990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047 2020

Open to Public Inspection

Department of the Treasury

Do not enter social security numbers on this form, as it may be made public. Go to www.irs.gov/Form990EZ for instructions and the latest information.

Internal Revenue Service For the 2020 calendar year, or tax year beginning 01/01/21, and ending 06/30/21Check if applicable C Name of organization D Employer identification number Address change FAIRHOPE ARTS & CRAFTS FESTIVAL 81-2732497 Name change FOUNDATION Initial return Number and street (or P O box, if mail is not delivered to street address) E Telephone number PO BOX 2343 Final return/terminated 251-937-5561 City or town, state or province, country, and ZIP or foreign postal code Amended return **Group Exemption** Application pending **FAIRHOPE** Number > X Cash Check ► X if the organization is not Accounting Method Accrual Other (specify) ▶ N/A required to attach Schedule B Website: Tax-exempt status (check only one) — X 501(c)(3) 501(c)() (insert no) 4947(a)(1) or 527 (Form 990, 990-EZ, or 990-PF) κ Form of organization X Corporation Trust Association Other Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ 77,794 Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) \mathbf{X} Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 77,328 2 2 Program service revenue including government fees and contracts 3 Membership dues and assessments 3 466 4 4 Investment income 5a Gross amount from sale of assets other than inventory 5a b Less cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (subtract line 5b from line 5a) 5c C 6 Gaming and fundraising events. Gross income from gaming (attach Schedule G if greater than \$15,000) 6a Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b Less direct expenses from gaming and fundraising events Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d 7a Gross sales of inventory, less returns and allowances 7a 7b Less. cost of goods sold SCANNED AUT 23 2022 Gross profit or (loss) from sales of inventory (subtract line 7b from line 7a) 7c Other revenue (describe in Schedule O) 77,794 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 Grants and similar amounts paid (list in Schedule O) 10 11 11 Benefits paid to or for members 12 12 Salaries, other compensation, and employee benefits 4,830 13 Professional fees and other payments to independent contractors 13 14 Occupancy, rent, utilities, and maintenance 14 4,876 15 15 Printing, publications, postage, and shipping 42,338 16 Other expenses (describe in Schedule O) 16 52,044 Total expenses. Add lines 10 through 16 17 25,750 18 18 Excess or (deficit) for the year (subtract line 17 from line 9) Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 94,368 end-of-year figure reported on prior year's return) 19

For Paperwork Reduction Act Notice, see the separate instructions.

Other changes in net assets or fund balances (explain in Schedule O)

Net assets or fund balances at end of year Combine lines 18 through 20

Form 990-EZ (2020)

120,118

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Form 990-EZ (2020)

Page 3

%P	If V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V.			
	mistractions for Fart V.) Check if the digamization used schedule S to respond to any quosium who Fart V		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a	ĺ		
	detailed description of each activity in Schedule O	33		X
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed			
	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			l
	change on Schedule O See instructions	34	ļ	X
35a				
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	 	├
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice,			.
	reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
	during the year? If "Yes," complete applicable parts of Schedule N	36	ļ	X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions	- <u>-</u> ¹	· /	x
b	Did the organization file Form 1120-POL for this year?	37b		<u> </u>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee, or were		1	x
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved			
39	Section 501(c)(7) organizations Enter		,	1 :
a	Initiation fees and capital contributions included on line 9 Gross receipts, included on line 9, for public use of club facilities 39a 39b	-		
b	Gross receipts, included on line 9, for public use of club facilities Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under	-		1
40a	section 4911 ▶ , section 4912 ▶ , section 4955 ▶		7.5	ľ
h	Section 4917 , section 4912 , section 4912 , section 4930 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
b	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year			"
	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40Ь		x
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	100	*	777
·	on organization managers or disqualified persons during the year under sections 4912,		1.00	1
	4955, and 4958		27 7	1
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line	1 /3	1	
_	40c reimbursed by the organization			
е	All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter			1. 11
	transaction? If "Yes," complete Form 8886-T	40e		X
41	List the states with which a copy of this return is filed NONE	`		
42a	The organization's books are in care of ▶ LEE TEUMER Telephone no ▶ 25	1-93	7 - 5	561
	55 ECHO LANE			
•	Located at ▶ FAIRHOPE AL ZIP + 4 ▶ 36	532		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		X
	If "Yes," enter the name of the foreign country ▶	1.		1/3
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and		[ľ
	Financial Accounts (FBAR)	420		x
С	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		
40	If "Yes," enter the name of the foreign country ▶			▶ □
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year			
	and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
440	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			1.0
44a	completed instead of Form 990-EZ	44a		X
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be	7	,	
U	completed instead of Form 990-EZ	44b		x
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an		7	,
•	explanation in Schedule O	44d		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		Х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the		;	
-	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ See instructions	45b		X

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													r		Yes	No
16		_	zation engage, direct	-			-	s on bel	half of or in oppo	sition			1			4
			for public office? If "Y				art I		 		-			46		<u> </u>
ŗа	rt VI	All s	ction 501(c)(3) O section 501(c)(3) o and 51.	r ganizati rganization	ons On s must a	ni y answer	questions 47	7 –4 9b a	ind 52, and coi	mplete th	e tables	s for I	nes			
			eck if the organizati	on used S	chedule	O to re	spond to any	questi	on in this Part	VI						
17								ſ	47	Yes	No X					
10	year? If "Yes," complete Schedule C, Part II						ŀ	48		X						
18 19a	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization make any transfers to an exempt non-charitable related organization?						ŀ	49a		X						
b	If "Yes," was the related organization a section 527 organization?						Ī	49b								
50	The rest was the foliated organization a section 22. Organization															
			ho each received mor													
		(a)	Name and title of each	employee			(b) Average ours per week voted to position	c	Reportable ompensation W-2/1099-MISC)	contribution	alth bene ons to em t plans, a compens	ployee ind			d amou pensat	
NC	NE															_
		_	<u>.</u>			-	-	-			•					
												•				
									-							
	Tota	l number	of other employees p	aid over \$10	0.000		· · · 									
51	Com	plete this	table for the organiza	ation's five h	ghest co	mpensa	ted independe	nt contra	actors who each	received r	— nore tha	ın				
	\$100		ompensation from the													
		(a) Na	ame and business addre	ss of each inc	dependent	t contract	or 		(b) Typ	e of service	•		(c) C	omper	sation	
МО	NE															
				·						·						
							-									
				•												
d	Tota	l number	of other independent	contractors	each rece	eiving ov	/er \$100,000	•	·							
52	Did t	the organi	zation complete Sche	edule A? No	te: All se	ection 50	1(c)(3) organız	ations m	nust attach a							
		pleted Sci											X			No
Jnder rue, d	r pena	ities of perj t, and comp	ury, I declare that I have plete Declaration of pre	e examined th parer (other th	is return, i nan officer	including r) is based	accompanying s d on all informati	chedules on of whi	and statements, a ch preparer has ar	ind to the b ny knowledg	est of my je	knowle	dge and	d belie	f, it is	
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	arer		EL BLACKMON DE AVIZO	GROUI	D. TN	IJ. EAI	RL BLACKMON			101,	Firm's E				317	
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				IOPE, A			-1469				Phone	no 2	51-9			
May	the If	RS discus	s this return with the j	preparer sho	wn abov	/e? See ı	nstructions							X Ye		(2020)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

FAIRHOPE ARTS & CRAFTS FESTIVAL

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

OMB No 1545-0047

Open to Public Inspection

FOUNDATION 81-2732497 Reason for Public Charity Status. (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 12, check only one box)

1		A church, co	nvention of churches, or ass	sociation of churches described	ın sectio	n 170(b)(1)(A)(i).	$\wedge \alpha$	
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))						O	
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4	П	A medical re	nedical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,						
		city, and stat	te:						
5	\Box	=		of a college or university owned	or operat	ed by a c	overnmental unit described in		
		•	(b)(1)(A)(iv). (Complete Part	•	•	, ,			
6				overnmental unit described in s	section 1	70(Ь)(1)(А	N(v).		
7	Ħ			substantial part of its support fr				3	
•			section 170(b)(1)(A)(vi). (C		on, a gov		. a.m. a. mam and gamarar pasin		
8		A community	trust described in section	1 70(b)(1)(A)(vi) . (Complete Par	t II)				
9	\bigcup	An agricultur	al research organization des	scribed in section 170(b)(1)(A)((ix) operat	ed in con	junction with a land-grant colle	ge	
		or university university	or a non-land-grant college	of agriculture (see instructions)	Enter the	name, c	ity, and state of the college or		
10	X	•	ion that normally receives: (1) more than 33 1/3% of its sup	port from	contributi	ons, membership fees, and gro	oss	
				npt functions, subject to certain					
		• •	•	nd unrelated business taxable ii	•		•		
11	Γ		•	0, 1975. See section 509(a)(2)			•		
12	片	•	•	exclusively to test for public saf exclusively for the benefit of, to	-			000	
12	U	•	-	exclusively for the benefit of, to zations described in section 50					
				nat describes the type of suppo				•	
	а			erated, supervised, or controlled					
				ver to regularly appoint or elect	-			• •	
		supportin	ig organization You must c	omplete Part IV, Sections A a	nd B.				
	b	Type II.	A supporting organization su	pervised or controlled in conne	ction with	its suppo	rted organization(s), by having		
				ting organization vested in the	same pers	sons that	control or manage the support	ed	
			• •	Part IV, Sections A and C.					
	С			supporting organization operated tructions) You must complete				ith,	
	d			I. A supporting organization ope				n(s)	
		that is no	t functionally integrated. The	e organization generally must sa	atisfy a dis	stribution	requirement and an attentivene	ess	
		requirem	ent (see instructions) You r	nust complete Part IV, Sectio	ns A and	D, and P	art V.		
	e			eived a written determination fr			s a Type I, Type II, Type III		
				n-functionally integrated suppor	ting organ	ization			
			nber of supported organizati					L	
	9_	 	ollowing information about th				<u> </u>		
(1)		e of supported janization	(ii) EIN	(III) Type of organization (described on lines 1–10	1 ' '	organization or governing	(v) Amount of monetary support (see	(vi) Amount of other support (see	
	org	31112211011		above (see instructions))		ment?	instructions)	instructions)	
					Yes	No			
(A)									
B)					1				
<u></u>					 				
C)			, , , , , , , , , , , , , , , , , , ,			<u></u>			
D)									
					 				
E)		ļ							
otal			, ,	, ,		,			
	ner	work Reduction	n Act Notice see the Instruct	ons for Form 990 or 990-F7	.L	h	Schedule A	(Form 990 or 990-FZ) 2020	

10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported

organization	
Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this	box and see
instructions	▶ [
	Schedule A (Form 990 or 990-EZ) 2020

organization

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	quality under th	e tests listed b	elow, picase ci	ompiete i art iii	·/	
$\overline{}$	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees	(4) 2010	(3) 23 ()	(0) 20 10	(4) 2010		(i) Total
•	received (Do not include any "unusual grants")	340	420	30,000	21,950		52,710
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	16,731	152 <u>,</u> 984	169,445	101,200	79,873	520,233
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		_				
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	17,071	153,404	199,445	123,150	79,873	572,943
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from		1 13 16				
	line 6)	L.ć			<u> </u>		572,943
	ction B. Total Support Indar year (or fiscal year beginning in)		#1.0047	(1) 0040	(1) 0040	() 0000	
		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	17,071	153,404	199,445	123,150	79,873	572,943
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources					466	466
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b					466	466
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)			_			
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	17,071	153,404	199,445	123,150	80,339	573,409
14	First 5 years. If the Form 990 is for the or	ganızatıon's first, se	cond, third, fourth	, or fifth tax year a	s a section 501(c)	(3)	
	organization, check this box and stop here						
Sec	tion C. Computation of Public Su			<u>. </u>			
15	Public support percentage for 2020 (line 8	• •	-	n (f))		15	99.92%
16	Public support percentage from 2019 Scho					16	100.00%
	tion D. Computation of Investme					T 1	
17	Investment income percentage for 2020 (li			column (f)) '		17	<u>%</u>
	Investment income percentage from 2019 S			44		<u>18 </u>	%
	33 1/3% support tests—2020. If the organization is not more than 33 1/3%, check this bound is a support test.	ox and stop here. T	he organization qu	alifies as a public	ly supported organ	ization	► (X
b	33 1/3% support tests—2019. If the organ						
20	line 18 is not more than 33 1/3%, check the Private foundation . If the organization did		=			=	P -

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use
- Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?

 If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
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9a 9b 9c	70	- 12 - 12 - 12 - 12
9a 9b	<i>2</i> 0	- 15 - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10
9a 9b 9c	<i>7</i> 44	

Enter greater of line 2 or line 3
Income tax imposed in prior year

(see instructions)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990 or 990-EZ) 2020

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization

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Schedule A (Form 990 or 990-EZ) 2020

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Par	Y Type III Non-Functionally Integrated 509(a)(3) S	Supporting Organiza	tions (continued)	
Sect	ion D - Distributions			Current Year
1				
2				
	<u> </u>			
3	Administrative expenses paid to accomplish exempt purposes of support	orted organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required—provide deta	ails in Part VI)		
6	Other distributions (describe in Part VI) See instructions			
	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organizations	tion is responsive	•	
	(provide details in Part VI) See instructions		<u></u> -	
9	Distributable amount for 2020 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6	, 		
2	Underdistributions, if any, for years prior to 2020			1 1 1 1 1 1 1
	(reasonable cause required-explain in Part VI) See			1.33
	instructions Excess distributions carryover, if any, to 2020	. 77 .	7 5 67 8 7 7	1 2/3
	From 2015		······································	
	From 2016	77 77	1 1 1 1 1 1 1 1 1 1	7,7
	From 2017			,
	From 2018	7 7 7 m	<u> </u>	/ / / / /
	From 2019	2 2 2 2 2 2	, , , , , ,	
	Total of lines 3a through 3e	1 1 1 1 1 1 1		
	Applied to underdistributions of prior years	8 7 7 3 7 7		
	Applied to 2020 distributable amount		" / ₁	
	Carryover from 2015 not applied (see instructions)		······································	
	Remainder Subtract lines 3g, 3h, and 3i from line 3f		777	1 11 11 11 11 11 11
4	Distributions for 2020 from			
•	Section D, line 7 \$	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	,	7 7 3 3 4 7 7
a	Applied to underdistributions of prior years		,	4, , , ,
	Applied to 2020 distributable amount	2 2 2 2 2	, ,	
	Remainder Subtract lines 4a and 4b from line 4		, , , , ,	, , , , , , , , , , , , , , , , , , ,
5	Remaining underdistributions for years prior to 2020, if	5 57		
	any Subtract lines 3g and 4a from line 2 For result			11 11 11 11 11 11
	greater than zero, explain in Part VI See instructions	· · · · · · · · · · · · · · · · · · ·		11 321
6	Remaining underdistributions for 2020 Subtract lines 3h	3	÷ .	
	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions.		13.7	
7	Excess distributions carryover to 2021. Add lines 3j		77.77	13,71
	and 4c			7 / / / / /
8	Breakdown of line 7.		, , ,	<i>\$</i> // /
а	Excess from 2016	/ / ······ // //	····· /	~
	Excess from 2017	, m m		(/ _{XX}
	Excess from 2018		www www. www. s	
	Excess from 2019	A COST THE WAY	7.86 ** (1000 B.WW) 11.7 =	
	Excess from 2020	2/	·	*****

Schedule A (Form 990 or 990-EZ) 2020

FAIRHOPE ARTS & CRAFTS FESTIVAL

81-2732497

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A (Form 990 or 990-EZ) 2020

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.

► Go to www.irs.gov/Form990 for the latest information.

ARTS & CRAFTS FESTIVAL

OMB No 1545-0047

2020

Open to Public / Inspection

Name of the organization

STORAGE UNIT

STUDENT ART

UNVEILING-ART

Department of the Treasury

FAIRHOPE ARTS & CRAFTS FESTIVAL FOUNDATION

FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES

Employer identification number 81 - 2732497

AMOUNT DESCRIPTION **EXPENSES** ADVERTISING & MARKETING 4,575 7,200 SUPPLIES ARTISTS DINNER 240 CHAMBER FEES \$ 150 11,350 **AWARDS** \$ \$ 1,656 JUDGES EQUIPMENT RENTAL 2,100 ICE 1,899 3,960 SECURITY TAXES & LICENSES 1,093 **MISCELLANEOUS** Ś 2,791 WRAP PARTY \$ 2,536

FORM 990-EZ, PART III - PRIMARY EXEMPT PURPOSE

THE PURPOSE OF THE ORGANIZATION IS TO ENGAGE IN CHARITABLE AND EDUCATIONAL

ACTIVITIES IN FAIRHOPE, AL.

\$

\$

TOTAL \$

738

250

1,800

42,338