

**Short Form
Return of Organization Exempt From Income Tax**

2008

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.
▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury
Internal Revenue Service

A For the 2008 calendar year, or tax year beginning Oct 1, 2008, and ending Sep 30, 2009

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization
Cleveland Lesbian Gay Bi Trans Pride
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
PO Box 91031
 City or town, state or country, and ZIP + 4
Cleveland OH 44101-3031

D Employer identification number
34-1723892

E Telephone number
(216) 856-2677

F Group Exemption Number ▶

G Accounting method Cash Accrual
 Other (specify) ▶

H Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ www.clevelandpride.org

J Organization type (check only one) — 501(c) (3) (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally **not** more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 112,073.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)			
1	Contributions, gifts, grants, and similar amounts received	1	64,378.
2	Program service revenue including government fees and contracts	2	15,448.
3	Membership dues and assessments	3	416.
4	Investment income	4	
5a	Gross amount from sale of assets other than inventory	5a	
5b	Less cost or other basis and sales expenses	5b	
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (att sch)	5c	
6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
6a	Gross revenue (not including \$ <u>0.</u> of contributions reported on line 1)	6a	29,544.
6b	Less direct expenses other than fundraising expenses	6b	15,879.
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	13,665.
7a	Gross sales of inventory, less returns and allowances	7a	
7b	Less cost of goods sold	7b	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ▶ <u>See Other Revenue Statement</u>)	8	2,287.
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	96,194.
10	Grants and similar amounts paid (attach schedule)	10	
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	
13	Professional fees and other payments to independent contractors	13	38,216.
14	Occupancy, rent, utilities, and maintenance	14	48,949.
15	Printing, publications, postage, and shipping	15	16,712.
16	Other expenses (describe ▶ <u>See Other Expenses Statement</u>)	16	13,814.
17	Total expenses (add lines 10 through 16)	17	117,691.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-21,497.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	29,361.
20	Other changes in net assets or fund balances (attach explanation)	20	0.
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	7,864.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	34,652.	6,837.
23 Land and buildings	0.	0.
24 Other assets (describe ▶ <u>See L-24 Stmt</u>)	0.	3,527.
25 Total assets	34,652.	10,364.
26 Total liabilities (describe ▶ <u>See L-26 Stmt</u>)	5,291.	2,500.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	29,361.	7,864.

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Part V Other Information (Note the statement requirement in General Instruction V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T		
35a	a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
35b	b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0.		
37b	b Did the organization file Form 1120-POL for this year?		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
38b	b If 'Yes,' complete Schedule L, Part II and enter the total amount involved		
39	501(c)(7) organizations Enter		
39a	a Initiation fees and capital contributions included on line 9		
39b	b Gross receipts, included on line 9, for public use of club facilities		
40a	501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0., section 4912 ▶ 0., section 4955 ▶ 0.		
40b	b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I		X
40c	c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
40d	d Enter amount of tax on line 40c reimbursed by the organization		
40e	e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T		X
41	List the states with which a copy of this return is filed ▶ <u>Ohio</u>		

42a The books are in care of ▶ Cleveland Pride Telephone no ▶ (216) 226-0004
 Located at ▶ 11100 Detroit Avenue Av , Cleveland OH ZIP + 4 ▶ 44102

		Yes	No
42b	b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country ▶ _____		X
See the instructions for exceptions and filing requirements for Form TDF 90-22.1, Report of a Foreign Bank and Financial Accounts			
42c	c At any time during the calendar year, did the organization maintain an office outside of the U S ? If 'Yes,' enter the name of the foreign country ▶ _____		X

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ | **43** | _____

		Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

46 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

	Yes	No
46		X
47		X
48		X
49a		X
49b		X

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

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

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

b If 'Yes,' was the related organization(s) a section 527 organization?

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

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$100,000 ▶				

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		
Total number of other independent contractors receiving over \$100,000 ▶		

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

Sign Here

Signature of officer: *Charles M. Mesrobian* Date: *5/15/10*
 Type or print name and title: **CHARLES M. MESROBIAN TREASURER**

Paid Preparer's Use Only

Preparer's signature: *M. H. Flickinger* Date: **05/16/10**
 Firm's name (or yours if self-employed), address, and ZIP + 4: **M.H. FLICKINGER, CPA**
3037 Circle Ct
Cleveland OH 44113-3001
 Check if self-employed: Preparer's Identifying Number (See instructions): **- NO Fee**
 Phone no: **(216) 696-7343**

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

Yes No

BAA

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2008

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

Cleveland Lesbian Gay Bi Trans Pride

Employer identification number

34-1723892

Part I Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is (Please check only **one** organization)

- 1 A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 9 An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I
 - b Type II
 - c Type III – Functionally integrated
 - d Type III– Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

h Provide the following information about the organizations the organization supports

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
Total									

BAA For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.

Schedule A (Form 990 or 990-EZ) 2008

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4 Total. Add lines 1-3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	%
16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
b 10%-facts-and-circumstances test – 2007. 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

BAA

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

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)	32,833.	58,009.	60,309.	66,852.	65,741.	283,744.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	-1,822.	17,115.	23,142.	24,728.	21,128.	84,291.
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	0.	0.	0.	0.	0.	0.
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0.	0.	0.			0.
6 Total. Add lines 1-5	31,011.	75,124.	83,451.	91,580.	86,869.	368,035.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.					0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b	0.					0.
8 Public support. (Subtract line 7c from line 6.)						368,035.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	31,011.	75,124.	83,451.	91,580.	86,869.	368,035.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0.	0.	0.	0.		0.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	0.	0.	0.	0.		0.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0.	0.	0.	0.		0.
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)			0.	20,447.		20,447.
13 Total support. (add lns 9, 10c, 11, and 12)						388,482.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	94.74%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	80.40%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	0.00%

19a 33-1/3 support tests – 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

Other Income Part III, Line 12

Description: program income

2006: 20447.

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

REVENUE	(a) Event #1 <u>Pride Beer/Pop/</u> (event type)	(b) Event #2 _____ (event type)	(c) Other Events _____ (total number)	(d) Total Events (Add col (a) through col (c))
	1	Gross receipts	27,586.	
2	Less Charitable contributions			
3	Gross revenue (line 1 minus line 2)	27,586.		27,586.
DIRECT EXPENSES	4	Cash prizes		
	5	Non-cash prizes		
	6	Rent/facility costs		
	7	Other direct expenses	15,879.	
	8	Direct expense summary Add lines 4- through 7 in column (d)		
9	Net income summary Combine lines 3 and 8 in column (d)			11,707.

Part III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

REVENUE	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col. (c))
	1	<i>None</i>	<i>N/A</i>	
DIRECT EXPENSES	2	Cash prizes	<i>N/A</i>	
	3	Non-cash prizes		
	4	Rent/facility costs		
	5	Other direct expenses		
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)			
8	Net gaming income summary Combine lines 1 and 7 in column (d)			

	YES	NO
9 Enter the state(s) in which the organization operates gaming activities _____		
a Is the organization licensed to operate gaming activities in each of these states?	9a	
b If 'No,' Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b If 'Yes,' Explain _____		
11 Does the organization operate gaming activities with nonmembers?	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

		YES	NO
13 Indicate the percentage of gaming activity operated in a The organization's facility	13a	%	
b An outside facility	13b	%	
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records. Name ▶ <u>NONE</u> Address ▶ <u>N/A</u>			
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue? b If 'Yes,' enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____ c If 'Yes,' enter name and address Name ▶ _____ Address ▶ _____	15a		
16 Gaming manager information Name ▶ _____ Gaming manager compensation ▶ \$ _____ Description of services provided ▶ _____ <input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor			
17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____	17a		

Name as Shown on Return Cleveland Lesbian Gay Bi Trans Pride	Employer Identification No. 34-1723892
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	Beginning of Year	End of Year
Line 24 - Other Assets:		
Accounts Receivables		723.
Petty Cash		297.
Deposits		2,507.
Totals to Form 990-EZ, Part II, line 24		3,527.
Line 26 - Total Liabilities:		
Accounts Payable	5,291.	5,275.
Deferred Revenue	0.	-2,775.
Opening Balance		
Net Loss		
Totals to Form 990-EZ, Part II, line 26	5,291.	2,500.

Form 990-EZ, Part I, Line 8

Other Revenue Statement

Other revenue (describe)

<u>Mens Discussion Group</u>	<u>731.</u>
<u>Colors of Pride Revenue</u>	<u>810.</u>
<u>Pride</u>	<u>746.</u>

Total	<u><u>2,287.</u></u>
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Form 990-EZ, Part I, Line 16

Other Expenses Statement

Other expenses (describe)

<u>Travel & Meetings</u>	<u>11,076.</u>
<u>Accounting Fees</u>	<u>696.</u>
<u>Bank Fees</u>	<u>259.</u>
<u>Volunteer Expenses</u>	<u>1,783.</u>

Total	<u><u>13,814.</u></u>
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Supporting Statement of:

Form 990-EZ/Line 1

Description	Amount
Corporate Contributions	36,025.
Indiv Business Contributions-	1,707.
Board Members	250.
Direct Public Support	387.
Gate Donations	26,009.
Total	<u>64,378.</u>

Supporting Statement of:

Form 990-EZ/Line 2

Description	Amount
Program Income	
Other	20.
Festival Gates	0.
Festival Other	1,475.
Festival Vendors	13,953.
Total	<u>15,448.</u>

Supporting Statement of:

Form 990-EZ/Line 6a

Description	Amount
Fundraiser Entertainment	3,394.
Festival Beer	21,370.
Festival Beverage	4,046.
Festival T shirts	547.
Festival Tips	187.
Festival Vendors	0.
Total	<u>29,544.</u>

Supporting Statement of:

Form 990-EZ/Line 6b

Description	Amount
Festival Beer	3,783.
Festival Soda & Pop	4,716.
Festival T shirts	7,380.

Continued

Supporting Statement of:

Form 990-EZ/Line 6b

Description	Amount
Total	<u>15,879.</u>

Supporting Statement of:

Form 990-EZ/Line 8, amount-3

Description	Amount
Pride	245.
Pride	501.
Total	<u>746.</u>

Supporting Statement of:

Form 990-EZ/Line 13

Description	Amount
Festival Entertainment Contractors	36,445.
Outside Contractors	1,248.
Fundraising Exp	523.
Total	<u>38,216.</u>

Supporting Statement of:

Form 990-EZ/Line 15

Description	Amount
Office Supplies	7,016.
Operations	371.
Computer	2,094.
Advertisements	4,625.
Business Registration Fees	653.
Business Expenses	1,953.
Total	<u>16,712.</u>

Supporting Statement of:

Form 990-EZ/Line 16, Amount-2

Description	Amount
Accountant	259.
Ask My Accountant	437.
Total	<u>696.</u>

Supporting Statement of:

Form 990-EZ/Line 22, Column (B)

Description	Amount
Charter One	6,027.
Charter One - Colors	810.
Total	<u>6,837.</u>

Supporting Statement of:

Form 990-EZ/Line 28, Expenses

Description	Amount
City Permits	1,685.
Festival Parking Lot	1,858.
Liquor Permits	40.
Festival Supplies	6,560.
Tents	5,639.
Decorations	277.
Signage	2,685.
Other	614.
Entertainment & Media	36,345.
Total	<u>55,703.</u>

Supporting Statement of:

Form 990-EZ/Line 29

Description	Amount
City Permit	1,700.
Parade Supplies	183.
Total	<u>1,883.</u>

Supporting Statement of:

Form 990-EZ/Line 30

Description	Amount
Marketing	4,625.
Meetings	2,985.
Contract Fees	1,607.
Awards & Grants	2,561.
Pride Office	11,308.
Telephone	9,171.
Computers	2,093.
Total	<u>34,350.</u>

Supporting Statement of:

Sch. G, page 2/Event 1 Gross Receipts

Description	Amount
Entertainment	1,435.
Beer	21,370.
Beverage	4,046.
T-Shirts	548.
Tips	187.
Total	<u>27,586.</u>

Supporting Statement of:

Sch. G, page 2/Event 1 Other Direct Exp.

Description	Amount
Beer	3,783.
Soda & Pop	4,716.
T Shirts	7,380.
Total	<u>15,879.</u>