

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

2017

For calendar year 2017 or other tax year beginning 11/01, 2017, and ending 10/31, 2018

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

A Check box if address changed
B Exempt under section
[X] 501(c)(3)
408(e)
408A
529(a)

Print or Type
GEORGIA MOUNTAIN FAIR, INC.
P.O. BOX 444
HIAWASSEE, GA 30546

D Employer identification number
58-1201642
E Unrelated business activity codes
721210 713990

C Book value of all assets at end of year
2,143,478.

F Group exemption number
G Check organization type
[X] 501(c) corporation

H Describe the organization's primary unrelated business activity
CAMPGROUND

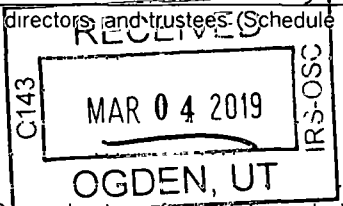
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group
Yes No

J The books are in care of DANIEL NICHOLS Telephone number (706) 896-4191

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows 1-13.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

Table with 4 columns: Line number, Description, Amount, Net. Rows 14-34.



SCANNED APR 15 2019

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. 36 Trusts Taxable at Trust Rates. See instructions for tax computation. 37 Proxy tax. See instructions. 38 Alternative minimum tax. 39 Tax on Non-Compliant Facility Income. See instructions. 40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies.

Part IV Tax and Payments

41 Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116). 42 Subtract line 41e from line 40. 43 Other taxes. Check if from Form 4255, Form 8611, Form 8697, Form 8866, or Other. 44 Total tax. Add lines 42 and 43. 45 Payments. A 2016 overpayment credited to 2017. 46 Total payments. Add lines 45a through 45g. 47 Estimated tax penalty. Check if Form 2220 is attached. 48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed. 49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid. 50 Enter the amount of line 49 you want Credited to 2018 estimated tax.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. 52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. 53 Enter the amount of tax-exempt interest received or accrued during the tax year.

Sign Here. 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 taxpayer) is based on all information of which preparer has any knowledge. Signature of officer: Matthew A. J. Date: Chairman. Title: Chairman. May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [ ] No.

Paid Preparer Use Only. Print/Type preparer's name: ED K. BURTON, CPA. Preparer's signature: [Signature]. Date: 2/26/19. Check [ ] if self-employed. PTIN: P00508573. Firm's name: Ed K. Burton, LLC. Firm's EIN: 45-3988955. Firm's address: 12333 Augusta Road PO Box 40, Lavonia, GA 30553. Phone no: 706-460-5750.

**Schedule A – Cost of Goods Sold.** Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6 Inventory at end of year	6			
2 Purchases	2		7 <b>Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2	7			
3 Cost of labor	3						
4a Additional section 263A costs (attach schedule)	4a					Yes	No
b Other costs (attach sch)	4b		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?				X
5 <b>Total.</b> Add lines 1 through 4b	5						

**Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)** (see instructions)

1 Description of property		
(1) CAMPGROUND		
(2)		
(3)		
(4)		
2 Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
		See Statement 4
(1)	562,797.	560,918.
(2)		
(3)		
(4)		
Total	Total 562,797.	
(c) <b>Total income.</b> Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		(b) <b>Total deductions.</b> Enter here and on page 1, Part I, line 6, column (B) ▶
562,797.		560,918.

**Schedule E – Unrelated Debt-Financed Income** (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach sch)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
<b>Totals</b>			Enter here and on page 1, Part I, line 7, column (A) ▶	Enter here and on page 1, Part I, line 7, column (B) ▶
<b>Total dividends-received deductions</b> included in column 8				

**Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations** (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

**Nonexempt Controlled Organizations**

7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11 Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

**Totals** Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A). Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B).


**Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization** (see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (column 3 plus column 4)
(1)				
(2)				
(3)				
(4)				

**Totals** Enter here and on page 1, Part I, line 9, column (A).  Enter here and on page 1, Part I, line 9, column (B).

**Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income** (see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute columns 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						

**Totals** Enter here and on page 1, Part I, line 10, column (A). Enter here and on page 1, Part I, line 10, column (B).  Enter here and on page 1, Part II, line 26.

**Schedule J – Advertising Income** (See instructions)

**Part III Income From Periodicals Reported on a Consolidated Basis**

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col. 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4)
(1)						
(2)						
(3)						
(4)						

**Totals** (carry to Part II, line (5))

**Part III** **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (col 6 minus col 5, but not more than col 4).
(1)						
(2)						
(3)						
(4)						
<b>Totals from Part I</b>						
<b>Totals, Part II (lines 1-5)</b>	Enter here and on page 1, Part I, line 11, column (A)	Enter here and on page 1, Part I, line 11, column (B)				Enter here and on page 1, Part II, line 27

**Schedule K – Compensation of Officers, Directors, and Trustees** (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
		%	
		%	
		%	
		%	
<b>Total.</b> Enter here and on page 1, Part II, line 14			

GEORGIA MOUNTAIN FAIR, INC.

58-1201642

**Statement 1**  
**Form 990-T, Part I, Line 12**  
**Other Income**

CRAFT & CONCESSION BOOTH	\$	50,909.
SPONSORSHIP INCOME		23,550.
<b>Total</b>	<b>\$</b>	<b><u>74,459.</u></b>

**Statement 2**  
**Form 990-T, Part II, Line 28**  
**Other Deductions**

ADVERTISING	\$	34,238.
COMPUTER SUPPORT		5,905.
LABOR - CRAFT AREAS DURING FESTIVALS		32,179.
SECURITY - CRAFT AREA DURING FESTIVALS		7,496.
WEBSITE DESIGN & MAINTENANCE		789.
<b>Total</b>	<b>\$</b>	<b><u>80,607.</u></b>

**Statement 3**  
**Form 990-T, Part II, Line 31**  
**Net Operating Loss Deduction**

Loss Year Ending	Original Loss	Loss Previously Used	Loss Available
10/31/12	\$ 39,282.	\$ 22,003.	\$ 17,279.
10/31/15	6,296.	0.	6,296.
10/31/16	58,514.	0.	58,514.
Net Operating Loss Available			\$ 82,089.
Taxable Income			\$ -116,800.
Net Operating Loss Deduction (Limited to Taxable Income)			<b><u>\$ 0.</u></b>

**Statement 4**  
**Form 990-T, Schedule C, Line 3**  
**Deductions Directly Connected with Income**

CAMPGROUND		
Interest	\$	2,524.
Telephone		6,548.
CAMPGROUND SALARIES		258,203.
CASUAL LABOR		20,642.
GROUP HEALTH INSURANCE		19,205.
PAYROLL TAX EXPENSE		18,077.
CREDIT CARD FEES		24,491.
REFUNDS		443.
GENERAL INSURANCE		45,259.
SUPPLIES		19,232.
CABLE TV		8,759.
UTILITIES		137,535.
<b>Total</b>	<b>\$</b>	<b><u>560,918.</u></b>