizations. Enter N/A Gross income from members or shareholders			1
a	Gross income from members or shareholders	1	1 1	1
b	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? N/A	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	,		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	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			
	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	\sqcup	X
h	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b	, 1	

Form 9	990 (2014) FOND DU LAC FESTIVALS, INC	37857		Page (
Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for)"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S Check if Schedule O contains a response or note to any line in this Part VI	iee in:	struci	ions.
Sect	ion A. Governing Body and Management			<u> </u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 10	<u>기</u>		
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b		1	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	ή		
_	any other officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct	T-	-	<u> </u>
	supervision of officers, directors, or trustees, or key employees to a management company or other person?.	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
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 or appoint			
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l '		
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
_	the year by the following The governing body?	8a	Х	
a b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	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	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode)		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		_X
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	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	Х	
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120		
Ŭ	describe in Schedule O how this was done	12c	Х	
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	Х	
b	Other officers or key employees of the organization	15b	X	
4.0	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		v
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	104		X
D	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?	16b		
Sect	ion 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 501(;)(3)s	only)	
	available for public inspection. Indicate how you made these available. Check all that apply.			
40	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest financial statements available to the public during the tax year.	policy	, and	
	manda datament datamen to the public damig the tax jour.			

State the name, address, and telephone number of the person who possesses the organization's books and records:

650 N. MAIN STREET, FOND DU LAC, WI 54935

LEANNE DOYLE

20

(920) 923-6555

orm 990 (2014)	FOND DU LAC	FESTIVALS	IN
OHH 990 (2014)	LOND DO TWO	FESTIVALS,	117

39-1387857

Page 7

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated		
•	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII		

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees, and former such persons.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

	<u>, </u>				<u> </u>				•	
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	x, ici Individual trustee or director	unles er an	Pos neck ss pe	erson	n both this Highest compensated the soft employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) SAM MCCLONE DIRECTOR	1.00	X								
(2) LIV MOYER DIRECTOR	1 00	х								
(3) DEAN VOLLMER DIRECTOR	1 00	Х								
(4) DAN KAMINSKY DIRECTOR	1.00	Х								-
(5) WAYNE ROLLIN DIRECTOR	1 00	х								
(6) WILLIAM WUSKE DIRECTOR	1.00	Х							-	
(7) RAY LAPIERRE PRESIDENT	1.00	_		Х						
(8) KARYN MERKEL VICE PRESIDENT	1 00			X						
(9) HOLLY LUEHRING SECRETARY	1 00			Х						
(10) BARB KNUTZEN TREASURER	1 00			X						
(11)										
(12)										
(13)										
(14)										

	art VII Section	A. Officers, Directors, T	rustees, Key Eı	mplo	yee	s, a	ınd	High	<u>iest</u>	Compensated	Employees	(co	ntinu	red)	
		A) and title	(B) Average hours per	box,	unle: er an	Pos neck ss pe	erson	e than is bot or/trus	h an tee)	(D) Reportable compensation	(E) Reportable compensatio	- 1		(F) Estimate	
			week (list any hours for related organizations below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from relate organizatior (W-2/1099-Mi	ns	org ar	other mpensa from the ganizat nd relate ganizate	ation e tion ted
(15)															
(16)											· · · ·				
(17)															
(18)															
<u>(19)</u>															
(20)															
(21)												\dashv			
(22)												\dashv			
(23)								·							
(24)							-								
(25)															
1b										0		0			
C		ation sheets to Part VII, S						•		0		0			
d 	Total (add lines 1b Total number of indi	viduals (including but not	limited to those					no re	ceiv		100,000 of				
	reportable compens	ation from the organization	n 🕨			0_									
3	Did the organization	list any former officer, di	ector, or trustee	e, key	em/	plo	yee	, or h	ngh	est compensate	d	Γ	-	Yes	No
	• •	? If "Yes," complete Sche										}	3		X
4		ited on line 1a, is the sum I related organizations gre										1			ı
	individual .							·					4		Х
5		d on line 1a receive or acc d to the organization? <i>If</i> ")									idividual		5		Х
Sec	tion B. Independent							<u>F</u>							
1		for your five highest comp the organization Report c											ı's ta	×	
	N/A	(A) Name and business add	ress							(B) Description of serv	vices	Co	(C) ompen) isation	
															C
															0
															<u>0</u>
															0
2		ependent contractors (incli of compensation from the	_	nited ►	to th	1056	e lıs	ted a 0	bov	e) who received	1			_	

Form 990 (2014) FOND DU LAC FESTIVALS, INC. 39-1387857 Page 9 Part Vill Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII. . . . (C) (D) Total revenue Related or Unrelated Revenue exempt excluded from business function revenue tax under sections revenue 512-514 Federated campaigns . . 1a Contributions, Gifts, Grants and Other Similar Amounts Membership dues . . 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) . . . f All other contributions, gifts, grants, and similar amounts not included above . . . 1f g Noncash contributions included in lines 1a-1f: Total. Add lines 1a-1f **Business Code** Program Service Revenue 2a WALLEYE WEEKEND 900099 337,391 337,391 TASTE OF FOND DU LAC 900099 45,702 45,702 1,000 900099 1,000 f All other program service revenue g Total. Add lines 2a-2f 384,093 Investment income (including dividends, interest, and 950 4 Income from investment of tax-exempt bond proceeds . . 5 Royalties . . . (ı) Real (II) Personal 6a Gross rents b Less rental expenses . . c Rental income or (loss) 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. **b** Less direct expenses c Net income or (loss) from fundraising events 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 b Less. cost of goods sold c Net income or (loss) from sales of inventory . Miscellaneous Revenue **Business Code** 11a All other revenue

e Total. Add lines 11a-11d Total revenue. See instructions

384,093

385.043

Form 990 (2014) FOND DU LAC FESTIVALS, INC Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4)) organizations must com	plete all columns. All othe	r organizations must compl	lete column (A).	

	Check if Schedule O contains a response or note	e to any line in this l	Part IX	<u> </u>	
	not include amounts reported on lines 6b, 7b, 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 domestic organizations domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	20.040	22.742	00.000	
_	trustees, and key employees	80,946	60,710	20,236	· ·
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	24,900	18,675	6,225	
8	Pension plan accruals and contributions (include	24,500	10,070	0,220	
U	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	15,671	·····	15,671	
10	Payroll taxes	8,151	6,113	2,038	
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	8,786		8,786	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees		R.1 17.		
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	11,656	10,442	1,214	
13	Office expenses				
14	Information technology				
15	Royalties	5.040		5.040	
16	Occupancy	5,040 1,335		5,040 1,335	
17	Travel	1,333		1,335	-
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,925		4,925	-
20	Interest	4,020		4,020	
21	Payments to affiliates	-			
22	Depreciation, depletion, and amortization .	1,108		1,108	
23	Insurance	10,552		10,552	
24	Other expenses Itemize expenses not covered				
	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	1,794	912	882	
b	OTHER TAXES	63		63	
C	BUILDINGS & GROUNDS	83,202	83,202		
d	CONCESSION All other expenses STATEMENT 1	15,479	15,479	0.070	
	All other expenses STATEMENT 1	181,725	171,846	9,879 87,954	0
25 26	Total functional expenses. Add lines 1 through 24e . Joint costs. Complete this line only if the	455,333	367,379	01,954	
20	organization reported in column (B) joint costs	İ			
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				
					- 000

Part X Balance Sheet

	•	Check if Schedule O contains a response of	or note	to any line in this Part >	(.		
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			94,652	1	24,316
	2	Savings and temporary cash investments .			176,217	2	177,036
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			-,	4	
	5	Loans and other receivables from current and					
		trustees, key employees, and highest compen	sated e	employees.			
						5	
	6	Loans and other receivables from other disqualified personal	lefined under section				
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	and contr	buting employers and			
	1	sponsoring organizations of section 501(c)(9) voluntary e	mployee	s' beneficiary			
sts		organizations (see instructions). Complete Part II of Sche	edule L .			6	
Assets	7	Notes and loans receivable, net .		[7	
Ŕ	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	12,018			
	b	Less: accumulated depreciation	10b	9,745	2,666	10c	2,273
	11	Investments—publicly traded securities				11	•
	12	Investments—other securities. See Part IV, lin	e 11			12	
	13	Investments-program-related. See Part IV, lir	ne 11			13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11.				15	
	16	Total assets. Add lines 1 through 15 (must eq	ual line	34)	273,535	16	203,625
	17	Accounts payable and accrued expenses .			2,477	17	2,857
	18	Grants payable		· · ·		18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability Complete	Part I	/ of Schedule D 。 . 💄		21	
es	22	Loans and other payables to current and forme	er office	ers, directors,		1	
Liabilities	İ	trustees, key employees, highest compensate	•	•	İ	Ì	
abi		disqualified persons. Complete Part II of Scheen	dule L			22	
=	23	Secured mortgages and notes payable to unre				_23	
	24	Unsecured notes and loans payable to unrelat		· —		24	
	25	Other liabilities (including federal income tax, p	-				
		parties, and other liabilities not included on line	es 17-2	4) Complete		ĺ	
						25	
	26	Total liabilities. Add lines 17 through 25 .	•		2,477	26	2,857
40		Organizations that follow SFAS 117 (ASC 98	58), ch	eck here▶ X and			
čėš		complete lines 27 through 29, and lines 33 a	and 34			}	
an	27	Unrestricted net assets			271,058	27	200,768
Bal	28	Temporarily restricted net assets		[28	
þ	29	Permanently restricted net assets .		[29	
Ē		Organizations that do not follow SFAS 117 (ASC958),	check h	ere and			
ō		complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	:			30	
SS	31	Paid-in or capital surplus, or land, building, or e				31	
ťΑ	32	Retained earnings, endowment, accumulated in				32	
Se	33	Total net assets or fund balances .			271,058	33	200,768
	34	Total liabilities and net assets/fund balances			273,535	34	203,625

Form:	990 (2014) FOND DU LAC FESTIVALS, INC.	39	-1387857	Pa	ige 12
Par	t XI Reconciliation of Net Assets				3
	Check if Schedule O contains a response or note to any line in this Part XI				П
1	Total revenue (must equal Part VIII, column (A), line 12)	1		38	 5,043
2	Total expenses (must equal Part IX, column (A), line 25)	2			5,333
3	Revenue less expenses. Subtract line 2 from line 1	3			0,290
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			1,058
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		200	0,768
Part	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. X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		_		İ
	Schedule O				
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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b		×
b	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	•	20		^
	separate basis, consolidated basis, or both.				
					l
	Separate basis Doth consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		. 2c	Χ	
	If the organization changed either its oversight process or selection process during the tax year, explain in	İ			
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		. 3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
			Form	990 ((2014)

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.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

FON	D DU LAC FESTIVALS, INC		39-1387857				
Par	Organizations Maintaining Done	or Advised Funds or Other Similar F					
Complete if the organization answered "Yes" to Form 990, Part IV, line 6							
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year) .						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and d	onor advisors in writing that the assets hel	d in donor advised				
	funds are the organization's property, subject	ct to the organization's exclusive legal cont	trol? Yes No				
6	Did the organization inform all grantees, doi	nors, and donor advisors in writing that gra-	nt funds can be				
	used only for charitable purposes and not for	or the benefit of the donor or donor advisor,	, or for any other				
	purpose conferring impermissible private be	nefit?	Yes No				
Par	Conservation Easements.		21/4				
		ered "Yes" to Form 990, Part IV, line 7.	N/A				
1	Purpose(s) of conservation easements held						
-	Preservation of land for public use (e.g., recr	· - · - · · - · · · · · · · · · · · · ·	of a historically important land area				
	Protection of natural habitat		of a certified historic structure				
	=	Freservation	Tot a certified filstoric structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribu					
	easement on the last day of the tax year.		Held at the End of the Tax Year				
а	Total number of conservation easements .		. 2a				
b	Total acreage restricted by conservation eas		. 2b				
C	Number of conservation easements on a ce	, ,	2c				
ď	Number of conservation easements include		3 1				
•	historic structure listed in the National Regis		2d				
3	Number of conservation easements modifie	d, transferred, released, extinguished, or te	erminated by the organization				
	during the tax year						
4	Number of states where property subject to		and benefities of				
5	Does the organization have a written policy						
c	violations, and enforcement of the conserva		Yes No				
6	Staff and volunteer hours devoted to monito	mig, inspecting, and emorting conservation	in easements during the year				
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ear	sements during the year				
•	► \$	mspecting, and emoroting conservation ea-	ocinents during the year				
8	Does each conservation easement reported	on line 2(d) above satisfy the requirement	s of section				
•	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	• • •					
9	In Part XIII, describe how the organization re						
	balance sheet, and include, if applicable, the						
	the organization's accounting for conservation	_					
Par		ctions of Art, Historical Treasures, o	or Other Similar Assets.				
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 8	N/A				
1a	If the organization elected, as permitted und	er SEAS 116 (ASC 958), not to report in its	s revenue statement and balance sheet				
	works of art, historical treasures, or other sir	•					
	of public service, provide, in Part XIII, the tex	•					
b	If the organization elected, as permitted und						
_	works of art, historical treasures, or other sir						
	of public service, provide the following amou	•					
			▶ \$				
	(i) Revenue included in Form 990, Part VIII,(ii) Assets included in Form 990, Part X		▶ \$				
2	If the organization received or held works of	art, historical treasures, or other similar as	sets for financial gain, provide the				
	following amounts required to be reported up	nder SEAS 116 (ASC 958) relating to these	e items				
а	Revenue included in Form 990, Part VIII, line	e 1	▶ \$				
h	Assets included in Form 990 Part Y		k ¢				

Par	Organizations Maintaining	Colle	ctions of Art	, Historic	al Tre	asures, or (Other S	imilar Assets (contin	ued)	
3 .	Using the organization's acquisition,	access	sion, and other	records,	check a	ny of the follo	owing th	at are a significa	nt		
	use of its collection items (check all the	hat apı	ply):	_							
а	Public exhibition			d	Loan	or exchange	program	ıs			
b	Scholarly research			е 🗌	Other						
С	Preservation for future generat	ions									
4	Provide a description of the organizate Part XIII.	tion's c	collections and	explain h	ow they	further the o	organizat	ion's exempt pur	pose i	า	
5	During the year, did the organization assets to be sold to raise funds rathe								□ v	es 🗀	No
Pari									<u>'''</u>		<u> </u>
Fall	Complete if the organization 990, Part X, line 21			Form 99	0, Par	t IV, line 9, d	or repor	ted an amount	on Fo	rm N	N/A
1a	Is the organization an agent, trustee,	custoc	dian or other in	ntermediar	y for co	ntributions or	r other a	ssets not			
	included on Form 990, Part X?				· 				Y6	∍s 🔙	No
b	If "Yes," explain the arrangement in F										•
								Ar	nount		
С	Beginning balance						1c				
d	Additions during the year .						1d	ļ			
е	ũ ,						1e				
f	Ending balance	•					1f	<u> </u>			
2a	Did the organization include an amou	int on f	Form 990, Pan	t X, line 21	, for es	crow or custo	odial acc	ount liability?	Y6	es 🔙	No
b	If "Yes," explain the arrangement in P	art XII	I. Check here	if the expla	anation	has been pro	ovided in	Part XIII	 		1
Part			- .	<u>`</u>				·			<u> </u>
1 (41)	Complete if the organization	answ	ered "Yes" to	Form 90	n Par	t IV line 10				N	I/A
	Complete if the organization		Current year	(b) Prior y	_	(c) Two years		d) Three years back	(e) Fo	ur years	s back
1a	Beginning of year balance	(-)		(2)		(0) 1012 70010	- · ·		(0).0	,	
b	Contributions	<u> </u>		·					-		
c	Net investment earnings, gains,						··				
	and losses										
d	Grants or scholarships					_					
e	Other expenditures for facilities										
•	and programs										
f	Administrative expenses							**-			
g g	End of year balance .										
າ	Provide the estimated percentage of t	he cur	rent vear end	balance (l	ne 1a	column (a)) h	neld as				
a	Board designated or quasi-endowmer		▶	%	ine ig,	00.0 (4)/ .	1014 45				
b	Permanent endowment	•••	%								
c	Temporarily restricted endowment	>	%								
•	The percentages in lines 2a, 2b, and	2c sho		%							
3a	Are there endowment funds not in the				n that a	re held and a	administe	ered for the			
	organization by.			J					ſ	Yes	No
	(i) unrelated organizations							[3a(i)		
	(ii) related organizations								3a(ii)	\neg	
b	If "Yes" to 3a(ii), are the related organ				Schedul	e R?			3b		
4	Describe in Part XIII the intended use			•							
Part							·				
	Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10										
	Description of property		(a) Cost or othe			st or other		ccumulated		ok valu	
			(investmen			s (other)		preciation	, , = •		
1a	Land										
þ	Buildings										
C	Leasehold improvements	. [
d	Equipment	. [12,018		9,745			2,273
e	Other	_ <u>. </u>									
Total	. Add lines 1a through 1e. (Column (d)	must	equal Form 99	90, Part X.	column	(B), line 10d	z.) .	>			2,273

Part VIĬ	Investments—Other Securiti		33-1307037 Page
•	Complete if the organization ar	swered "Yes" to Form 99	0, Part IV, line 11b See Form 990, Part X, line 12.
(a) E	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial d	lerivatives		
(2) Closely-he	ld equity interests		
(3) Other	•		
(A)			
(Ç)	• • • • • • • • • • • • • • • • • • • •		
(D)			
/F\			
(G) (H)			
Total (Column (b) m	ust equal Form 990, Part X, col (B) line 12)		
Part VIII	Investments—Program Relat	ed. N/A	
	Complete if the organization ar	swered "Yes" to Form 990	0, Part IV, line 11c See Form 990, Part X, line 13
	(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)		·	
(3)			
(4)	····		<u> </u>
(5)			
(6)	 		
(7)			
(8)			
(9)			
	ust equal Form 990, Part X, col (B) line 13)		
Part IX	Other Assets.	N/A), Part IV, line 11d. See Form 990, Part X, line 15
-		a) Description	(b) Book value
(1)		ay Description	(b) Book value
(2)			
(3)			
(4)	-		100
(5)			
(6)			
(7)			
(8)	-		
(9)			
	n (b) must equal Form 990, Part X, o	col (B) line 15.)	<u> </u>
Part X	Other Liabilities. Complete if the organization an	N/A swered "Yes" to Form 990), Part IV, line 11e or 11f See Form 990, Part X,
	line 25		
1.	(a) Description of liability	(b) Book value	
(1) Federal in	come taxes		
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(8)			
(9)	st equal Form 990 Part X col (B) line 251		
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	O	accompation of the state of the
ergonizations lis	ability for uncertain to a positions and the	IN AR ARCO 740). Objects to the	organization's financial statements that reports the
organization's lia	ability for uncertain tax positions under t	TIN 40 (ASC 740) Check here i	f the text of the footnote has been provided in Part XIII

Pai	Reconciliation of Revenue per Audited Financial Statemen	ts Wi	ith Rever	ue per	Retur	m. NVA
	Complete if the organization answered "Yes" to Form 990, Part			ре.		n. 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 (losses) on investments	2a	<u> </u>			
b	Donated services and use of facilities	2b] '	
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d				2e	
3	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.)	4b	<u> </u>] [
С	Add lines 4a and 4b				4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)				5	,, e,
Par	Reconciliation of Expenses per Audited Financial Statemen			nses p	er Ret	urn. N/A
	Complete if the organization answered "Yes" to Form 990, Part					·
1	Total expenses and losses per audited financial statements				1_1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_	ì			
a	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
C	Other losses	2c				
d	Other (Describe in Part XIII)	2d				
e	Add lines 2a through 2d		•	•	2e	
3	Subtract line 2e from line 1	٠	 I	•	3	····
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	4-				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII)	4b			40	
b c	Other (Describe in Part XIII)	4b			4c	
b c 5	Other (Describe in Part XIII) Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	4b			4c 5	
b c 5 Par	Other (Describe in Part XIII) Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information.	4b)			5	line 4: Part V. line
b c 5 Par Prov	Other (Describe in Part XIII) Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,	4b)	V, lines 1b	and 2b;	5 Part V	
b c 5 Par Prov	Other (Describe in Part XIII) Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information.	4b)	V, lines 1b	and 2b;	5 Part V	
b c 5 Par Prov	Other (Describe in Part XIII) Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to present the supplemental the supplemental to present the supplemental to present the supplemental to present the supplemental to present the supplemental the supplemental to supplemental the supplemental the supplemental the supplemental to supplemental the supplemental the suppleme	4b)	V, lines 1b	and 2b;	5 Part V	
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b c 5 Par Prov	Other (Describe in Part XIII) Add lines 4a and 4b. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18 XIII Supplemental Information. de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to present the supplemental the supplemental to present the supplemental to present the supplemental to present the supplemental to present the supplemental the supplemental to supplemental the supplemental the supplemental the supplemental to supplemental the supplemental the suppleme	4b)	V, lines 1b	and 2b;	5 Part V	
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Schedule D (Form 990) 2014 FOND DU LAC FESTIVALS, INC.	<u>39-1</u> 387857	Page 5
Part XIII Supplemental Information (continued)		
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N/A	•	
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2014

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www irs.gov/form990.

Name of the organization

Employer identification number

FOND DU LAC FESTIVALS, INC 39-1387857 PART I, LINE 1 - DIRECT, PROMOTE, AND SUPPORT FESTIVALS AND SPECIAL EVENTS THAT SHOWCASE THE FOND DU LAC COMMUNITY WITH A GREAT DEAL OF HELP AND SUPPORT FROM THE COMMUNITY, WALLEYE WEEKEND, LIGHT UP THE CITY, AND SOCIETY INSURANCE TASTE OF FOND DU LAC EVENTS TAKE PLACE. THESE EVENTS BENEFIT MORE THAN 100 LOCAL NON-PROFITS 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.