# 2026

# **Accommodations Tax Funds Request Application**

Organization Name: Hilton Head Island St. Patrick's Day Parade

Project/Event Name: Hilton Head Island St. Patrick's Day Parade

# **Executive Summary**

An ATAX Effectiveness Measurement form has been attached to this application.

Our effectiviness is measured by the reviews we receive publicly and privately. A safe, entertaining community event is our goal and we have repeatedly achieved that goal. Unfortunately our Irishfest was cut short in 2025 due to hazardous weather. We were unable to hold the parade.

We recently won an award chosen by readers and editors of the Guide to South Carolina in the 2025 Best of South Carolina Awards as Best of SC Winner in the Festivals Category.

Being recognized in the 2025 Best of South Carolina Awards is a significant achievement, with less than 10% of South Carolina businesses receiving this prestigious accolade.

# 2026

# **Accommodations Tax Funds Request Application**

Date Received: 09/05/2025 Time Received: 12:39 PM By: Online Submittal

Applications will not be accepted if submitted after 4 pm on September 5, 2025

#### A. SUMMARY OF GRANT REQUEST:

ORGANIZATION NAME: Hilton Head Island St. Patrick's Day Parade

Project/Event Name: Hilton Head Island St. Patrick's Day Parade

Contact Name: Kim Capin Title: Past Chair

Address: PO Box 5428, Hilton Head Island, SC 29938

**Email Address:** 

kimberly.capin@gmail.com

Contact Phone: 843-384-4035

, . . .

Event Date(s): 3/14/26 & 3/15/26

Event Location(s): Celebration Community Park -

Pope Ave

Provide a brief summary on the intended use of the grant and how the money would be used. (100 words or less)

The Hilton Head Island St. Patrick's Day Parade is an annual event drawing thousands of participants and spectators to our Island. The 2026 Event will mark our 4th year of Hilton Head Irishfest which incorporates the historic parade and an annual Irish music concert. This will be our second attempt at the 40th Parade!! Funds requested will be used to secure additional entertainment to enhance the experience of spectators; continue to increase our marketing efforts and assist with the increasing cost to provide mandatory Beaufort County Sheriff's support with traffic, crowd control and facilities needed to control and provide for the crowd.

How does the organization/project/event either drive tourism to Hilton Head Island or enhance the visitor experience on Hilton Head Island? How is this impact being measured? (100 words or less)

Hilton Head Irishfest highlights the beginning of spring on the Island. By offering a family oriented experience we attract tourists wanting to celebrate St.Patrick's Day in a safe, fun

environment. The visibility to participating organizations and business unlike any other offered in our community. For the businesses along the parade route and many other Southend restaurants, it marks the single largest day of the year for them in revenue.

A. Total Number of Physical Tourists Served: 14000

A Tourist is considered a non-resident, traveling more than 50 miles to the Town of Hilton Head Island.

B. Total Number of Physical Visitors Served: 8000

A Visitor is considered a non-resident, who travels 50 miles or less to visit the Town of Hilton Head Island.

C. Total Number of Physical Residents Served: 12000

A Resident is considered any person who claims their property address within the limits of the Town of Hilton Head Island as their primary residence.

D. Total Number of Physical Patrons Served (A+B+C=D): 34000

How was the Number of visitors documented? (250 words or less)

In prior years we have conducted surveys of the crowd and in 2019 we hired a profesional to conuct an economic study of the parade which is included in this application. In reponse to this committee's request for increased efforts to substantiate the percentage of visitors we implemented a plan to capture a wider selection of attendee information. Beginning with the 2023 parade we had a team of volunteers distribute business cards with a QR code urging attendees to "enter to win". We successfully captured more information than prior surveys conducted by USCB however were hampered by the weather. For the 2024 event we returned to a roving survey and greatly increased the number of volunteers which resulted in better results. We have secured the services of USCB to conduct a survey at the 2026 event.

Our parade was cancelled due to weather and 2025 so we do not have updated infomation this year.

#### B. DESCRIPTION OF OPERATIONS:

1. For state reporting purposes, give a brief description of the organization. (250 words or less)

The Hilton Head Island St. Patrick's Day Parade is celebrating our 40th Parade after having to cancel the 2025 parade due to inclement weather. Hilton Head Irishfest 2026 will incorporate Irish Heritage with the welcoming of spring in the lowcountry while offering a weekend of arts and entertainment for residents and visitors alike. We historically hold our event the Sunday before St. Patrick's Day to avoid competing with Savannah's parade which is always on March 17th. Through our excellent reputation as the oldest St. Patrick's Parade in South Carolina we have become the destination for the

best of the best Pipe and Drum bands.

We recently won an award chosen by readers and editors of the Guide to South Carolina in the 2025 Best of South Carolina Awards as Best of SC Winner in the Festivals Category.

2. Describe in detail how the requested grant funding would be used? (250 words or less)

The accommodation tax funds we are requesting would be used for expenses related to participation by marching bands, the cost of the traffic control provided by the Beaufort County Sheriff's Department and the tourism related putblic services needed to accommodate the substantial crowd safely. The request is based on the estimated percentage of tourists from the past USCB survey. We have also created a marketing plan with Triad Design Group which would be 100% funded by ATAX funds.

All funds are used for the purpose of producing the event with no paid employees. The only overhead expenses are website hosting, phone, post office box and a small storage unit.

\$30,000 ATAX request for a portion of public services, - our estimated bill from BSCO for 2026 is \$32,960 and we have increased fencing for crowd safety and additional port-o-lets (Cat 4)

\$30,000 for marketing (Cat 1)

\$40,000 ATAX request for band/ cultural attendee costs & support (Cat 2)

3. What impact would partial funding have on the activities, if full funding were not received? What would the organization change to account for partial funding? (100 words or less)

Partial funding could have a negative impact by reducing the amount of entertainment from Pipe and Drum bands from Boston, NY, NJ, Atlanta, Charleston and Myrtle Beach. More importantly, it would negatively impact our ability to increase our safety measures such as additional water barriers at intersections and crowd fencing.

If funding were not to be received the committee would need to reach out to local business's for financial support or in kind trades to have the entertainment portion stay intact. Other options would be increase the costs to enter the parade would have a negative effect. The final option would be to reduce the quality and size of the parade and

loose the status we have built over the years.		
4. What is expected economic impact and benefit to the Island's tourism? (	100 words or less)	
Per the economic study completed in 2019 starting on page 28 Calculations and indirect spending from the parade committee is 42k budget).	•	n a
Total Direct and Indirect spending from spectators is \$2.316 million. Study	Page 37 of Econo	omic
5. In order to comply with the State's Tourism Expenditure Reveiw Committ requirements, please classify your current grant request into the foll categories:	•	•
1 - Destination Advertising/Promotion  Advertising and promotion of tourism so as to develop and increase tourist attendence through the generation of publicity.	21	%
2 - Tourism-Related Events  Promotion of the arts and cultural events.	46	%
3 - Tourism-Related Facilities  Construction, maintenance and operation of facilities for civic and cultural activities including construction and maintenance of access and other nearby roads and utilities the facilities.	0 for	%
4 - Tourism-Related Public Services The criminal justice system, law enforcement, fire protection, solid waste collection and health facilities when required to serve tourists and tourist facilities. This is based on the estimated percentage of costs directly attributed to tourist. Also includes public facilities such as restrooms, dressing rooms, parks and parking lots.	e 33	%
5 - Tourist Public Transportation  Tourist shuttle transportation.	0	%
6 - Waterfront Erosion/Control/Repair Control and repair of waterfront erosion.	0	%
7 - Operation of Visitor Information Centers	0	%

Operating visitor information centers.

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0 %

100 %

Total:

6. If not covered elsewhere in the application, please describe (a) how the organization will collaborate with other organizations to enhance tourism efforts, and (b) provide a venue or service not otherwise available to visitors to the Town of Hilton Head Island. (250 words or less)

The Hilton Head Island St. Patrick's Day Parade is the largest free event on the island and the oldest St. Patrick's Day Parade in South Carolina. Hotels benefit from guests staying locally to enjoy the festivities. The restaurants and business along the parade route enjoy their largest day of the year in sales. The commercial participants in the parade have a unique marketing opportunity to a crowd of 25,000 plus spectators to promote future visits. The addition of the Irishfest concert in Celebration Park creates exposure for sponsors and entertains the visitors and residents who make it their destination or happy to discover the event by the central location on the south end. We have partnered with the Island Recreation Center for the concert in the past. In 2025 we held it at the Beach House. We are looking to return to the Celebration Park and work the Island Recreation Center for 2026.

Our event has the unique ability to showcase Hilton Head Island as businesses can participate and gain exposure which can increase return visits by spectators.

7. Additional comments. (250 words or less)

Over the years the Parade Committee has worked diligently to continue the tradition of this parade and grow the entertainment value and spectators while keeping it family friendly. In 2023 we greatly expandied the value to the community with the creation of Hilton Head Irishfest. It was well attended and will continue to grow as we promote the performers and will become one the best destination events in the area. We pride ourselves on the fact that The Pipe and Drum entertainment will be the best ensemble ever for a Parade. These groups would rather be here to celebrate than in any other area hosting St. Patrick's Day Parade.

#### C. FUNDING:

1. Please describe how the organization is currently funded. (100 words or less)

The parade is funded through entry fees, sponsorships and town ATAX funding.

2. Please	also estimate, as a percentage, the so	urce of	the organization's total annual funding.
	Government Sources	69	Private Contributions, Donations and Grants
21	Corporate Support, Sponsors		Membership, Dues, Subscriptions
	Ticket Sales, or Sales and Services	10	Other
organiz Yes		any ot	her funding from other public sources or
D. FINANCIAL II	NFORMATION:		
Fiscal Year Di	sclosure: Start Month: <b>January</b> E	nd Mor	nth: December
Financial Sta	tement Requirements:		
1. The upo	coming fiscal year's operating budget	for the	organization.
В	Budget Provided: <b>Yes</b>		
2. The pre organiz	evious two fiscal years and current year ation.	-to-date	e profit and loss reports for the
C	Current fiscal year Profit Loss Report Pr	ovided	Yes
P	Previous fiscal year Profit Loss Reports	Provide	ed:
	2023- Previous FY 2 2024- Previous FY 1		
3. The pre	vious two fiscal years and current year	-to-date	e balance sheets.
C	Current fiscal year Balance Sheet Provi	ded: Ye	es
P	Previous fiscal year Balanace Sheets Pr	rovided	:
	2023 - Previous FY 2		
	2024 - Previous FY 1		
4. The pre	vious two years and current year <b>IRS F</b>	Form 9	90 or 990T.

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Current year IRS Form 990 or 990T Provided: Yes

Previous IRS Form 990 or 990T Years Provided:

2022 - Previous FY 1

2023 - Previous FY 1

#### E. FINANCIAL GUARANTEES AND PROCEDURES:

1. Provide a copy of the **official minutes** wherein the organization approves the submission of this application.

An official set of minutes have been attached to this application.

- 2. Indicate whether your organiztion has procurement guidelines, which are utilized and followed in the expenditue of ATAX grant funds.
  - Utilize and follow organization's own procurement guidelines
  - Our organization does not have or follow procurement guidelines

#### F. MEASURING EFFECTIVENESS:

If you received 2024 or 2025 HHI ATAX funds

1. List any ATAX award amounts received in 2024 and/or 2025.

2023	\$71,704.00	Hilton Head Irishfest
2024	\$74,065.00	HHI ST Patrick's Day Parade
2025	\$80,000.00	2025 Irishfest

2. How were the ATAX fundsused? To what extent were the objectives achieved? The ATAX Effectiveness Measurement spreadsheet available in the application portal will show the numerics. Use the space below for verbal comments. (200 words or less)

Funds were used to attract additional pipe and drum bands and marching bands. A portion of the funds were used for crowd control to pay the Beaufort Sheriff's Department overtime. We have added the professional marketing servies of Triad Design Group. We recently won an award chosen by readers and editors of the Guide to South Carolina in the 2025 Best of South Carolina Awards as Best of SC Winner in the Festivals Category.

Being recognized in the 2025 Best of South Carolina Awards is a significant achievement, with less than 10% of South Carolina businesses receiving this prestigious accolade.

3. What impact did this have on the success of the organization/event and how did it benefit the community? (200 words or less)

We were able to attract superior bands to participate in the parade. Especially the pipe and drum bands which add to the cultural aspect of our event. A parade is not a parade without quality bands.

BCSO's support is critical to the safety and success of our event. Traffic and crowd control enables us to hold the event on public roads.

4. How does the organization measure the effectiveness of both the overall activity and of individual programs? (200 words or less)

Our effectiviness is measured by the reviews we receive publicly and privately. A safe, entertaining community event is our goal and we have repeatedly achieved that goal.

#### G. EXECUTIVE SUMMARY

Provide an executive summary using the "ATAX Effectiveness Measurement" form provided via the link on the left, or by utilizing the text area provided below to report uses of the organization's prior ATAX grant, if applicable. If you create your own format, please refer to the "ATAX Effectiveness Measurement" form and use the criteria as a guideline in developing your executive summary below. (1300 words or less)

An ATAX Effectiveness Measurement form has been attached to this application.

Our effectiviness is measured by the reviews we receive publicly and privately. A safe, entertaining community event is our goal and we have repeatedly achieved that goal. Unfortunately our Irishfest was cut short in 2025 due to hazardous weather. We were unable to hold the parade.

We recently won an award chosen by readers and editors of the Guide to South Carolina in the 2025 Best of South Carolina Awards as Best of SC Winner in the Festivals Category.

Being recognized in the 2025 Best of South Carolina Awards is a significant achievement, with less than 10% of South Carolina businesses receiving this prestigious accolade.

Signature: Kim Capin

Title/Position: Past Chair

Mailing Address: PO Box 5428, Hilton Head Island, SC 29938

Email Address: kimberly.capin@gmail.com

Office Phone Number: 843-384-4035

Home Phone Number: 843-384-4035

#### ATAX EFFECTIVENESS MEASUREMENT

Please refer to the SAMPLE ATAX Effectiveness Measurement Form for examples. When completing this form, please expand, contract, or add to the sections as needed (but contain the form to a total of approximately 2 pages). You may choose to use your own format instead of this form, and if doing so, please use the criteria below as a guideline. Regardless of format, each applicant should choose how they measure degree of success. Applicants need to explain why this is an effective measurement technique that reflects results and how that relates to the objective.

TOPIC	THE PLAN	BUDGET	ACTUAL SPENT	RESULTS
				When possible, provide planned results vs. actual
				results, and/or current year vs. prior year results .
Tourism Advert	ising/ Promotion			
	Increase our marketing to other areas to drive attendence and participation of superior bands.			We recently won an award chosen by readers and editors of the Guide to South Carolina in the 2025 Best of South Carolina Awards as Best of SC Winner in the Festivals Category.
				Being recognized in the 2025 Best of South Carolina Awards is a significant achievement, with less than 10% o South Carolina businesses receiving this prestigious accolade.
	We partnered with Triad Design Group to redesign the website, update our logo and brand recognition.			
	We added geotargeting to our advertising for cultural events with similar charactieristics.			Our band coordinator receives frequent inquiries from pipe and drum bands wanting to be a part of our event.
				Part of our funds are spent in the last quarter of the year due to the timing of our event so it's not reflected here.
Total		\$ 35,000.00	\$ 25,000.00	

Tourism Related Public Services			
BCSO Overtime	\$ 15,000.00	\$	The parade was cancelled due to weather and our escrow payment of \$30,900 was returned
Port-o-lets	\$ 3,500.00	\$ 3,953.80	, ,
			Port-o-lets and part of the barriers were already delivered and we weren't able to cancel.
Traffic barriers	\$ -	\$ 659.82	
Securtiy	\$ 1,000.00	\$ -	
Trash	\$ 1,000.00	\$ -	
Total	\$ 20,500.00	\$ 4,613.00	

Tourism Re	lated Events	
	Band accommodations	Several bands were in transit or here prior to cancellation of the event.
	Travel	
	Honorariums	

### ATAX EFFECTIVENESS MEASUREMENT

TOPIC	THE PLAN	BUDGET	ACTUAL SPENT	RESULTS  When possible, provide planned results vs. actual results, and/or current year vs. prior year results.
Total		\$ 69,500.00	22,000,00	
Total		\$ 69,500.00	23,000.00	
Total		\$ -	\$ -	
Total		\$ -	\$ -	

Total Budget to Actual

\$ 125,000.00 \$ 52,613.00



# The Dilcon Dead Island Sc. Dacrick's Oay Darade

MINUTES: August 6th, 2025

- Meeting was called to order at 5:30 pm and adjourned at 6:40. In attendance were Gabrielle Muething, Kim Capin, Laura Reilley, Jim Laferriere, Michael Taylor, Kristin Timmons, Bethanne Carroll and Brad Hanna. Members not in attendance: Dana Millen,
- MARKETING:
  - We'll continue our reach to markets interested in Hilton Head Island, the Lowcountry and the Southeast and Irish Festivals, along with new marketing efforts. This year's parade is two days before St. Patrick's Day which we hope will allow us to pull in visitors attending the Savannah parade and will be working on participation by the Clydesdales, which is a draw for travelers.
  - We've added new partners and sponsors, particularly in the accommodations sector... which gives us more opportunities to reach visitors with our event early
- **BUDGET**:
  - Budget items are consistent with last year's events. However, our event was cancelled last year on the morning of the parade, so the costs we incurred were more than could be covered by entries and sponsors.
- SAFETY:
  - Discussion continues on improving security, with a desire to be able to 'rent' fencing from the Town of Hilton Head Island if they purchase fencing for the route. Rental would increase our budget.
- EVENTS:
  - The location is under discussion for the Irish Concert as the Saturday portion of Hilton Head Irishfest. As last year, possibilities include adding local vendors of crafts, foods and wearable items to give the concert a more festival approach.
- ATAX APPLICATION NOTES:
  - Parade (40th) and Concert (4th) (These remain the same due to cancellation.)
  - Large entertainment lineup (including top Pipe & Drum companies in the country, entertainers, Irish dancers, Irish bands, etc.) price of travel and accommodations
  - Triad leads the effort to market this event, which has grown exponentially. This has allowed us to reach a bigger market to visit Hilton Head Island, while also encouraging the 2 hour drive market to visit, dine and shop.
  - Fencing needs to be considered for the safety of participants and attendees.
  - The committee voted unanimously to submit our request for ATAX funding to be \$100,000

**NEXT MEETING: September 15, 2025** 

# Hilton Head Island St. Patrick's Parade 2026 Proposed Budget

		2020 FTOposed Budget
EXPENSES		
	4.	
Golf Carts	\$	600.00
GM Sash & Awards	\$	750.00
Signs/ Banners	\$	1,000.00
Insurance	\$	4,000.00
Performance Fees	\$	15,000.00
Accommodations & Travel	\$ \$	18,000.00
Bands - F&B		10,000.00
Dignitaries - F&B	\$	5,000.00
Storage Rental	\$	2,000.00
Port-O-Lets	\$	4,500.00
BCSO	\$	32,960.00
Security	\$	1,000.00
Volunteer Expenses	\$	750.00
Reviewing Stand Expenses	\$	2,000.00
Audio & Broadcasting	\$	2,500.00
PO Box	\$	232.00
Marketing	\$	30,000.00
Concert	\$	5,000.00
Accounting	\$	600.00
Fencing/ water barriers	\$	10,000.00
Total	\$	145,892.00
	_	
INCOME	-	
Sponsorships	\$	30,000.00
Entries	\$ \$ \$	10,000.00
ATAX	\$	100,000.00
Concert	\$	5,000.00
Total	\$	145,000.00

# Hilton Head Island St. Patricks Day Parade Foundation

# Profit and Loss by Tag Group

January 1 - September 4, 2025

	JAN 1 - SEP 4, 2025	TOTAL
Revenue		
Contributed income		\$0.00
Government grants & contracts SC Accommodations Tax		\$0.00
Total Government grants & contracts	26,508.72	\$26,508.72
	26,508.72	\$26,508.72
Parade Entry Fee Sponsorships	14,269.90	\$14,269.90
Total Contributed income	24,721.70	\$24,721.70
	65,500.32	\$65,500.32
Total Revenue	\$65,500.32	<b>\$6</b> 5,500.32
GROSS PROFIT	\$65,500.32	\$65,500.32
Expenditures		
Advertising & marketing	5,805.93	\$5,805.93
Contract & professional fees		\$0.00
Accommodation and Travel	6,119.43	\$6,119.43
Accounting fees	90.76	\$90.76
Band Food and Beverage Cost	4,696.40	\$4,696.40
BCSO	0.00	\$0.00
Performance Fees Port O Lets	11,540.00	\$11,540.00
	3,953.80	\$3,953.80
Total Contract & professional fees	26,400.39	\$26,400.39
Insurance	4,035.42	\$4,035.42
Meals	474.20	\$474.20
Dignitary Food and Beverage Costs  Total Meals	47.09	\$47.09
	521,29	\$521.29
Occupancy		\$0.00
Rent		\$0.00
storage unit rent	1,820.00	\$1,820.00
Total Rent	1,820.00	\$1,820.00
Utilities	402.00	\$402.00
Total Occupancy	2,222.00	\$2,222.00
Office expenses	267.12	\$267.12
Bank fees & service charges	31.85	\$31.85
Memberships & subscriptions	50.00	\$50.00
Merchant account fees	128.40	\$128.40
Printing & photocopying		\$0.00
Volunteer T-Shirts	1,084.42	\$1,084.42
Total Printing & photocopying	1,084.42	\$1,084.42
Shipping & postage	268.00	\$268.00
Total Office expenses	1,829.79	\$1,829.79
Total Expenditures	\$40,814.82	\$40,814.82
NET OPERATING REVENUE	\$24,685.50	\$24,685.50
NET REVENUE	\$24,665.50	\$24,685.50

# Statement of Financial Position

# Hilton Head Island St. Patricks Day Parade Foundation

As of September 4, 2025

DISTRIBUTION ACCOUNT	TOTAL
Assets	1990/11
Current Assets	
Bank Accounts	
Cash	-4,742.66
Checking 5886 - 1	-18,995.84
Total for Bank Accounts	-\$23,738.50
Accounts Receivable	
Other Current Assets	
Total for Current Assets	-\$23,738.50
Fixed Assets	,,
Other Assets	
Total for Assets	-\$23,738.50
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable	
Credit Cards	
Other Current Liabilities	
Short-term business loans	-\$18,249.38
Loans	-5,000.00
Total for Short-term business loans	-\$23,249.38
Total for Other Current Liabilities	-\$23,249.38
Total for Current Liabilities	-\$23,249.38
Long-term Liabilities	
Total for Liabilities	-\$23,249,38
Equity	<del></del>
Retained Earnings	-25,010.62
Net Income	24,521.50
Total for Equity	-\$489.12
Total for Liabilities and Equity	-\$23,738.50

# Hilton Head Island St. Patricks Day Parade Foundation

# Profit and Loss by Tag Group

January - December 2024

	JAN - DEC 2024	TOTAL
Revenue		- W
Contributed income		\$0.00
Government grants & contracts		\$0.00
SC Accommodations Tax	44,189.21	\$44,189.21
Total Government grants & contracts	44,189.21	\$44,189.21
Parade Entry Fee	14,338.48	\$14,338.48
Sponsorships	30,052.35	\$30,052.35
Total Contributed income	88,580.04	\$88,580.04
Total Revenue	\$88,580.04	\$88,580.04
GROSS PROFIT	\$88,580.04	\$88,580.04
Expenditures		
Advertising & marketing	18,090.60	\$18,090.60
Contract & professional fees	-,	\$0.00
Accommodation and Travel	17,692.04	\$17,692.04
Accounting fees	100.85	\$100.85
Band Food and Beverage Cost	11,286.91	\$11,286.91
BCSO	13,033.84	\$13,033.84
Coastal Security Service	1,012.50	\$1,012.50
Performance Fees	23,860.75	\$23,860.75
Audio and Broadcasting Fees	8,356.50	\$8,356.50
Total Performance Fees	32,217.25	\$32,217.25
Total Contract & professional fees	75,343.39	\$75,343.39
Insurance		\$0.00
Liability insurance	3,888.85	\$3,888.85
Total insurance	3,888.85	\$3,888.85
Meals	130.70	\$130.70
Dignitary Food and Beverage Costs	3,793.85	\$3,793.85
Total Meals	3,924.55	\$3,924.55
Occupancy	-,	\$0.00
Rent		\$0.00
storage unit rent	3,676.00	\$3,676.00
Total Rent	3,676.00	\$3,676.00
Toi Toi USA	3,973.56	\$3,973.56
Utilities	1,100.00	• •
Total Occupancy	8,749.56	\$1,100.00 \$9,740.56
Office expenses	0,7 <del>10.00</del>	\$8,749.56
Bank fees & service charges	10.75	\$0.00
Memberships & subscriptions	13.75	\$13.75 \$50.00
Merchant account fees	50.00	\$50.00
Office supplies	205.44	\$205.44
Printing & photocopying	192.25 174.60	\$192.25
Shipping & postage		\$174.60
11. 0 1	256.00	\$256.00

# Hilton Head Island St. Patricks Day Parade Foundation

# Profit and Loss by Tag Group

January - December 2024

	JAN - DEC 2024	TOTAL
Total Office expenses	892.04	\$892.04
Supplies		\$0.00
Supplies & materials	300.00	\$300.00
Reviewing Stand Epenses	3,205.48	\$3,205.48
Total Supplies & materials	3,505.48	\$3,505.48
Total Supplies	3,505.48	\$3,505.48
Travel		\$0.00
Taxis or shared rides	1,000.00	\$1,000.00
Total Travel	1,000.00	\$1,000.00
Total Expenditures	\$115,394.47	\$115,394.47
NET OPERATING REVENUE	\$ -26,814.43	\$ -26,814.43
NET REVENUE	\$ -26,814.43	\$ -26,814.43

# Statement of Financial Position

# Hilton Head Island St. Patricks Day Parade Foundation

As of December 31, 2024

DISTRIBUTION ACCOUNT	TOTAL
Assets	
Current Assets	
Bank Accounts	
Cash	-4,742.66
Checking 5886 - 1	-38,517.34
Total for Bank Accounts	-\$43,260.00
Accounts Receivable	
Other Current Assets	
Total for Current Assets	-\$43,260.00
Fixed Assets	
Other Assets	
Total for Assets	-\$43,260.00
Liabilities and Equity	
Liabilities	
Current Liabilities	
Accounts Payable	
Credit Cards Other Current Liabilities	
Short-term business loans	
Total for Other Current Liabilities	-18,249.38
Total for Current Liabilities	-\$18,249.38
	-\$18,249.38
Long-term Liabilities	
Total for Liabilities	-\$18,249.38
Equity	
Retained Earnings	1,803.8 <b>1</b>
Net Income	-26,814.43
Total for Equity	-\$25,010.62
Total for Liabilities and Equity	-\$43,260.00

# Hilton Head Island St. Patrick's Day Parade Foundation

# Profit and Loss Statement <u>January 1st. 2023 - December 31st. 2023</u>

INCOME		
Parade Sponsorships	\$19,614.85	
Non-cash (in-kind) donations	\$0.00	
Parade Entry Fees	\$15,529.00	
Fundraising events	\$0.00	
Fees; revenues from sales; etc.	\$0.00	
Investment income (interest, tax-exempt bond proceeds)	\$0.00	
Misc. income (refunds, etc.)	\$0.00	
Accomodations Tax	\$64,248.57	
TOTAL INCOME		\$99,392.42
EXPENSES		
Grants & Charitable Contributions - cash	\$0.00	
Grants & Charitable Contributions - non-cash (items given out)	\$0.00	
Fundraising events' expenses	\$0.00	
Compensation of Officers / Owners	\$0.00	
Salaries	\$0.00	
Payroll Tax	\$0.00	
Contracted Labor - Beaufort County Sheriff Department	\$9,603.00	
Printing & Publications	\$501.74	
Postage & Shipping	\$248.00	
Rent & Rental deposits (storage)	\$3,365.00	
Utilities (portable toilets)	\$4,154.00	
Brochures & Promotion expenses	\$18,934.41	
Insurance	\$3,639.00	
Office Supplies	\$220.42	
State's filing fees	\$1,000.00	
Taxes and Licenses	\$0.00	
Contract & Professional fees for Bands	\$1,550.00	
Accounting	\$0.00	
Business fees	\$0.00	
Paypal fees	\$0.00	

2023 PROFIT/LOSS TOTAL		\$3,588.15
TOTAL EXPENSES		\$95,804.27
TOTAL EVERNICES		Ć0F 904 27
Misc.	\$103.09	
Vehicle expenses	\$0.00	
Telephone	\$0.00	
Dues & Subscriptions	\$175.00	
Repairs & Maintenance	\$0.00	
Conferences, meetings	\$393.08	
Travel for contracted bands	\$22,764.00	
Interest expense	\$0.00	
Entertainment (performance fees)	\$6,704.00	
Meals for contracted bands, first responders & military	\$22,010.69	
Supplies	\$438.84	

# Balance Sheet

As of December 31, 2023

	Total
ASSETS	
Current Assets	
Bank Accounts	
Cash	-4,742.66
Checking 5886 - 1	4,580.09
Total Bank Accounts	-162.57
Total Current Assets	-162.57
TOTAL ASSETS	\$ -162.57
LIABILITIES AND EQUITY	
Liabilities	
Current Liabilities	
Other Current Liabilities	
Short-term business loans	-3,750.00
Total Other Current Liabilities	-3,750.00
Total Current Liabilities	-3,750.00
Total Liabilities	-3,750.00
Equity	
Retained Earnings	
Net Revenue	3,587.43
Total Equity	3,587.43
TOTAL LIABILITIES AND EQUITY	\$ -162.57

. DISIKICT DIRECTOR C - 1130 ATLANTA, GA 30301

Date:

MAY 2 0 1993

THE HILTON HEAD ISLAND ST PATRICKS DAY PARADE FOUNDATION C/O ROCKWELL O SHEILL 19 TIMBER LN MOSS CREEK PLANTATION HILTON HEAD ISLAND, SC 29926-1080

Employer Identification Number: 57-0905350 Contact Person: STEPHONIE HOUSTON Contact Telephone Number: (404) 331-0169

Internal Revenue Code Section 501(c)(4) Accounting Period Ending: December 31 Form 990 Required: YES Addendum Applies: No

· Dear Applicant:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(a) of the Internal Revenue Code as an organization described in the section indicated above.

Unless specifically excepted, you are liable for taxes under the Federal Insurance Contributions Act (social security taxes) for each employee to whom you pay \$100 or more during a calendar year. And, unless excepted, you are also liable for tax under the Federal Unemployment Tax Act for each employee to whom you pay \$50 or more during a calendar quarter if, during the current or preceding calendar year, you had one or more employees at any time in each of 20 calendar weeks or you paid wages of \$1,500 or more in any calendar quarter. If you have any questions about excise, employment, or other Federal taxes, please address them to this office.

If your sources of support, or your purposes, character, or method of operation change, please let us know so we can consider the effect of the change on your exempt status. In the case of an amendment to your organizational document or bylaws, please send us a copy of the amended document or bylams. Also, you should inform us of all changes in your name or address.

In the heading of this letter we have indicated whether you must file Form 990: Return of Organization Exempt From Income Tax. If Yes is indicated: you are required to file Form 990 only if your gross receipts each year are normally more than \$25,000. However, if you receive a Form 990 package in the mail, please file the return even if you do not exceed the gross receipts test. If you are not required to file, simply attach the label provided, check the box in the heading to indicate that your annual gross receipts are normally \$25,000 or less, and sign the return.

If a return is required, it must be filed by the 15th day of the fifth

# Form **990-EZ**

# Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

Go to www.irs.gov/Form990EZ for instructions and the latest information

A F	or th	ne 2024 calendar year	or tax year beginning $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	2024					
В	hec	k if applicable:	C Name of organization		D Em	ployer identification number			
	Add	lress change		57-0905350					
П	Nan	ne change	Number and street (or P.O. box if mail is not delivered to street address)  Room/	suite	<b>E</b> Tele	ephone number			
$\Box$	Initia	al return	16 Nautilas Road,	ouno	(843	3) 247-7702			
$\Box$	Fina	al return/terminated							
П	Ame	ended return	City or town, state or province, country, and ZIP or foreign postal code		F Group Exemption Number				
$\Box$	Арр	lication pending	Hilton Head Island, SC 29928						
_				1					
		unting Method: 🗹 Ca				if the organization is not attach Schedule B			
I W	ebsi	te hiltonheadire	land.org		orm 990				
J T	ах-е	exempt status (chec	k only one) - 501(c)(3) 501(c) (4) 4947(a)(1) or 527						
KF	orm	of organization: Co	prporation Trust Association Other Foundation						
			ine 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total	assets					
(1	art		,000 or more, file Form 990 instead of Form 990-EZ			\$ 94,799			
Pa	rt I	•	enses, and Changes in Net Assets or Fund Balances (see ganization used Schedule O to respond to any question in thi			uons for Part I)			
	1	<u> </u>	grants, and similar amounts received		1	44,189			
	2	Program service rev	renue including government fees and contracts	F	2				
	3	Membership dues a	und assessments	.	3				
	4	Investment income			4				
	5a	Gross amount from	sale of assets other than inventory 5a	h					
	b	Less: cost or other	basis and sales expenses	$\dashv$	-				
	С	Gain or (loss) from s	sale of assets other than inventory (subtract line 5b from line 5a)	_	5c				
	6	Gaming and fundra	sing events:	<u> </u>					
Ф	а		gaming (attach Schedule G if greater than 6a						
Revenue	b	,,	fundraising events (not including \$ of contributions	$\dashv$					
Вě	_		ents reported on line 1) (attach Schedule G if the						
		sum of such gross i	ncome and contributions exceeds \$15,000) 6b						
	С	Less: direct expens	es from gaming and fundraising events 6c						
	d	Net income or (loss line 6c)	from gaming and fundraising events (add lines 6a and 6b and subtract		6d				
	7a		ntory, less returns and allowances   7a	`					
	b	Less: cost of goods	sold						
	С	Gross profit or (loss	) from sales of inventory (subtract line 7b from line 7a)		7c				
	8	Other revenue (desc	cribe in Schedule O)		8	50,610			
	9	Total revenue. Add	lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	.	9	94,799			
	10	Grants and similar a	mounts paid (list in Schedule O)		10				
	11	Benefits paid to or t	or members	. [	11				
	12	Salaries, other com	pensation, and employee benefits		12				
Expenses	13	Professional fees a	nd other payments to independent contractors		13				
xpe	14	Occupancy, rent, ut	ilities, and maintenance	. [	14	8,750			
Ш	15	Printing, publication	is, postage, and shipping	. [	15	892			
	16	Other expenses (de	scribe in Schedule O)		16	84,848			
	17	Total expenses. Ac	ld lines 10 through 16		17	94,490			
<b>,</b>	18	Excess or (deficit) for	or the year (subtract line 17 from line 9)		18	309			
ssets	19		palances at beginning of year (from line 27, column (A)) (must agree with led on prior year's return)	end-	19	4,580			
Net Assets	20		et assets or fund balances (explain in Schedule O)	ļ	20				
Š	21	Net assets or fund I	palances at end of year. Combine lines 18 through 20	F	21	4,889			

Forn	n 990-EZ (2024)						Page <b>2</b>
Pa	THE Balance Sheets (see the instance Check if the organization use		•	stion in this Part II .			. 🗆
				(A) Beginning of year		(B) End of y	/ear
22	Cash, savings, and investments .			4,58	0	22	4,889
23	Land and buildings				1	23	
24	Other assets (describe in Schedule O	)	[			24	
	Total assets			4,58		25	4,889
	Total liabilities (describe in Schedule	*	<del>-</del>		_	26	
	Net assets or fund balances (line 27 of		, ,	4,58	0	27	4,889
Ра	Statement of Program Ser Check if the organization us	-	•	· –	$\exists  _{_{u}}$	Expense	
Wha	at is the organization's primary exempt purp	oose? See Sch	edule O		,	Required for sectior 501(c)(3) and 501(c)(	
	scribe the organization's program service measured by expenses. In a clear and	· •	_		c	organizations; optionothers.)	
_	sons benefited, and other relevant info						
28	Marching Bands, Military Bar march in the Parade for the						
	(Grants \$ ) If this	amount includ	des foreign grants, check h	<sup>1ere</sup> ∟ <b>28a</b>			35,072
29	(Grants \$ ) If this	amount inclu	des foreign grants, check l	nere <b>29</b> a			
30	(Grants \$ ) If this	amount inclu	des foreign grants, check l	nere <b>30</b> a			
31	Other program services (describe in						
	(Grants \$ ) If this	amount inclu	des foreign grants, check l	nere 🗆 a.			
30	Total program service expenses (a			nere			35,072
_			,				
I G	List of Officers, Directors, Tru  Check if the organization used				ee ti	ne instructions for	Part IV)
	Check if the organization accu	1	(c) Reportable	1	1		
	(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation		(e) Estimated am other compens	
Gal	orielle Muelthing		, , , , , , ,				
Par	rade Chairman - officer	8	0		0		0
Kin	n Capin						
	and the growth to a strate of						
	ecutive Committee Member - Ficer	8	0		0		0
		0	•		-		
ьач	ra Reilley	-					
Par	rade Treasurer - officer	6	0		0		0
Jan	nes Laferriere	_					
Exe	ecutive Committee Member	8	0		0		0
Lyr	nne Cope Hummel	-					
Exe	ecutive Committee Member	6	0		0		0
Eri	n Booth						
Exe	ecutive Committee Member	6	0		0		0
Bra	d Hanna						
Exe	ecutive Committee Member	6	0		0		0
Mik	te Taylor						
Exe	ecutive Committee Member	6	0		0		0
Dar	na Millen	-					
Exe	ecutive Committee Member	6	0		0		0
Bet	hanne Carroll						

Executive Committee Member

55	33		<b>/</b>				
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	34		<b>✓</b>			
35a	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)?	35a		<b>✓</b>			
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	П	П			
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		<b>✓</b>			
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		<b>✓</b>			
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions  37a						
b	Did the organization file Form 1120-POL for this year?	37b		<b>✓</b>			
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 outstanding at the end of the tax year coveed by this return?	38a		<b>✓</b>			
b	If "Yes," complete Schedule L, Part II, and enter the total amount involved . 38b						
	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on line 9						
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: section 4911: section 4912: section 4955:						
b	<b>b</b> Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 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						
С	c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958						
d	d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 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 transaction? If "Yes," complete Form 8886-T	40e		<b>✓</b>			
41	List the states with which a copy of this return is filed:						
42a	The organization's books are in care of: Laura Reilley Telephone no (843) 247-7	702					
	Located at: 16 Nautilas Rd., Hilton Head Island, SC ZIP + 4 29928			·			
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)?	42b	Yes	No V			
	If "Yes," enter the name of the foreign country:  If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
С	At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	42c		<b>✓</b>			
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						
44-	Did the ergenization maintain any denor advised funds during the year? If "Yes" Form 000 must be		Yes	No			
	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		<b>✓</b>			
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	44b		<b>✓</b>			
С	Did the organization receive any payments for indoor tanning services during the year?	44c		<b>✓</b>			
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	44d					
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		<b>/</b>			
b	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-F7. See instructions						

Form	990-EZ (2024)										Pa	ge <b>4</b>
										Yes	1	Vo.
46		zation engage, direct for public office? If "`							46			<u>/</u>
Par	t VI Section	n 501(c)(3) Organiz	ations Only	,								
		on 501(c)(3) organi	_		tions 47–49b	and 52, and c	omplete the	e table	es for	lines		
	50 and	=				,						
	Check i	f the organization ι	ısed Schedı	ule O to respon	d to any que	stion in this Pa	art VI					
								_		Yes	1	No.
47		zation engage in lobt complete Schedule				ection in efect d	-		47			
48	Is the organiza	tion a school as des	cribed in sec	tion 170(b)(1)(A)	(ii)? If "Yes," c	omplete Schedi	ule E	[	48			
49a	Did the organiz	zation make any tran	sfers to an e	xempt non-chari	itable related	organization? .		.	49a	一	Ī	╗
	If "Yes," was the related organization a section 527 organization?						F	49b	〒	Ŧ	一	
50		table for the organization		_				ore tr			1 ka	
50		no each received mo									ı ney	
	. , , ,		(b) Average	(c) Repo		(d) Health be						
	(a) Name and title	e of each employee	hours per week devoted to position	, , ,	sation 099-MISC/	contributions to benefit plans, and compensa	employee d deferred		Estimate her com			
f		of other employees p										
51	•	table for the organiza		•	•		who each re	eceive	d more	e thar	า	
		ompensation from the										
	(a) Name and	I business address of each	independent co	ntractor	<b>(b)</b> Ty	pe of service		( <b>C</b> ) co	ompensa	ation		
d	Total number of	of other independent	contractors	each receiving o	ver \$100,000							
52	Did the organiz	zation complete Sch	edule A? Not	e: All section 50	1(c)(3) organiz	zations must att	ach a comple	eted	_	l Vaa		NI.
	Schedule A .									Yes		No
		ury, I declare that I have , and complete. Declara									ledge	and
		, and complete. Decidle	on picpare	, canor triair officer	, 54564 011 411	oauon or will	on properties	- arry N	. 10 **160	<del></del>		
Sig		Signature of officer					I Date					
TICIC .		Laura Reilley,	Parade Tro	easurer			04/25/	2025				
		Type or print name and	d title									
Doi:		Print/Type preparer's n		reparer's signature		Date				PTI	NI	
Paid		i illiv iype preparers n	aille P	iepaiei s signature		Date		eck if		["	4	
	parer Only							employ	/eu			
USE	. Only	Firm's name					Firm's EIN	٧				
		Firm's address					Phone no	)				
May	the IRS discuss th	nis return with the prepar	er shown abov	e? See instructions	<del></del>					Yes		No

# **SCHEDULE 0**

(Form 990) Department of the Treasury

Internal Revenue Service

# 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 **Open to Public** 

Inspection

Name of the Organization

HILTON HEAD ISLAND ST PATRICKS DAY PARADE FOUNDATION

EIN 57-0905350

Part and Line Number: Part I - Line 8

Description	Amount
Sponsorships	\$30,000
Parade Entry Fees	\$15,610
Moneys Loaned to Parade until accommodations tax is received	\$5,000

Part and Line Number: Part I - Line 16

Description	Amount
Bands Food and Beverage Expenses	\$11,287
Beaufort County Sheriff's Department and Coastal Security Service Expense	\$14,046
Liability Insurance	\$3,885
Supplies and Materials for Reviewing Stand	\$3,535
Audio and broadcasting fees	\$8,356
Dignitary Food and Beverage Costs	\$1,863
Advertising and Marketing	\$18,091
Bands Accommodations and Travel Expenses	\$8,193
Honorarium and Band Performance Fees	\$15,592

Part and Line Number: Part III - Primary Exempt Purpose

Our purpose is to organize, staff and execute plans to commemorate St. Patrick's Day by having an annual Parade. The Parade is attended by spectators of all standings. Individual organizations, military, local business's, banks, schools, scouts and others enter the Parade each year. A free family event that attracts tourist from all over.

# Form **990-EZ**

# Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Go to www.irs.gov/Form990EZfor instructions and the latest information

A F	or th	ne 2023 calendar yeai	c, or tax year beginning January 01, 2023, and ending December 31	, 2023			
В	Chec	k if applicable:	C Name of organization HILTON HEAD ISLAND ST PATRICKS DAY PARADE FOUNDATION			nployer identification number	
	Add	ress change	N	57-0	0905350		
	Nan	ne change	Number and street (or P.O. box if mail is not delivered to street address)	n/suite		ephone number	
	Initia	al return		(843) 247-7702			
	Fina	ll return/terminated					
	Ame	ended return	City or town, state or province, country, and ZIP or foreign postal code Hilton Head Island, SC 29928		<b>F</b> Gro	oup Exemption Number	
	App	lication pending	niiton head Island, SC 29926				
G /	Acco	unting Method: 🗸 Ca	ash Accrual Other (specify):	<b>H</b> CI	neck 🗸	If the organization is not	
ıw	ebsi	te hiltonheadire	eland.org		quired orm 99	to attach Schedule B 0).	
J 1	ax-e	exempt status (chec	ck only one) - 501(c)(3) 501(c) (4) 4947(a)(1) or 527				
K	orm	of organization: C	orporation Trust Association Other Foundation				
		II, column (B)) are \$500	line 9 to determine gloss receipts. If gross receipts are \$200,000 or more, or if tot 0,000 or more, file Form 990 instead of Form 990-EZ			\$ 99,392	
Pa	rt I		enses, and Changes in Net Assets or Fund Balances (see ganization used Schedule O to respond to any question in the			tions for Part I)	
	1	Contributions, gifts	, grants, and similar amounts received		1	64,249	
	2	Program service re	venue including government fees and contracts	Ē	2		
	3	Membership dues a	and assessments		3		
	4	Investment income		[	4		
	5a	Gross amount from	sale of assets other than inventory 5a	Ī			
	b	Less: cost or other	basis and sales expenses 5b				
	С	Gain or (loss) from	sale of assets other than inventory (subtract line 5b from line 5a)		5с		
	6	Gaming and fundra	ising events:	Ī			
Φ.	а	Gross income from \$15,000)	gaming (attach Schedule G if greater than				
Revenue	b	•	fundraising events (not including \$ of contributions				
Ř			ents reported on line 1) (attach Schedule G if the				
		J	income and contributions exceeds \$15,000) 6b				
	•	•	ses from gaming and fundraising events 6c				
	d	Net income or (loss line 6c)	s) from gaming and fundraising events (add lines 6a and 6b and subtract		6d		
	7a	Gross sales of inve	ntory, less returns and allowances <b>7a</b>				
	b	Less: cost of goods	s sold				
	С	Gross profit or (loss	s) from sales of inventory (subtract line 7b from line 7a)		7с		
	8	Other revenue (des	cribe in Schedule O)		8	35,143	
	9		I lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	99,392	
	10		amounts paid (list in Schedule O)		10		
	11	·	for members		11		
S			pensation, and employee benefits	-	12		
Expenses			nd other payments to independent contractors		13		
X			tilities, and maintenance		14	7,519	
			ns, postage, and shipping		15	1,145	
		, ,	escribe in Schedule O)	•	16	90,891	
		<u>-</u>	dd lines 10 through 16		17	99,555	
<u>v</u>			or the year (subtract line 17 from line 9)		18	(163)	
Net Assets		of-year figure repor	balances at beginning of year (from line 27, column (A)) (must agree with ted on prior year's return)		19	4,743	
Vet /			et assets or fund balances (explain in Schedule O)		20		
_	21	Net assets or fund	balances at end of year. Combine lines 18 through 20		21	4,580	

Form	990-EZ (2023)					Page <b>2</b>
Par	Palamas Charte (and the inc	structions for	Part II)			
ı aı	Check if the organization us		•	stion in this Part II		
				(A) Beginning of year		(B) End of year
22 (	Cash, savings, and investments .			4,743	22	4,580
<b>23</b> l	_and and buildings		[		23	
24 (	Other assets (describe in Schedule C	)			24	
	Total assets			4,743	25	4,580
	Total liabilities (describe in Schedule	•			26	4 500
_	Net assets or fund balances (line 27 o	. ,	, ,	4,743	27	4,580
Par	Statement of Program Ser Check if the organization us	-	· ·	· —	/Poquir	<b>Expenses</b> ed for section
Wha	tt is the organization's primary exempt pur	oose? See Sch	edule O			3) and 501(c)(4)
Desc	cribe the organization's program service	accomplishme	nts for each of its three large:	st program services,		ations; optional for
	neasured by expenses. In a clear and sons benefited, and other relevant inf			rovided, the number of	others.)	1
28	Marching Bands, Military Bar the Parade for the entertain					
	(Grants \$ ) If this	s amount inclu	des foreign grants, check h	iere	28a	51,213
29	(Grants \$ ) If this	s amount inclu	des foreign grants, check h	uoro.		
30	(Crants \$ ) II this	s arriount inclu	des foleigh grants, check i		29a	
30	(Grants \$ ) If this	s amount inclu	des foreign grants, check h	nere	30a	
31	Other program services (describe in	Schedule O)		<u></u>		
	(Grants \$ ) If this	s amount inclu	des foreign grants, check h	iere	31a	
32	Total program service expenses (a	ıdd lines 28a th	rough 31a)		32	51,213
Par	List of Officers, Directors, Tru Check if the organization used				the ins	tructions for Part IV)
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation		Estimated amount of other compensation
	rielle Muelthing ade Chairman - officer	8	0	o		0
Kin	n Capin					
Exe	ecutive Committee Member -	•				
off	ficer	8	0	0	ı	0
	ra Reilley					
Par	ade Treasurer - officer	6	0	0	1	0
	es Laferriere cutive Committee Member	8	0	0		0
Lyn	ne Cope Hummell				<u> </u>	
_	cutive Committee Member	6	0	0		0

Erin Booth

Brad Hanna

Mike Taylor

Dana Millen

Bethanne Carroll

Executive Committee Member

\_\_\_\_\_

Par	Other Information (Note the Schedule A and personal benefit contract statement requirements in the information (Note the Schedule O to respond to any question in this Part V	nstruction	s for P	art V.)	
				Yes	No
33		de a	20		
34	detailed description of each activity in Schedule O	· · · med	33		
•	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain change on Schedule O. See instructions		34		<b>✓</b>
35a	a Did the organization have unrelated business gross income of \$1,000 or more during the year from busi activities (such as those reported on lines 2, 6a, and 7a, among others)?	ness 	35a		<b>✓</b>
b	b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Sche	dule O	35b		
С	c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) n reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	otice,	35c		<b>✓</b>
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net asseduring the year? If "Yes," complete applicable parts of Schedule N	ets	36		<b>✓</b>
37a	a Enter amount of political expenditures, direct or indirect, as described in the instructions  37a 0				
b	<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?		37b		<b>/</b>
38a	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; of any such loans made in a prior year and still outstanding at the end of the tax year covered by this return		38a		<b>✓</b>
b	b If "Yes," complete Schedule L, Part II, and enter the total amount involved				
39	Section 501(c)(7) organizations. Enter:				
а	a Initiation fees and capital contributions included on line 9				
b	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 section 4911: section 4912: section 4955:				
b	b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 49 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year.	ear			
_	that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Par Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	t I	40b		<b>/</b>
С	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958				
d	d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization				
е	e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelte	r			
41	transaction? If "Yes," complete Form 8886-T	[	40e		
42a	a The organization's books are in care of: Laura Reilley Telephone no	(843)	247-7	702	
	Located at: 16 Nautilas Rd., Hilton Head Island, SC ZIP + 4	29928			
				Yes	No
b	b At any time during the calendar year, did the organization have an interest in or a signature or other authover				
	a financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	42b		<b>~</b>
	If "Yes," enter the name of the foreign country:  If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requiremen FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	ts for			
С	c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:	ŀ	42c		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here.		420		سُار
	and enter the amount of tax-exempt interest received or accrued during the tax year   43	 I			· L
	and office the unloant of tax exempt interest received of accorded during the tax year			Yes	No
44a	a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be		44-	les	NO
b	completed instead of Form 990-EZ		44a		<b>*</b>
_	completed instead of Form 990-EZ		44b	H	
	c Did the organization receive any payments for indoor tanning services during the year?		44c	$\vdash \vdash$	
d	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		44d		
45a	ia Did the organization have a controlled entity within the meaning of section 512(b)(13)?		45a		<b>✓</b>
b	b Did the organization receive any payment from or engage in any transaction with a controlled entity with 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		<b>/</b>

Form	990-EZ (2023)										Page 4	
										Yes	No	
46		zation engage, direct for public office? If "\							46		<b>✓</b>	
Par	All secti 50 and	n <b>501(c)(3) Organiz</b> ion 501(c)(3) organia 51 f the organization u	zations mu	st answer ques				e the tab	es for	lines		
		-								Yes	No	
47		id the organization engage in lobbying activities or have a section 501(h) election in efect during the tax ear? If "Yes," complete Schedule C, Part II					47					
48	Is the organiza	ne organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E					48					
49a	Did the organiz	id the organization make any transfers to an exempt non-charitable related organization? $\ldots$ . $\ldots$ .					49a					
b	If "Yes," was th	ne related organizatio	n a section	527 organization	n?				49b			
50		table for the organiza no each received mor									key	
	(a) Name and title	e of each employee	(b) Average hours per we devoted to position	ek comper	nsation 1099-MISC/	contribution benefit pla	(d) Health benefits, contributions to employee benefit plans, and deferred compensation		(e) Estimated amoun other compensation			
f	Total number of	of other employees p	aid over \$10	00,000	. —	I .		<b>'</b>				
51		table for the organiza					actors who ea	ach receive	ed more	e than		
	(a) Name and	business address of each	independent c	ontractor	(b) ⊤	ype of service		(c)	compensa	ation		
d	Total number of	of other independent	contractors	s each receiving	over \$100,000	)	—					
52	Schedule A .	zation complete Sche			· · · · ·			<u> </u>	🗆	] Yes	☐ No	
		ury, I declare that I have , and complete. Declara									edge and	
Sigi	n											
Her		Signature of officer Laura Reilley, Parade Treasurer						Date 10/03/2024				
_	Type or print name and title											
	parer	Print/Type preparer's na	ame	Preparer's signature	•	Date		Check if [	self-	PTIN	I	
Use	Only	Firm's name					Firr	l n's EIN				
		Firm's address P						one no				
Mav	the IRS discuss th	is return with the prepar	er shown abo	ve? See instruction	ıs		1			Yes	□No	

# SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

# 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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the Organization

HILTON HEAD ISLAND ST PATRICKS DAY PARADE FOUNDATION

Employer identification number 57-0905350

Part and Line Number: Part I - Line 8

Description	Amount
Parade Entry Fee	\$15,528
Sponsorships	\$19,615

Part and Line Number: Part I - Line 16

Description	Amount
Bad Debt Expenses	\$1,000
Advertising and Marketing	\$18,934
Accommodations and Travel Expenses for Bands	\$22,765
Food and Beverage Costs for Band Members	\$8,211
Beaufort County Sheriff's Office (traffic and crowd control)	\$9,603
Band Honorariums and Performance fees	\$8,254
Insurance	\$3,639
Military Food and Beverage	\$14,193
materials and supplies	\$4,292

Part and Line Number: Part III - Primary Exempt Purpose

Our purpose is to organize, staff and execute plans to commemorate St. Patrick's Day by having an annual Parade. The Parade is attended by spectators of all standings. Individual organizations, military, local business's, banks, schools, scouts and others enter the Parade each year. A free family event that attracts tourist from all over.

# **HILTON HEAD ISLAND ST** PATRICKS DAY PARADE **FOUNDATION**

EIN: 57-0905350 | Hilton Head Island, South Carolina, United **States** 

# Form 990-N (e-Postcard)

Organizations who have filed a 990-N (e-Postcard) annual electronic notice. Most small organizations that receive less than \$50,000 fall into this category.



## ↑ Tax Year 2022 Form 990-N (e-Postcard)

#### **Tax Period:**

2022 (01/01/2022-12/31/2022)

#### EIN:

57-0905350

#### Organization Name (Doing Business as):

HILTON HEAD ISLAND ST PATRICKS DAY PARADE FOUNDATION

#### **Mailing Address:**

16 Nautilas Road Hilton Head Island, SC 29928 **United States** 

### **Principal Officer's Name and Address:**

Gabrielle Muething

15 Fording Island Road Hilton Head Island, SC 29926 **United States** 

#### **Gross receipts not greater than:**

\$50,000

#### Organization has terminated:

No

#### Website URL:

hiltonheadireland.org



- **∨** Tax Year 2020 Form 990-N (e-Postcard)
- **∨** Tax Year 2019 Form 990-N (e-Postcard)
- **∨** Tax Year 2018 Form 990-N (e-Postcard)
- **→** Tax Year 2017 Form 990-N (e-Postcard)
- **∨** Tax Year 2015 Form 990-N (e-Postcard)
- **→** Tax Year 2014 Form 990-N (e-Postcard)
- **∨** Tax Year 2013 Form 990-N (e-Postcard)
- **∨** Tax Year 2012 Form 990-N (e-Postcard)
- **∨** Tax Year 2011 Form 990-N (e-Postcard)
- **✓** Tax Year 2010 Form 990-N (e-Postcard)
- **✓** Tax Year 2009 Form 990-N (e-Postcard)