

SOUTH CAROLINA SECRETARY OF STATE

PUBLIC CHARITIES DIVISION ANNUAL FINANCIAL REPORT

Filing Instructions



- Organizations who file the IRS 990-N or are not required to file with the IRS should complete this form.
- **Please follow the instructions provided on pages 4 and 5 to complete this form.** You may contact our office with any questions at 803-734-1790 or email charities@sos.sc.gov.
- **We do not accept this filing by fax or email;** you may upload this report using our online filing system at www.sos.sc.gov or mail this form to: South Carolina Secretary of State, Attn: Division of Public Charities, 1205 Pendleton St., Suite 525, Columbia, SC 29201.

For the fiscal year ending 12/31/2020 (mm/dd/yy) EIN: 46 - 2051029 Charity ID: C13336090

Organization's Name: ACTIVE EXPRESSIONS ART ACADEMY

Part I— Fundraising Events or Contracts

If your organization held any fundraising events, or used a commercial co-venturer (CCV) or professional fundraising company (PFR) during the previous fiscal year, you must report all revenue and expenses in the following table. Events include, but are not limited to, carnivals, dinners, galas, raffles, and bingo games. If you need additional space, you may list additional events on a separate sheet and include the amounts in the total revenue and expenses on this table.

(A) Name of Event, CCV or PFR	(B) Gross Receipts & Contributions	(C) Cash & Noncash Prize Expenses	(D) Other Expenses	(E) Total Expenses	(F) Net Revenue
1.				\$ 0.00	\$ 0.00
2.				\$ 0.00	\$ 0.00
3.				\$ 0.00	\$ 0.00
4.				\$ 0.00	\$ 0.00
5.				\$ 0.00	\$ 0.00
6.				\$ 0.00	\$ 0.00
7.				\$ 0.00	\$ 0.00
8.				\$ 0.00	\$ 0.00
9.				\$ 0.00	\$ 0.00
10.				\$ 0.00	\$ 0.00
11. Gross Revenue  (add 1B through 10B)	\$ 0.00	12. Total Expenses (add 1E through 10E) 		\$ 0.00	\$ 0.00

Part II— Gross Revenue

Organizations must report their gross receipts from all sources of revenue.

1. Fundraising events (from page 1, part I, box 11B)	\$ 0.00
2. Fundraising activity revenue not reported on line 1.....	
3. Federated campaigns (such as United Way)	
4. Membership dues	
5. Related organizations (such as related parent or national organizations)	
6. Government grants (from federal, state or local governments)	
7. All other contributions, gifts, grants not listed above	\$ 2,180.00
8. Program service revenue	\$ 2,403.97
9. Other income.....	
10. Total revenue (add lines 1 through 9)	\$ 4,583.97

Part III— Program Service Expenses

Describe the organization's program accomplishments and the amount spent on each. If more space is needed you may attach an additional sheet if necessary.

11. Virtual School Program(5 children) Ages 10-16 Partnership with Palmetto Leadership Institute	\$ 262.50
12.	\$ 1,454.75
13. Total Program Service Expenses (add lines 11 and 12).....	\$ 1,717.25

Part IV— Management, General and Fundraising Expenses

14. Program expenses (from part III, line 13)	\$ 1,717.25
15. Direct expenses from fundraising events and contracts (box 12E)	\$ 0.00
16. Fundraising expenses (not included in the amount on line 15).....	
17. Payments to related organizations	
18. Salaries and other compensation	
19. Management and general expenses	\$ 50.00
20. Professional fees and other payments to independent contractors	
21. Other expenses not listed above.....	
22. Total expenses (add lines 14 through 21)	\$ 1,767.25
23. Excess or (deficit) for the year (subtract line 22 from line 10)	\$ 2,816.72
24. Fund balances/net worth at the beginning of the fiscal year.....	\$ 2,090.57
25. Changes in fund balances/net worth (attach explanation).....	
26. Fund balances/net worth at the end of the fiscal year (add lines 23 through 25).....	\$ 4,907.29

Part V— Balance Sheet

27. Total assets	\$ 4,709.29
28. Total liabilities	\$ 97,700.00
29. Net assets or fund balances at end of year (subtract line 28 from line 27)	(\$ 92,990.71)

Certification

As required by Section 33-56-60 of the Solicitation of Charitable Funds Act, this form shall be signed by the Chief Executive Officer and the Chief Financial Officer of the charitable organization. (If one person serves as both CEO and CFO, he or she should sign in both places below.)

We certify that the information furnished in this statement is true and correct to the best of our knowledge and belief.

CEO/President

Name : DYANNE W LYLES

Signature: *Dyanne W. Lyles*

Date: 04/21/2021

CFO/Treasurer

Name : DYANNE W LYLES

Signature: *Dyanne W. Lyles*

Date: 04/21/2021


Mailing Address: 2040 SOUTH CHURCH ST EXT SUITE B SPARTANBURG, SC 29306

Email Address: chairman@activeartedu.org Phone Number: 864-7071168

SOUTH CAROLINA SECRETARY OF STATE

PUBLIC CHARITIES DIVISION

ANNUAL FINANCIAL REPORT INSTRUCTION SHEET

Please read the instructions for each line of the report. You do not need to submit these instructions with your report. If you are using the online filing portal for reporting these figures, you must complete this form in its entirety per instructions and upload it during the filing using the  **Add** button in the reporting screen.

Instructions for Part I— Fundraising Events or Contracts

If your organization held any fundraising events, used a commercial co-venturer (CCV) or professional fundraising company (PFR) during the previous fiscal year, you must report all revenue and expenses in Part I. Events include, but are not limited to, carnivals, dinners, galas, raffles, and bingo games. If you need additional space, you may list additional events on a separate sheet and include the amounts in the total revenues and expenses on this table.

Instructions for Each Column

- (A) Enter the name of the event, commercial entity or professional fundraising company.
- (B) Total of all ticket sales, entry fees, etc... along with any donations received at the event. **Do not** put ordinary contributions from individuals or revenue from ongoing program services on this table.
- (C) Cash prizes given or money spent by the organization to purchase prizes. **Do not include donated items.**
- (D) Direct expenses that are not listed in column C, facility, food and beverage, speaker costs, etc....
- (E) For each row **add** the amounts listed in column C and D.
- (F) For each row **subtract** the amounts listed in column E from column B.

Instructions for Part II— Gross Revenue

- Line 1. **Fundraising events:** Enter the total gross amounts received from all special events and activities by the organization, or on its behalf. **This number should match the number from page 1, part I, box 11B.**
- Line 2. **Fundraising activity revenue:** Enter the total gross receipts received from fundraising activities not reported on line 1. Fundraising activities include amounts received to raise funds to finance the organization's exempt activities. These activities include, but are not limited to, sales of goods to the public and concession stand receipts.
- Line 3. **Federated campaigns:** Enter the total amounts received from fundraising organizations such as United Way.
- Line 4. **Membership dues:** Enter only the amount of dues, fees, sponsorships, and assessments that do not exceed the monetary value of the benefits available to the members.
- Line 5. **Related organizations:** Enter the total contributions received from associated organizations such as related affiliates, parent organizations, or national organizations.
- Line 6. **Government grants:** Enter total amount of grants or other payments received from federal, state or local governments that are used to carry out the organization's charitable purpose.
- Line 7. **All other contributions, gifts, grants:** Enter the total amount of contributions from individuals, businesses, foundations, trusts, estates and other exempt organizations, that are not included on lines above.
- Line 8. **Program service revenue:** Includes total fees received by the organization for providing services or activities that fulfill the organization's stated mission or purpose.
- Line 9. **Other income:** All other income not covered by lines 1-8, including, but not limited to, interest and rental income, as well as sale of assets or inventory not sold through an event or activity listed on lines 1 and 2.
- Line 10. **Total revenue:** Add lines 1-9.

Instructions for Part III— Program Service Expenses

Lines 11 and 12.

- **Program expenses:** Include total costs of services or activities performed by the organization that fulfill its charitable purposes.
- **Include** any donations, grants, or scholarships given to fulfill the organization's charitable purpose.
- **Do not** include fundraising expenses in this section.
- **Do not** include management and operating expenses that are not directly related to carrying out the charitable purpose of the organization in this section.

Line 13. **Total program expenses:** Add lines 11-12.

Instructions for Part IV— Management, General and Fundraising Expenses

Line 14. **Program expenses:** Enter the total amount of program expenses from part III, line 13.

Line 15. **Event fundraising expenses:** Enter the total expenses for all special events and contracts conducted by the organization or on its behalf which are listed in part I. **This number should match the number from page 1, part I, box 12E.**

Line 16. **Fundraising expenses:** Enter costs incurred in soliciting contributions, gifts, and grants. These expenses include, but are not limited to, cost of printing and mailing solicitation materials as well as the cost of purchasing merchandise to solicit contributions. **This number should not include any of the amounts listed on line 15.**

Line 17. **Payments to related organizations:** Enter any payments, including dues, made to related state or national organizations.

Line 18. **Salaries and other compensation:** Enter amounts paid for salaries or other compensation to officers and employees. *If a portion of these expenses relate to program services or fundraising, a reasonable allocation should be made among those functions.*

Line 19. **Management and general expenses:** Enter amounts spent on the overall management of the organization. These expenses include, but are not limited to, costs of rent, utilities, bank fees, meetings, insurance and office administration and management. *If a portion of these expenses relate to program services or fundraising, a reasonable allocation should be made among those functions.*

Line 20. **Professional fees and other payments to independent contractors:** Enter the amounts spent on legal and accounting services that are not related to program or fundraising expenses.

Line 21. **Other expenses:** Enter any expenses not listed above.

Line 22. **Total expenses:** Add lines 14 through 21.

Line 23. **Excess or (deficit) for the year:** Enter the difference between line 22 and line 10. If line 22 is greater than line 10, enter the difference in parentheses.

Line 24. **Fund balances/net worth at the beginning of the fiscal year:** Enter the prior year's fund balance or net worth. This number should match the amount you reported on the prior year's return.

Line 25. **Changes in fund balances/net worth:** Please attach an explanation of changes in net assets or fund balances between the beginning and end of the year that are not included in the amount listed on line 22. Amounts here include, but are not limited to, adjustments of earlier years' activities (such as losses on uncollected pledges, refunds of contributions and program service revenue and reversal of grant expenses, as well as unrealized gains and losses on investments).

Line 26. **Fund balances/net worth at the end of the fiscal year:** Add lines 23 through 25.

Instructions for Part V— Balance Sheet

Line 27. **Total assets:** This amount should include the fund balance/net worth listed on line 26 along with the value of any other cash or savings, and the book value of investments, land, building and other assets.

Line 28. **Total liabilities:** This amount includes items such as accounts payable, grants payable, mortgages or other loans payable.

Line 29. **Net assets or fund balances at end of year:** Subtract line 28 from line