efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493217013086

Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2015

Open to Public Inspection

A F	or the	e 2015 ca	lendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015					
B Ch	Check if applicable Dalton Convention and Visitors Bureau				D Employer identification number			
Address change						01-0825899		
Name change		ange	Doing business as					
Initial return						E Telephone number		
Final			Number and street (or P O box if mail is not delivered to street address) Room/suite PO Box 6177			·		
return/terminated						(706)876-1561		
Amended return Application pending			City or town, state or province, country, and ZIP or foreign postal code Dalton, GA 30722			G Gross receipts \$ 766,220		
			F Name and address of principal officer	H(a) Is this	s a droup	returr	n for	
			Brett Huske	subordinates? \(\bar{V}\) es \(\bar{V}\) No				
			PO Box 6177 Dalton, GA 30722	H(b) Are al		nates	□Yes □No	
			·	ınclud If "No		a list	(see instructions)	
Tax-exempt status			501(c)(3)	H(c) Group				
			v visitdaltonga com	T		1		
		_	Corporation	L Year of for	mation 20	09 M	State of legal domicile GA	
Pa	rt I		mary					
Governance	T	Briefly describe the organization's mission or most significant activities To enhance the local economy by promoting the long term development of the Dalton area as a hub for tourism, meetings, conventions, trade shows, and sporting events						
Ē								
ş	2	2 Check this box ▶ if the organization discontinued its operations or disposed of more than 25% of its net assets						
Activities &			of voting members of the governing body (Part VI, line 1a)			3	11	
Ě		4 Number of Independent voting members of the governing body (Part VI, line 1b)				4	11	
ਹ						5	16	
4	1					6		
			elated business revenue from Part VIII, column (C), line 12		•	7a	0	
	D IV	iet unreia	ted business taxable income from Form 990-1, line 34	1	· Voor	7b	Current Year	
	8	Contri	butions and grants (Part VIII, line 1h)	РПО	r Year 32,:	104	Current Year 17,250	
क	9		Program service revenue (Part VIII, line 2g)			-	748,961	
Revenue	10	_	ment income (Part VIII, column (A), lines 3, 4, and 7d)		772,954		9	
æ	11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
	12		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		805,0	069	766,220	
Expenses	13	Grants	and similar amounts paid (Part IX, column (A), lines 1–3)				0	
	14	Benefi	ts paid to or for members (Part IX, column (A), line 4)				0	
	15	Saları 5–10)	es, other compensation, employee benefits (Part IX, column (A), lines		304,5		305,865	
	16a	Profes	ssional fundraising fees (Part IX, column (A), line 11e)				0	
	ь	Total fu	ndraising expenses (Part IX, column (D), line 25) ▶0					
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		399,7		428,426	
	18	Total e	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		704,291		734,291	
	19	Reven	ue less expenses Subtract line 18 from line 12		100,778		31,929	
Net Assets or Fund Balances				Beginning of	Current	rear	End of Year	
	20	Totals	assets (Part X, line 16)		211,1		255,659	
	21		iabilities (Part X, line 26)			-	89,924	
	22		sets or fund balances Subtract line 21 from line 20		77,370 133,806		165,735	
	131						200,700	
Unde my k	r pen nowle	alties of p	perjury, I declare that I have examined this return, including accompany pelief, it is true, correct, and complete Declaration of preparer (other the					
		****	*****					
Sign r		Signa	ture of officer Date					
			Huske Director					
		1 Tv	or print name and title					

Preparer's signature Caleb J Carnes

Firm's name F Carnes & Company CPA PC

Dalton, GA 30722
May the IRS discuss this return with the preparer shown above? (see instructions)

Print/Type preparer's name Caleb J Carnes

Firm's address ► PO Box 1405

Paid

Preparer

Use Only

Check if self-employed

Firm's EIN 🕨

PTIN

Phone no (706) 226-5507

Date 2016-08-03

. ▼Yes □No