' Form 990-ÉZ

Short Form

Return of Organization Exempt From Income Tax

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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see Instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$300,000 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.

2012 Open to Public lospection

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

ΑI	For the 2	2012 calenda	r year, or tax year beginning		02-01	, 2012, and	d ending		01-31 , 2 0	13
В	Check if ap	plicable:	C Name of organization					D Employ	er identificat	ion number
	Address ch	ange	SPACE COAST ART FES	TIVAL, INC.				59-	1562006	
	lame chan	nge	Number and street (or P.O. box, if mail to	not delivered to street ac	idress)		Room/suite	E Telepho	one number	
	ni tial ret um	1								
	Terminated	ı	P. O. BOX 320135							
	Amended n	etum	City or town, state or country, and ZIP +	4				F Group I	Exemption	
	Application	pending	COCOA BEACH, FL 329	31				Number	-	
		ting Method:	Cash	(specify) ▶				H Check▶	X if the orga	nization is not
ı	Websit	e: >	-				_	_	attach Schedu	
J	Гах-ехе	mpt status (c	theck only one) - 🔣 501(c) (3)	501(c)() ◀ (in	nsert no.)	4947(a)(1) o	r 527	(Form 990,	990-EZ, or 99	0-PF).
			ganization is not a section 509(a		anization or			n and its gross	receipts are r	normally
			0. A Form 990-EZ or Form 990 r				-	_	=	
1	he orgai	nization choos	ses to file a return, be sure to file	a complete return.	•	•			•	•
L	Add lines	s 5b, 6c, and 7	7b, to line 9 to determine gross r	eceipts. If gross rec	eipts are \$2	200,000 or n	nore, or if to	al assets (Part	II,	
			low) are \$500,000 or more, file F		-	-	-		· -	0
0.000		-	e, Expenses, and Chan							
			e organization used Schedule C	_			-		-	🗆
	1		s, gifts, grants, and similar amou				_		1	
	2		vice revenue including governm		ets				2	
	3								3	
	4	Investment in	ncome						4	
	5a	Gross amour	nt from sale of assets other than	inventory		5a				
	Ь		other basis and sales expenses	-						
	1) from sale of assets other than		line 5b from				5c	
	6		fundraising events	, (000000						
	a		e from gaming (attach Schedule	G if onester than						
2	-	•		•		6a	. 1			
Revenue	Ь		e from fundralsing events (not in				of contribu	tions		
8	1		sing events reported on line 1) (a		the					
	l		gross income and contributions			64:	. 1			
	c		expenses from gaming and fund	_		6.				
	1		or (loss) from garning and fundra	_	nes Ra and		_			
				-					6d	
	78	•	of inventory, less returns and all			7.	. i		-	
		Less: cost of			• • • • • •		_			
			or (loss) from sales of inventory			· · · · <u>· · · · · · · · · · · · · · · </u>	<u>, </u>		7c	
	g			(Subtractilie 10 iic	•				8	
:.	9		ue. Add lines 1, 2, 3, 4, 5c, 6d, 7						9	
$\overline{}$	10		similar amounts paid (list in Sche				\/\'\'\\\		10	
•	11		• •			1. 401			11	
•	12	•	er compensation, and employee					32	12	
Experies	13	=	fees and other payments to indi	Spendent contractor	s 🙀 .		. 0.200	· [?]	13	
藁:	14		rent, utilities, and maintenance	spendent contractor				****	14	
ă	15		lications, postage, and shipping			6868°°		1.47-24	15	
	16		ses (describe in Schedule O)		• • • • •	6465 Y	Y,	• • • • • • • • • • • • • • • • • • •	16	
	17	-	ses. Add lines 10 through 16	<u></u>	• • •, • • •			* * * *	17	
	18	<u>-</u>	eficit) for the year (Subtract line					· · · · · · · ·	18	
Ŗ.	19		r fund balances at beginning of	•				• • • • • • •	10	
3			figure reported on prior year's re						19	46,863
Not Assets	20	_	es in net assets or fund balance	•					20	40,003
ž	21	_	r fund balances at end of year. (• •	•				21	46,863
					ougn 20					m 990-EZ (2012)
EEA	Labora	TOTA REQUES	on Act Notice, see the separat	e instructions.					FO	III 350-CL (2012)

		Balance Sheets (see the instructions for Part II)					ROA
		Check if the organization used Schedule O to respond to	any question in this Par			• • •	<u> 🛚 🔻 </u>
				(A) Be	ginning of year	<u> </u>	(B) End of year
22	Cash, sa	avings, and investments	· · · · · · · · · · · · · · · · · · ·		44,208	22	33,456
23	Land and	d buildings			0	23	
24	Other as	ssets (describe in Schedule O)			2,655	24	2,655
25	Total as	i sets			46,863	25	<u> 36,111</u>
26	Total lia	ibilities (describe in Schedule O)			0	26	0_
27	Net ass	ets or fund balances (line 27 of column (B) must agree w	rith line 21)		46,863	27	36,111
		Statement of Program Service Accomplis	shments (see the ins	tructions for Part II	l)	<u> </u>	Expenses
	•••••	Check if the organization used Schedule O to respond to	•		·	(Rea	uired for section
Wh	at is the o	organization's primary exempt purpose? PERPETUATE				Ι' ΄	c)(3) and 501(c)(4)
						_	nizations and section
		organization's program service accomplishments for each				_	(a)(1) trusts; optional
		d by expenses. In a clear and concise manner, describe the efited, and other relevant information for each program title		e number of			
	SUID DEII	iellieu, aliu oulei reievani information for each program tue	<u> </u>			TOT O	thers.)
28			-				
						1	
	(Grants	\$) If this amount inc	dudes foreign grants, cl	neck here	<u></u> ▶ 🔲	28a	
29							
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	(Grants	S) If this amount inc	dudes foreign grants, ci	heck here	▶ □	29a	
30	<u> </u>						
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	(Grants	£ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	dudaa faralaa araata al	had bee		200	
94			cludes foreign grants, cl		· · · · · · · · · · · · · · · · · · ·	30a	
31		•				١.,	ŀ
	(Grants		cludes foreign grants, d			31a	
32	Total or	rogram service expenses (add lines 28a through 31a)				32	0
					_		
	Ti W.	List of Officers, Directors, Trustees, and Key Employ	yees List each one eve	n if not compensate	_	tions	for Part IV)
			yees List each one eve	n if not compensate	_		
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		List of Officers, Directors, Trustees, and Key Employ Check if the organization used Schedule O to respond to	yees List each one eve o any question in this P (b) Average	n if not compensate art IV (c) Reportable	(d) Health benefits contributions to emp	i. oloyee d	(e) Estimated amount of
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instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V Yes 33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O 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 change on Schedule O (see instructions) 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)? 35 a Did the organization is section \$51(c)(4), \$501(c)(5), or \$501(c)(6) organization subject to section \$603(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete spilicable parts of Schedule N. 36 Enter amount of political expenditures, direct or indirect, as described in the instructions 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 38 a 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 outstanding at the end of the tax year covered by this return? 38 a 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 outstanding at the end of the tax year covered by this return? 39 a Section \$501(c)(3) organizations. Enter: a initiation fees and capital contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities a initiation fees and capital contributions included on line 9 c Section \$501(c)(3)
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O 33 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 change on Schedule O (see instructions) 34 John the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others? 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others? 35 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 35 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 35 b If 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 unifing the year? If "Yes," complete Schedule C, Part III 36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete schedule L, Part II and enter the total amount involved 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions 38 b Id the organization file Form 1120-POL for this year? 39 b If "Yes," complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations. Enter: 39 a Initiation fees and capital contributions included on line 9 39 Gross receipts, included on line 9, for public use of club facilities 39 a Initiation fees and capital contributions included on line 9 39 Section 501(c)(3) organizations. Enter: 30 a Initiation fees and capital cont
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42 a The organization's books are in care of ▶ MARILYN RIGERMAN Telephone no. ▶
Located at ▶ , ZIP + 4 ▶
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: ▶
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank
and Financial Accounts.
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: ▶
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in Ileu of Form 1041-Check here
and enter the amount of tax-exempt interest received or accrued during the tax year
Yes
44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be
completed instead of Form 990-EZ
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be
completed instead of Form 990-EZ
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c Did the organization receive any payments for indoor tanning services during the year?
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c Did the organization receive any payments for indoor tanning services during the year? d if "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
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c Did the organization receive any payments for indoor tanning services during the year? d if "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Farm 990	EZ (2012) , SPACE COAST ART	FESTIVAL, INC.			59-1	562006	Pag
							Yes N
	id the organization engage, directly or indirectly, in		ies on behalf of or in opp	osition			
	candidates for public office? If "Yes," complete S		<u> </u>		<u> </u>	46	
	· · · · · · · · · · · · · · · · · · ·			-			
	All Section 501(c)(3) organizations	must answer quest	ions 47-49b and 52	and comp	lete the t	ables for III	nes
	50 and 51						
	Check if the organization used Sch	nedule O to respond	to any question in t	his Part VI			<u>, l</u>
							Yes
47 D	id the organization engage in lobbying activities or	have a section 501(h) ele	ection in effect during the	tax			
У	ear? If "Yes," complete Schedule C, Part II					47	
68 le	s the organization a school as described in section	170(b)(1)(A)(ii)? If "Yes,"	complete Schedule E			48	
19a D	Not the organization make any transfers to an exem	npt non-charitable related	organization?			49a	
b If	"Yes," was the related organization a section 527	organization?				49b	
50 C	complete this table for the organization's five higher	st compensated employe	es (other than officers, di	rectors, truste	es and key		
е	mployees) who each received more than \$100,000	of compensation from the	e organization. If there is	none, enter '	'None."		
	for Manager and Miles of Secondary and Secondary	(b) Average	(c) Reportable	(d) Heelth b			
	(a) Name and title of each employee	hours per week	compensation	contributions to benefit plans, a		(e) Estimated	i amount d ipansation
	paid more than \$100,000	devoted to position	(Forms W-2/1099-MISC)	compen			_
IONE]_					
					_	·	
							-
				-			
				ł		ì	
	100,000 of compensation from the organization. If		(b) Type of service	-		c) Compensation	
			(2) 1390 01 00.11				
		 -			_		
	· · · · · · · · · · · · · · · · · · ·						
d T	otal number of other independent contractors each	n receiving over \$100,00					
	oid the organization complete Schedule A? Note: A	_					
	onexempt charitable trusts must attach a complete						
	neities of perjury, I declare that I have examined this return, inclu						
		niun accompaniano acusomes e					
	act, and complete. Declaration of preparer (other than offices) is						
Sign							
	Signature of officer	besed errall information of which					
Sign Her e	act, and complete. Declaration of preparer (other than officed) is	besed errall information of which					
	Signature of officer MARILYN RIGERMAN, TREAS Type or print name and title	besed errall information of which					
	Signature of officer MARILYN RIGERMAN, TREAS Type or print name and title Print/Type preparer's name	based errait information of which					
Here	Signature of officer MARILYN RIGERMAN, TREAS Type or print name and title Print/Type preparer's name MARILYN RIGERMAN	URER Preparer's signature					
Here Pald	Signature of officer MARILYN RIGERMAN, TREAS Type or print name and title Print/Type preparer's name MARILYN RIGERMAN Firm's name MARILYN RIGERMAN	URER Preparer's signature					
Paid	Signature of officer MARILYN RIGERMAN, TREAS Type or print name and title Print/Type preparer's name MARILYN RIGERMAN Firm's name MARILYN RIGERMAN	URER Preparer's signature N STREET					
ald repare	Signature of officer MARILYN RIGERMAN, TREAS Type or print name and title Print/Type preparer's name MARILYN RIGERMAN Firm's name MARILYN RIGERMAN Firm's name MARILYN RIGERMAN Firm's address 200 NORTH FIRST	URER Preparer's signature N STREET 32931					

EEA

SCHEDULĘ A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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. ▶ See separate instructions.

OMB No. 1545-0047 2012

2012

Employer Identification number Name of the organization SPACE COAST ART FESTIVAL, INC. 59-1562006 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 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(!). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to 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-Non-funtionally integrated 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). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box 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 No Yes (iii) below, the governing body of the supported organization? . 119(1) 11g(III) h Provide the following information about the supported organization(s). (I) Name of supported (II) EIN (III) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vill) Amount of monetary organization (described on lines 1-9 in col. (I) listed in your the organization in organization in col. support (I) organized in the above or IRC section governing document? cal. (1) of your U.S.7 (see instructions)) support? Yes (A) (B) (C) (D) (E) Total

59-1562006

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32,992	31,641	37,145	26,210	29,468	157,456
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	32,992	31,641	37,145	26,210	29,468	157,456
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 fine 5 from line 4						157,456
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	32,992	31,641	37,145	26,210	29,468	157,456
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 .						157,456
12	Gross receipts from related activities, etc. (see instructions)				12	109,377
13	First five years. If the Form 990 is for the corganization, check this box and stop here	<u> </u>	<u></u>	h, or fifth tax year a	s a section 501(c)	3) <u> </u>	▶□
	tion C. Computation of Public S						00 00 W
14	Public support percentage for 2012 (line 6,				• • • • • • • • •		00.00 %
15 48-	Public support percentage from 2011 Sche						00.00 %
102	33 1/3% support test - 2012. If the organization and step here. The organization and the bar and step here.						▶ 🔯
_	box and stop here. The organization qualif		-				▶ 🔼
Ь	33 1/3% support test - 2011. If the organiz			•	•		▶ □
47-	check this box and stop here. The organiz	•		•			🗆
	10%-facts-and-circumstances test - 2012 10% or more, and if the organization meets	•					
					-		
	Part IV how the organization meets the "fac		_	•			▶ □
ь	organization						▶ ⊔
U	10%-facts-and-circumstances test - 2011						
	15 is 10% or more, and if the organization is			-	•		
	Explain in Part IV how the organization med			•	•	•	▶ □
18	supported organization						▶ ⊔
	Instructions						▶ □
							🗀

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

(Complete only if you checked the box on line 9 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		3.				
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
3	Gross receipts from activities that are not an unrelated trade or bus. under sec 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						
7 a	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 line 6.)						
Se	ction B. Total Support						
Cak	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6		ļ		 	- 	
10a	Gross income from interest, dividends, payments received on securities loans, rants, royalties and income from similar sources						
ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b				<u> </u>		<u> </u>
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 IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First five years. If the Form 990 is for the or organization, check this box and stop here		<u></u>				▶ □
	ction C. Computation of Public St						
15	Public support percentage for 2012 (line 8, c					·	<u>%</u>
16 Se	Public support percentage from 2011 Schede ction D. Computation of Investme				· · · · · · · · · · · · · · · · · · ·	. 16	<u>%</u>
<u>38</u>	Investment income percentage for 2012 (line			dump (A)		. 17	
18	Investment income percentage for 2012 (line investment income percentage from 2011 Sc		-	• • • •			%
	33 1/3% support tests - 2012. If the organiz	ation did not check	k the box on line 14	, and line 15 is mo	ore than 33 1/3%,	and line	
b	17 is not more than 33 1/3%, check this box 33 1/3% support tests - 2011. If the organiz	ation did not checi	k a box on line 14 c	or line 19a, and line	e 16 is more than :	33 1/3%, and	
20	line 18 is not more than 33 1/3%, check this Private foundation. If the organization did n	•	_	•			▶ ∐
	· ····································	OF CHIRCH OF COX CO.		, GIGGA BIIS DOX E	1111 300 11130 UCUOT		<u> </u>

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.

2012

ZUIZ

Department of the Treesury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

SPACE COASI ARI PESITVAL, INC.		33-1302000	
01. Description of other assets	(Part II, line 24)		
Category	Beginning of Year	End of Year	
ART PURCHASED	2,655	2,655	
		,	
		-	
-			
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10:18 AM 02/16/13 Cash Basis

SPACE COAST ART FESTIVAL, INC. Balance Sheet As of January 31, 2013

	Jan 31, 13
ASSET8	
Current Assets	
Checking/Savings	
10100 · Florida Community Bank	29,043.77
10200 · Bank of America 10400 · Cash	4,158.38 254.15
10400 · Casn	
Total Checking/Savings	33,456.30
Total Current Assets	33,456.30
Fixed Assets	
15100 · Equipment	2,585.43
15400 · Leasehold Improvement	2,062.00
15990 · Accumulated Depreciation	-4,647.43
Total Fixed Assets	0.00
Other Assets	
19170 - Art Purchased	2,655.00
Total Other Assets	2,655.00
TOTAL ASSETS	36,111.30
LIABILITIES & EQUITY	
Equity	
3900 · Retained Earnings	46,862.73
Net Income	-10,751.43
Total Equity	36,111.30
TOTAL LIABILITIES & EQUITY	36,111.30

10:19 AM

02/16/13 Cash Basis

SPACE COAST ART FESTIVAL, INC. Profit & Loss

February 2012 through January 2013

	TOTAL
Income	
40000 · Membership	
40050 · Benefactor	2,425.00
40100 · Patron	1,125.00
40150 · Sponsor	2,325.00
40200 · Friend	1,400.00
Total 40000 · Membership	7,275.00
41000 · Festival	00 700 00
41050 · Booth Fee 41100 · Jury Fee	62,700.00 5.750.00
41150 · Judges Reception	100.00
41200 · Concession Fee	5,250.00
41250 · T Shirts/Posters	12.098.00
41255 · Beverages	16,330.00
41300 · Turkey Trot	25,234.00
41350 · Purchase Awards	4,775.00
41400 · Advertising	8,050.00
Total 41000 · Festival	140,287.00
42000 · Support	
42050 · Donations	1,146.38
42100 · Corporate	3,625.00
42150 · Government 42200 · Grants	5,000.00
42250 · Grames 42250 · Business Sponsor	4,272.00 1, 95 0.00
42300 · Foundations	6,200.00
Total 42000 · Support	22,193.38
Total Income	169,755.38
Expense	
60000 · Advertising	
60050 · Out of County	4,505.00
60100 · Local	4,107.00
60150 · Internet	1,071.93
60000 · Advertising - Other Total 60000 · Advertising	9,783.93
_	0,700.00
61000 · Office	205 00
61050 · Bank Fees 61100 · Dues & Subscriptions	995.98 134.95
61150 · Office Supplies and Expense	1.027.15
61200 · Maintenance-Office	25.00
61250 · Postage	540.69
61300 · Security	436.89
61350 - Rent	5,400.00
61400 - Taxes, Licenses and Fees	411.25
61450 · Telephone	2,232.59
61500 · Utilities	717.88
61550 · Insurance 61600 · Outreach	307.00 13,153.54
Total 61000 - Office	25,382.92
62000 · Payroll Expense	
62050 · Wages	16.062.76
62100 · Payroll Taxes	1,208.15
Total 62000 - Payroli Expense	17,270.91
- ·	

10:19 AM 02/16/13 Cash Basis

SPACE COAST ART FESTIVAL, INC. Profit & Loss

February 2012 through January 2013

	TOTAL
65000 · Festival Expense	
65050 · Food Court	4,369.00
65100 · Postage/Printing	87.29
65150 · SCAF Product	7,974.00
65155 · Beverages	7,692.10
65200 · Judges Reception	2,692.28
65225 - Judges/Jurors Expense	2,903.28
65250 · Registration/Roll Call	261.25
65300 · Show Awards	45,200.00
65325 · Purchase Award	4,050.00
65350 · Hospitality	592.71
65400 · Sales Tax	1,839.61
65500 - Clean Up	3,038.53
65525 · Signage	180.00
65550 · Security	2,960.00
65600 · Insurance	2,350.38
65650 · Student Art Activities	3,206.18
65651 · Student Art Awards	5,120.00
65700 · Performing Art	4,800.00
65750 · Turkey Trot	12,572.84
65751 · Young At Art/VSA	536.86
65800 · Permits and Fees	175.00
65850 · Rentals/Staging	10,783.96
65900 · Other Expense	4,658.78
Total 65000 · Festival Expense	128,044.05
66900 · Reconciliation Discrepancies	25.00
Total Expense	180,506.81
Net Income	-10,751.43