

		POB	LIC DISCL						-
	0	00	Retur	n of Org	ganizatio	n Exempt l	From li	ncome Tax	OMB No. 1545-0047
Forr	n 9 3	90						ept private foundatio	ns) 2020
			Do	not enter soc	ial security num	bers on this form	as it may b	e made public.	Open to Public
Depa Intern	rtment of al Reven	f the Treasury nue Service		Go to www.irs	.gov/Form990 f	or instructions and	d the latest	information.	Inspection
AF	or the	e 2020 calend	lar year, or tax ye	ar beginning	NOV 1,	2020 and	ending O	CT 31, 2021	
	heck if	C Name o	f organization					D Employer identifi	cation number
а	pplicable	e:	0						
	Addres change	GATE	WAYS MUSI	C FESTI	VAL, INC	•			
	Name change	e Doing b	usiness as					16-15628	73
	Initial return	U	r and street (or P.C), box if mail is n	not delivered to stre	et address)	Room/suite	E Telephone numbe	r
	Final return/	26 G	IBBS STRE			,		585-232-	
	termin- ated		own, state or prov		and ZIP or foreid	on postal code		G Gross receipts \$	436,343.
	Amend return		ESTER, NY			5 I		H(a) Is this a group re	
	Application		nd address of prir		LEE KOONC	E		for subordinates	
	pendin		AS C ABOV					H(b) Are all subordinates in	
IT	ax-exe	empt status:		501(c) () 🗲 (insert n	o.) 4947(a)(1)	or 527	1	list. See instructions
			GATEWAYSM				01 021	H(c) Group exemptio	
			X Corporation	Trust	Association	Other ►	I Vear		VI State of legal domicile: NY
Pa		Summary			7100001411011				
				a's mission or l	most significant (octivitios: THE	ORGANT	ZATION'S MI	OT ST NOTES
e		CONNECT			FESSTONA		T. MIIST	CIANS OF AF	RTCAN
Activities & Governance		Check this bo						than 25% of its net as	
/err			•	-		·			14
30			ting members of t		• •				14
ۍ مې						y (Part VI, line 1b)		·····	0
ies						art V, line 2a)			40
tivit									0.
Act					rom Part VIII, column (C), line 12 ome from Form 990-T, Part I, line 11				
<u>b</u>		Net unrelated	business taxable	Income from H					
					orm 990-T, Part	I, line 11			0.
								Prior Year	Current Year
an	8	Contributions	and grants (Part \	VIII, line 1h)				Prior Year 246,557.	Current Year 427,879.
/enue	8 9	Contributions Program servi	and grants (Part \ ice revenue (Part \	/III, line 1h) /III, line 2g)				Prior Year 246,557. 0.	Current Year 427,879. 0.
Revenue	8 9 10	Contributions Program servi Investment ind	and grants (Part \ ice revenue (Part \ come (Part VIII, cc	VIII, line 1h) VIII, line 2g) Jumn (A), lines	3, 4, and 7d)		·····	Prior Year 246,557. 0. 37.	Current Year 427,879. 0. 15.
Revenue	8 9 10 11	Contributions Program servi Investment in Other revenue	and grants (Part \ ice revenue (Part \ come (Part VIII, co e (Part VIII, columr	/III, line 1h) /III, line 2g) blumn (A), lines n (A), lines 5, 6	; 3, 4, and 7d) d, 8c, 9c, 10c, ar	nd 11e)	······	Prior Year 246,557. 0. 37. 328.	Current Year 427,879. 0. 15. 8,449.
Revenue	8 9 10 11 12	Contributions Program servi Investment in Other revenue Total revenue	and grants (Part \ ice revenue (Part \ come (Part VIII, cc e (Part VIII, columr - add lines 8 throu	/III, line 1h) /III, line 2g) blumn (A), lines n (A), lines 5, 60 ugh 11 (must e	3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co	nd 11e) Jumn (A), line 12)		Prior Year 246,557. 0. 37. 328. 246,922.	Current Year 427,879. 0. 15. 8,449. 436,343.
Revenue	8 9 10 11 12	Contributions Program servi Investment ind Other revenue Total revenue Grants and sin	and grants (Part \ ice revenue (Part \ come (Part VIII, co e (Part VIII, columr <u>- add lines 8 throu</u> milar amounts paid	VIII, line 1h) VIII, line 2g) Dumn (A), lines D (A), lines 5, 60 Dugh 11 (must e d (Part IX, colu	3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3)	nd 11e) Jumn (A), line 12)		Prior Year 246,557. 0. 37. 328. 246,922. 0.	Current Year 427,879. 0. 15. 8,449. 436,343. 0.
Revenue	8 9 10 11 12 13 14	Contributions Program servi Investment ind Other revenue Total revenue Grants and sin Benefits paid	and grants (Part) ice revenue (Part) come (Part VIII, co e (Part VIII, columr - add lines 8 throu milar amounts paid to or for members	VIII, line 1h) VIII, line 2g) Jumn (A), lines In (A), lines 5, 6 Jugh 11 (must e d (Part IX, colur G (Part IX, colur	: 3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co Imn (A), lines 1-3) mn (A), line 4)	nd 11e) Jumn (A), line 12)		Prior Year 246,557. 0. 37. 328. 246,922. 0. 0.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0.
	8 9 10 11 12 13 14 15	Contributions Program servi Investment in Other revenue <u>Total revenue</u> Grants and sin Benefits paid Salaries, othe	and grants (Part) ice revenue (Part) come (Part VIII, co e (Part VIII, columr <u>- add lines 8 throu</u> milar amounts paid to or for members r compensation, e	VIII, line 1h) VIII, line 2g) Jumn (A), lines n (A), lines 5, 60 ugh 11 (must e d (Part IX, colur enployee bene	3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3) mn (A), line 4) ifits (Part IX, colu	nd 11e) olumn (A), line 12)) mn (A), lines 5-10)		Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0.
	8 9 10 11 12 13 14 15 16a	Contributions Program servi Investment in Other revenue <u>Total revenue</u> Grants and sin Benefits paid Salaries, othe Professional f	and grants (Part \ ice revenue (Part \ come (Part VIII, courr e (Part VIII, column <u>- add lines 8 throu</u> milar amounts paid to or for members r compensation, e undraising fees (P	VIII, line 1h) VIII, line 2g) Dumn (A), lines (A), lines 5, 6d ugh 11 (must e d (Part IX, colu (Part IX, colur employee bene art IX, column	3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3) mn (A), line 4) fits (Part IX, colu (A), line 11e)	nd 11e) Jumn (A), line 12)) mn (A), lines 5-10)		Prior Year 246,557. 0. 37. 328. 246,922. 0. 0.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0.
	8 9 10 11 12 13 14 15 16a b	Contributions Program servi Investment in Other revenue <u>Total revenue</u> Grants and sin Benefits paid Salaries, othe Professional f Total fundrais	and grants (Part \ ice revenue (Part \ come (Part VIII, courr - add lines 8 throu milar amounts paid to or for members r compensation, e undraising fees (Par	VIII, line 1h) VIII, line 2g) Dumn (A), lines 5, 6d ugh 11 (must e d (Part IX, colur employee bene lart IX, column (E	3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3) mn (A), line 4) fits (Part IX, colu (A), line 11e)), line 25)	nd 11e) Jumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u>	37.	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0.
Expenses Revenue	8 9 10 11 12 13 14 15 16a b 17	Contributions Program servi Investment in Other revenue <u>Total revenue</u> Grants and sin Benefits paid Salaries, othe Professional f Total fundrais Other expense	and grants (Part V ice revenue (Part V come (Part VIII, column - add lines 8 throu milar amounts paie to or for members r compensation, e undraising fees (Par ing expenses (Par es (Part IX, column	VIII, line 1h) VIII, line 2g) Jumn (A), lines 5, 6 Jugh 11 (must e d (Part IX, colur employee bene fart IX, column t IX, column (E n (A), lines 11a	a, 4, and 7d) d, 8c, 9c, 10c, ar aqual Part VIII, co imn (A), lines 1-3) mn (A), line 4) fits (Part IX, colu (A), line 11e)), line 25) ▶ I-11d, 11f-24e)	nd 11e) Jumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u>	37.	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0. 0. 0. 180,295.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0. 0. 0. 0. 0. 0.
	8 9 10 11 12 13 14 15 16a b 17 18	Contributions Program servi Investment in Other revenue Grants and sin Benefits paid Salaries, othe Professional f Total fundrais Other expense Total expense	and grants (Part V ice revenue (Part V come (Part VIII, column - add lines 8 throu milar amounts paid to or for members r compensation, e undraising fees (P ing expenses (Par es (Part IX, column es. Add lines 13-17	VIII, line 1h) VIII, line 2g) Jumn (A), lines 5, 6 ugh 11 (must e d (Part IX, colur employee bene tart IX, column t IX, column (E n (A), lines 11a 7 (must equal F	3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3) mn (A), line 4) ifits (Part IX, colu (A), line 11e)), line 25) ►11d, 11f-24e) Part IX, column (A	nd 11e) olumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u> A), line 25)	37.	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0. 0. 180,295. 180,295.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0. 0. 0. 0. 0. 440,385. 440,385.
Expenses	8 9 10 11 12 13 14 15 16a b 17 18 19	Contributions Program servi Investment in Other revenue Grants and sin Benefits paid Salaries, othe Professional f Total fundrais Other expense Total expense	and grants (Part V ice revenue (Part V come (Part VIII, column - add lines 8 throu milar amounts paid to or for members r compensation, e undraising fees (P ing expenses (Par es (Part IX, column es. Add lines 13-17	VIII, line 1h) VIII, line 2g) Jumn (A), lines 5, 6 ugh 11 (must e d (Part IX, colur employee bene tart IX, column t IX, column (E n (A), lines 11a 7 (must equal F	3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3) mn (A), line 4) ifits (Part IX, colu (A), line 11e)), line 25) ►11d, 11f-24e) Part IX, column (A	nd 11e) Jumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u>	37.	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0. 0. 180,295. 180,295. 66,627.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0. 0. 0. 440,385. 440,385. -4,042.
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Expenses	8 9 10 11 12 13 14 15 16a b 17 18 19	Contributions Program servi Investment in Other revenue Total revenue Grants and sin Benefits paid Salaries, othe Professional f Total fundrais Other expense Revenue less Total assets (f	and grants (Part V ice revenue (Part V come (Part VIII, column - add lines 8 throu milar amounts paid to or for members r compensation, e undraising fees (Par ing expenses (Par es (Part IX, column es. Add lines 13-17 expenses. Subtra Part X, line 16)	VIII, line 1h) VIII, line 2g) Jumn (A), lines 5, 6d ugh 11 (must e d (Part IX, colur employee bene art IX, column t IX, column (E n (A), lines 11a 7 (must equal F ct line 18 from	a 3, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3) mn (A), line 4) fits (Part IX, colu (A), line 11e) (A), line 25) -11d, 11f-24e) Part IX, column (A line 12	nd 11e) olumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u> A), line 25)	37. Be	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0. 0. 180,295. 190,000.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0. 0. 440,385. 440,385. 440,385. -4,042. End of Year 1,546,236.
Expenses	8 9 10 11 12 13 14 15 16a b 17 18 19	Contributions Program servi Investment in Other revenue Total revenue Grants and sin Benefits paid Salaries, othe Professional f Total fundrais Other expense Revenue less Total assets (f Total liabilities	and grants (Part V ice revenue (Part V come (Part VIII, column - add lines 8 throu milar amounts paid to or for members r compensation, e undraising fees (Part ing expenses (Part es (Part IX, column es. Add lines 13-17 expenses. Subtra Part X, line 16) s (Part X, line 26)	VIII, line 1h) VIII, line 2g) VIII, lines 2g, (A), lines 5, 6d ugh 11 (must e d (Part IX, colur employee bene fart IX, column t IX, column (E n (A), lines 11a 7 (must equal F ct line 18 from	a, 4, and 7d) d, 8c, 9c, 10c, ar equal Part VIII, co imn (A), lines 1-3) mn (A), line 4) fits (Part IX, colu (A), line 11e) (A), line 25) -11d, 11f-24e) Part IX, column (A line 12	nd 11e) Jumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u> A), line 25)	37. Be	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0. 180,295. 190,295. 190,295. 190,295. 190,295. 190,295. 190,295. 190,295. 190,295. 190,295. 190	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0. 0. 440,385. 440,385. 440,385. -4,042. End of Year 1,546,236. 1,323,459.
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De De Regension de Lund Balances Expenses	8 9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 21 22 11 22 11 22 11 22	Contributions Program servi Investment in Other revenue Total revenue Grants and sin Benefits paid Salaries, othe Professional f Total fundrais Other expense Revenue less Total assets (f Total liabilities Net assets or Signature Ities of perjury,	and grants (Part V ice revenue (Part V come (Part VIII, column <u>- add lines 8 throu</u> milar amounts paid to or for members r compensation, e undraising fees (P ing expenses (Par es (Part IX, column es. Add lines 13-17 expenses. Subtra Part X, line 16) s (Part X, line 16) s (Part X, line 26) fund balances. Su BIOCK	VIII, line 1h) VIII, line 2g) Jumn (A), lines 5, 6 ugh 11 (must e d (Part IX, colu employee bene art IX, column t IX, column (E n (A), lines 11a 7 (must equal F ct line 18 from Ubtract line 21 examined this mare (other than		nd 11e) Jumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u> A), line 25)	37. Be	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0. 0. 0. 180,295. 180,295. 180,295. 66,627. ginning of Current Year 411,506. 184,687. 226,819.	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0. 0. 0. 0. 440,385. 440,385. -4,042. End of Year 1,546,236. 1,323,459. 222,777.
De De Regension de Lund Balances Expenses	8 9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 21 22 11 22 11 22 11 22	Contributions Program servi Investment in Other revenue Grants and sin Benefits paid Salaries, othe Professional f Total fundrais Other expense Revenue less Total assets (f Total liabilities Net assets or Signature Ities of perjury, t, and complete	and grants (Part V ice revenue (Part V come (Part VIII, column <u>- add lines 8 throu</u> milar amounts paid to or for members r compensation, e undraising fees (P ing expenses (Par es (Part IX, column es. Add lines 13-17 expenses. Subtra Part X, line 16) s (Part X, line 16) s (Part X, line 26) fund balances. Su e Block I declare that I have . Declaration of prep	VIII, line 1h) VIII, line 2g) Jumn (A), lines 5, 6 ugh 11 (must e d (Part IX, colu employee bene art IX, column t IX, column (E n (A), lines 11a 7 (must equal F ct line 18 from Ubtract line 21 examined this mare (other than		nd 11e) Jumn (A), line 12) mn (A), lines 5-10) <u>154, 7</u> A), line 25) companying schedule	37. Be	Prior Year 246,557. 0. 37. 328. 246,922. 0. 0. 0. 0. 180,295. 180,295. 180,295. 180,295. 180,295. 180,295. 180,295. 226,819. ents, and to the best of my has any knowledge. SEPTEMB	Current Year 427,879. 0. 15. 8,449. 436,343. 0. 0. 0. 0. 440,385. 440,385. 440,385. -4,042. End of Year 1,546,236. 1,323,459. 222,777.
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	PITTSFORD, NY 14534	Phone no. 585 -	-381-1000	1
May the IR	S discuss this return with the preparer shown above? See instructions		X Yes	No
032001 12-23	-20 LHA For Paperwork Reduction Act Notice, see the separate in	nstructions.	Form 990	(2020)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form **990** (2020)

Form	990 (2020) GATEWAYS MUSIC FESTIVAL, INC. 16-1562873 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	THE ORGANIZATION'S MISSION IS TO CONNECT AND SUPPORT PROFESSIONAL
	CLASSICAL MUSICIANS OF AFRICAN DESCENT AND INSPIRE AND ENLIGHTEN
	COMMUNITIES THROUGH THE POWER OF PERFORMANCE.
2	Did the organization undertake any significant program services during the year which were not listed on the
2	
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$266,889. including grants of \$) (Revenue \$8,449.)
	ORGANIZING ANNUAL CLASSICAL MUSICAL FESTIVAL FOR THE FURTHERANCE OF THE
	ORGANIZATION'S MISSION. DURING THE YEAR, THE ORGANIZATION RECEIVED
	DONATED SERVICES AND SUPPLIES TOTALLING \$121,618.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	() () () () () () () () () () () () () () () () () (
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 266,889.

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 Form 990 (2020)
 GATEWAYS MUSIC FESTIVAL, INC.

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			77
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	<u>11a</u>		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			x
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		x
A	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in	11d		x
~	Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			- 23
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120		12a		x
h	Schedule D, Parts XI and XII			<u> </u>
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

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 Form 990 (2020)
 GATEWAYS MUSIC FESTIVAL, INC.

 Part IV
 Checklist of Required Schedules (continued)

22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? if 'Yes,' complete Schedule I, Parts I and III 22 X 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, furstees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J 23 X 24a Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensated employees? If 'Yes,' complete Schedule J 24a X 24b Did the organization invest as usued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'' go to line 25a 24a Z4d Z4d Z4d 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24d Z4d Z4d 26 Did the organization avant that it engaged in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a X 26 Did the organization avant that it engaged in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a X 27 Did the organization avant that it engaged in an excess benefit transaction with a disqualified person during the year? and that the transaction with an excessith end to roms on englowe thereo, a grant s	23 Dia anu 24a Dia 24a Dia 24a Dia 25a C 25a Se tra 25a Se tra 25a C 27 Dia 27 Dia 28 Wa ins 28 Wa ins 28 Va ins 28 Va 20	art IX, column (A), line 2? <i>If</i> "Yes," <i>complete Schedule I, Parts I and III</i>	23 24a		x
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, furcates, key employees, and highest compensated employees? If "Yes," complete Schedule J. 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a 24a Z4b Z4b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24a Z4b Z4b Did the organization anism an ecrow account other than a refunding stary time during the year? Z4d Z4d Z4d 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organizations. Did the organization engage in a excess benefit transaction with a disqualified person during the year? Z4d Z4d Z5a 25a Section 501(c)(3), 501(c)(4), and 501(c)(20) organization's bein'to ranscess ben't a disqualified person during the year? Yes, "complete Schedule L, Part I Z5a X 27 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Z7 X 27	23 Dia an 324a Dia 32 5 5 5 6 Dia 6 Dia 7 7 6 Dia 7 7 7 7 7 8 8 8 8 8 8 9 7 7 7 7 8 8 8 8	d the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current ad former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i> <i>chedule J</i> d the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the st day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i> <i>chedule K. If</i> "No," <i>go to line 25a</i> d the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? d the organization maintain an escrow account other than a refunding escrow at any time during the year to defease <i>ny</i> tax-exempt bonds?	23 24a		x
 23 Did the organization answer "Yes" to Part VII. Section A. Line 3. 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a. 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24c Did the organization and that an escrew account other than a refunding escrew at any time during the year? 24d Did the organization acts as an "on behalf of" issue for bonds outstanding at any time during the year? 24d Did the organization acts at an "on behalf of" issue for bonds outstanding at any time during the year? 24d Did the organization aware that engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization is a prior year, and that the therasaction has not been reported on any of the organization spice Schedule L, Part I 25b X. 26 Did the organization orparity any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (including an employee thereof) or family on these persons? If "Yes," complete Schedule L, Part II 27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part II) 28 A structure to former officer, director, trustee, key employee, creator or founder, substantial contributor? If "Yes," complete Schedule L, Part IV 28	23 Dia an 324a Dia 32 5 5 5 6 Dia 6 Dia 7 7 6 Dia 7 7 7 7 7 8 8 8 8 8 8 9 7 7 7 7 8 8 8 8	d the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current ad former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i> <i>chedule J</i> d the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the st day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i> <i>chedule K. If</i> "No," <i>go to line 25a</i> d the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? d the organization maintain an escrow account other than a refunding escrow at any time during the year to defease <i>ny</i> tax-exempt bonds?	24a		
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 27 Did the organization provide a grant or other assistance to any current of former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27 Dia cre en 28 Wa ins a A a "Ye b A f	former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. 28 A family member of envore than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 X 20 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I. 29 Did the organization inguidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 20 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I. 30 X 31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes," to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? b If "Yes," to line 35a, did the organization meke any transfers to an exempt non-charitable related organization? 35a Section 501(c)(3) organization	27 Dia cre en 28 Wa ins a A a "Ye b A f	ontrolled entity or family member of any of these persons? If "Yes," complete Schedule L. Part II	26		Х
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	wit	thin the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
	36 Se	ection 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
If "Yes," complete Schedule R, Part V, line 2	lf "		36		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37 Dic	Yes, " complete Schedule R, Part V, line 2			
and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	an	d the organization conduct more than 5% of its activities through an entity that is not a related organization	37		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		d the organization conduct more than 5% of its activities through an entity that is not a related organization			l i
Note: All Form 990 filers are required to complete Schedule O		d the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> d the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			1
UARTIN Statements Decending Athen US Educe and Tay Compliance	Part V	d the organization conduct more than 5% of its activities through an entity that is not a related organization ad that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> d the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? ote: All Form 990 filers are required to complete Schedule O		X	

Check if Schedule O contains a response or note to any line in this Part V	

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	20			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portat	ole gaming			
	(gambling) winnings to prize winners?			1c		
					000	

	990 (2020) GATEWAYS MUSIC FESTIVAL, INC. 16	-1562	873	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				
		1		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	0			
	filed for the calendar year ending with or within the year covered by this return	0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)				v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a				v
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		-		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization so				
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts				
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				37
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		_		
			7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year		_		v
-	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		XX
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		<u> </u>
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as requi		7g		
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1	098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		•		
•	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		0.		
	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12 10a 10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders 11a				
D	Gross income from other sources (Do not net amounts due or paid to other sources against				
10-	amounts due or received from them.)		10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
h.	Note: See the instructions for additional information the organization must report on Schedule O.				
D	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans 13b				
	Enter the amount of reserves on hand		14-		x
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	ſ	45		x
	excess parachute payment(s) during the year?		15		21
16	If "Yes," see instructions and file Form 4720, Schedule N.	ľ	16		х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		10		

Form 990 (2020

GATEWAYS MUSIC FESTIVAL, INC.

<u>16-1562873</u> Page 6

X

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI	 	Χ
Section A. Governing Body and Management		
	 Yes	No

1a	Enter the number of voting members of the governing body at the end of the tax year 14			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 14			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	

11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	A	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed \blacktriangleright NY

18	Section 6104 requires	an organization to make its F	orms 1023 (1024 or 1024-/	A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	for public inspection.	Indicate how you made these	available. Check all that ap	oply.	
	X Own website	Another's website	X Upon request	Other (explain on Schedule O)	

19	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	conflict of interest policy,	and financial
	statements available to the public during the tax year.		

20	State the name,	address, and te	ephone number of the	e person	who possesses the organization's books and records	
	LEE KOON	CE - 585	-232-6106			
	26 GIBBS	STREET,	ROCHESTER,	NY	14604	

GIBBS STREET, ROCHESTER, N	Y 1	.4604
----------------------------	-----	-------

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do		Pos		۱ than d	ane	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer ar		recio	n/trus	lee)	from	from related	other
	(list any hours for	irecto						the	organizations	compensation from the
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	organizations	ruste	al trus		yee	mpen				and related
	below	Individual trustee or director	Institutional trustee	5	Key employee	est co oyee	er			organizations
	line)	Indiv	Instit	Officer	Keye	Highest compensated employee	Former			-
(1) KEARSTIN PIPER BROWN	1.00									
CHAIR		Х		Х				0.	0.	0.
(2) ALEXANDER LAING	1.00									
VICE CHAIR		Х		Х				0.	0.	0.
(3) ROGER SMITH	1.00									
TREASURER		Х		Х				0.	0.	0.
(4) TONI-MARIE MONTGOMERY	1.00									
SECRETARY		Х		Х				0.	0.	0.
(5) LEE KOONCE	40.00									
PRESIDENT AND ARTISTIC DIR		Х		Х				0.	Ο.	0.
(6) JAMES NORMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(7) AMADI AZIKIWE	1.00									
DIRECTOR		Х						0.	0.	0.
(8) CAROLYNE BLOUNT	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JAMAL J. ROSSI	1.00									
DIRECTOR		Х						0.	0.	0.
(10) FR. ROBERT WERTH	1.00									
DIRECTOR		Х						0.	0.	0.
(11) SONIA JAMES-WILSON	1.00									
DIRECTOR		Х						0.	0.	0.
(12) DOUGLAS W. PHILLIPS	1.00									
DIRECTOR		Х						0.	0.	0.
(13) KATE WASHINGTON	1.00									
DIRECTOR		Х						0.	0.	0.
(14) JESSE ROSEN	1.00									
DIRECTOR		Х						0.	0.	0.
			-			-				
		•								
		1						1		

Form 990 (2020) GATEWAYS	MUSIC F	ES	TI	VA	L,	I	NC	•	16-15	628	373	Pa	age 8
Part VII Section A. Officers, Directors, Trus		oloy I	ees,			ghes	t C		````				
(A) Name and title	(B) Average hours per	box	not c , unles	ss per	ition more rson i	than c s both	an	(D) Reportable compensation	(E) Reportable compensatior	ן ר		(F) timate iount o	
	week (list any hours for related organizations below line)	ee or director	Institutional trustee	Officer		Highest compensated	Former (a	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS		comp fro orga anc	other pensat om the anizati I relate nizatio	e ion ed
										_			
										_			
										+			
1b Subtotal c Total from continuation sheets to Part V								0.		0.			0.
d Total (add lines 1b and 1c)								0.		0.			0.
2 Total number of individuals (including but n compensation from the organization ►	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable			<u>.</u>	0
3 Did the organization list any former officer	,					'		, , , ,	,			Yes	No
 line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su and related organizations greater than \$150 	um of reportabl	e co	mpe	ensa	tion	and	oth	ner compensation from t	he organization		3		X X
 Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," con 	accrue comper	nsati	on fr	om	any	unre	elate	ed organization or individ	dual for services		5		X
Section B. Independent Contractors													
Complete this table for your five highest co the organization. Report compensation for								the organization's tax y		ensati			
(A) Name and business	address	N	ONE	3				(B) Description of s	ervices	Co	(C omper		1
2 Total number of independent contractors (i \$100.000 of compensation from the organi	0	ot lin	nitec	d to f	thos (ted	above) who received me	ore than				

	n 990 (i			MUSI	C FESTIVA	AL, INC.		16-1562	873 Page 9
Pa	rt VII	Statement of Re	venue						
		Check if Schedule O	contains a	response	or note to any lin		(B)	(C)	
						(A) Total revenue	Related or exempt		(D) Revenue excluded
								business revenue	from tax under sections 512 - 514
									Sections 512 - 514
ints	1 a	Federated campaigns		1a					
Gra	d			1b					
Contributions, Gifts, Grants and Other Similar Amounts	C d	• • • • • • • • • • • • • • • • • • • •		1c 1d					
Gil	a	Related organizations							
Sin's	e f	Government grants (contr All other contributions, gifts,		1e					
utic		similar amounts not included		1f	427,879.				
trib Oth				1g \$					
no	g	Total. Add lines 1a-1f				427,879.			
0 0		Total. Add lines ta ti			Business Code	427,079.			
	2 a								
Program Service Revenue	z a b								
Ser	c								
ver Ver	d								
gra Re	e								
Pro	f	All other program service	revenue						
_	q				-				
	3	Investment income (includ			ţ.				
	•	other similar amounts)				15.			15.
	4	Income from investment of							
	5	Royalties		-					
	-	,	(i) Real	(ii) Personal				
	6 a	Gross rents	6a						
	b		6b						
	с	Rental income or (loss)	6c						
	d	Net rental income or (loss							
		Gross amount from sales of		ecurities	(ii) Other				
		assets other than inventory	7a						
	b	Less: cost or other basis							
ne		and sales expenses	7b						
venue	с	Gain or (loss)	7c						
		Net gain or (loss)							
Other Re	8 a	Gross income from fundraisi	ng events (r	not					
₹		including \$		of					
		contributions reported on	,						
		Part IV, line 18							
		Net income or (loss) from			<u></u>				
	9 a	Gross income from gamin							
		Part IV, line 19							
		Less: direct expenses							
		Net income or (loss) from	• •		>				
	10 a	Gross sales of inventory, I							
		and allowances			1				
		Less: cost of goods sold							
	С	Net income or (loss) from	sales of Inv	ventory					
sn					Business Code 900099	8,449.	8,449.		
leo(11 a				300033	0,449.	0,449.		
Miscellaneous Revenue	b								
sce Bev	C d								
ž	d	All other revenue				8,449.			
	е 12	Total revenue. See instruction				436,343.	8,449.	0.	15.
	-	I JUNI I JANUNG. OFF III JUUUUU				,		· · ·	

Form 990 (2020) GAIEWAIS MO	SIC LESIIVAL,	INC.	10
Part IX Statement of Functional Expense	es		
Section 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	r organizations must co	mplete column (A).
Check if Schedule O contains a respor	ise or note to any line in t	his Part IX	

		FESTIVAL,	INC.
-unctional Exp	penses		

	Check if Schedule O contains a respons	se or note to any line in	this Part IX	(0)	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
0	Payroll taxes				
1	Fees for services (nonemployees):				
а	Management	132,739.	132,739.		
b					
с	Accounting				
d					
е					
f	Investment management fees				
g					
3	column (A) amount, list line 11g expenses on Sch O.)	211,564.	64,484.		147,080
12	Advertising and promotion	3,618.	3,618.		,
13	Office expenses	2,239.	159.	2,080.	
14	Information technology	_,,		_,	
15	Royalties				
16	Occupancy	2,175.	2,175.		
17		10,568.		10,568.	
8	Travel Payments of travel or entertainment expenses	10,500.		10,500.	
0	for any federal, state, or local public officials				
0	· · · · · · ·	929.		929.	
9	Conferences, conventions, and meetings	549•		• • • •	
20	Interest				
21	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,832.		1,832.	
3	Insurance	1,034.		1,034.	
4	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	24 500	24 500		
	PHOTOGRAPHY AND ARTWORK	34,522.	34,522.		
b		21,225.	21,225.		
С	FUNDRAISING COSTS	7,657.			7,657
d		7,071.	7,071.	2 250	
	All other expenses	4,246.	896.	3,350.	
5	Total functional expenses. Add lines 1 through 24e	440,385.	266,889.	18,759.	154,737
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Faure 990 (00)

Form 990 (2020)
Part IX State

GATEWAYS	MUSIC	FESTIVAL,	INC.

16-1562873 Page 11

		Check if Schedule O contains a response or n	ote to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		332,452.	1	1,103,004.
Assets	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		68,680.	4	433,150.
	5	Loans and other receivables from any current				
		trustee, key employee, creator or founder, sub	ostantial contributor, or 35%			
		controlled entity or family member of any of th	lese persons		5	
	6	Loans and other receivables from other disqua	alified persons (as defined			
		under section 4958(f)(1)), and persons describ	ed in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Description of the second state for second state second		10,374.	9	10,082.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	. 10a			
	b	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities		11		
	12	Investments - other securities. See Part IV, line		12		
	13	Investments - program-related. See Part IV, lin		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must ed		411,506.	16	1,546,236.
	17	Accounts payable and accrued expenses \dots		131,046.	17	148,034.
	18	Grants payable		18		
	19	Deferred revenue		53,641.	19	1,175,425.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complet			21	
es	22	Loans and other payables to any current or fo	rmer officer, director,			
iliti		trustee, key employee, creator or founder, sub	ostantial contributor, or 35%			
Liabilities		controlled entity or family member of any of th	-		22	
	23	Secured mortgages and notes payable to unre			23	
	24	Unsecured notes and loans payable to unrelate			24	
	25	Other liabilities (including federal income tax, p				
		parties, and other liabilities not included on lin	es 17-24). Complete Part X			
				104 607	25	1 202 450
	26		27	184,687.	26	1,323,459.
s		Organizations that follow FASB ASC 958, cl	heck here 🕨 👗			
JCe		and complete lines 27, 28, 32, and 33.		0.2 0.00		222 777
alar	27			<u>92,898.</u> 133,921.	27	<u> 222,777.</u> 0.
Ä	28			155,921.	28	U •
ň		Organizations that do not follow FASB ASC	958, check here			
л Т		and complete lines 29 through 33.				
its (29	Capital stock or trust principal, or current func			29	
SSe	30	Paid-in or capital surplus, or land, building, or			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		226,819.	31	222 222
Ne	32	Total net assets or fund balances			32	222,777.
	33	Total liabilities and net assets/fund balances		411,506.	33	1,546,236.

Form 990 (2020)
Part X Balance Sheet

Form **990** (2020)

032012	12-23-20		

4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	<u> </u>	0,0	19.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	22	2,7	77.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule 0	D.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sing	gle Audit			

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form 990 (2	2020)	GATEWAYS	MUSIC	FESTIVAL,	INC.	
Part XI	Reconciliation	of Net Assets	;			

Х

3a

3b

Form 990 (2020)

Т

Check if Schedule O contains a response or note to any line in this Part XI

De	column (B)) rt XII Financial Statements and Reporting	10	222,777.
IU II			222 777
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		
	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
8	Prior period adjustments	8	
7	Investment expenses	7	
6	Donated services and use of facilities	6	
5	Net unrealized gains (losses) on investments	5	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	226,819.
	Revenue less expenses. Subtract line 2 from line 1	3	-4,042.
2	Total expenses (must equal Part IX, column (A), line 25)	2	440,385.
1	Total revenue (must equal Part VIII, column (A), line 12)	1	436,343.

SCHEDULE A

Department of the Treasury

(Form 990 or 990-EZ)

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.

OMB No. 1545-0047	
2020	

Open to Public

nternal Re	evenue Service		Go to www.irs.go	/Form990 for instruction	ons and th	ne latest ir	nformation.		Inspection
Name o	of the organizati							Employer	r identification number
		GATE	WAYS MUSIC	FESTIVAL, I	NC.			1	6-1562873
Part	Reason			(All organizations must o		his part.) S	ee instruction		
The org				For lines 1 through 12, c					
1		•		n of churches described		,	I)(A)(i).		
2				Attach Schedule E (Forn					
3				anization described in se			ii).		
4	•	•		njunction with a hospital				(iii), Enter	the hospital's name,
	city, and stat	te:							
5	•		or the benefit of a co	llege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
			Complete Part II.)	с ,	•	, ,			
6				nental unit described in	section 17	70(b)(1)(A)	(v).		
7		-	-	ntial part of its support fi				e general i	public described in
	-		omplete Part II.)		0			0	
8	-			(1)(A)(vi). (Complete Par	t II.)				
9	-				-	ed in coniu	inction with a	land-grant	college
	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or								
	university:	-		, , , , , , , , , , , , , , , , , , ,		, ,	,	0	
10 X	An organizat	ion that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, an	d gross receipts from
	activities rela	ated to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment
	income and u	unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	sses acqui	red by the org	anization a	after June 30, 1975.
	See section	509(a)(2). (Cor	mplete Part III.)						
11	An organizat	ion organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	09(a)(4).		
12	An organizat	ion organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
	more publicly	y supported or	ganizations describe	d in section 509(a)(1) d	r section	509(a)(2).	See section &	509(a)(3).	Check the box in
	lines 12a thro	ough 12d that (describes the type o	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а	Type I. A s	supporting orga	nization operated, s	upervised, or controlled	by its sup	ported org	anization(s), ty	pically by	giving
	the suppor	ted organizatio	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	upporting
	organizatio	on. You must c	omplete Part IV, Se	ections A and B.					
b	Type II. A	supporting org	anization supervised	or controlled in connect	tion with it	s supporte	ed organizatio	n(s), by hav	/ing
	control or r	management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported
	organizatio	on(s). You mus	t complete Part IV,	Sections A and C.					
с	Type III fu	nctionally inte	grated. A supportin	g organization operated	in connec	tion with, a	and functional	ly integrate	ed with,
	its support	ed organization	n(s) (see instructions). You must complete I	Part IV, Se	ections A,	D, and E.		
d	Type III no	on-functionally	integrated. A supp	orting organization oper	ated in co	nnection w	vith its suppor	ted organiz	zation(s)
	that is not	functionally inte	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and	an attentiv	veness
	requiremer	nt (see instructi	ons). You must con	nplete Part IV, Sections	A and D,	and Part	v .		
е	Check this	box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type I	I, Type III	
	functionally	y integrated, or	Type III non-function	nally integrated supporti	ng organiz	ation.			
fΕ	nter the number	of supported of	organizations						
gР			about the supporte		(iv) to the erg	anization listed			
	(i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	in your govern	anization listed ing document?	(v) Amount of		(vi) Amount of other
	organization	.1		above (see instructions))	Yes	No	support (see in	structions)	support (see instructions)
						1			1

Schedule A (Form 990 or 990-EZ) 2020 GATEWAYS MUSIC FESTIVAL, INC. Part II Support Schedule for Organizations Described in Sections 170(b

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	ction A. Public Support		-				_
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization'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						
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						
	column (f)						
6							
		(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
		(4) 2010	(1) 2011	(0) 2010	(4) 2010		
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0							
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40	•••						
10	•						
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	ii ů					40	
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13	•	•				. , . ,	
Sec	tion C. Computation of Public	<u>o nere</u>	centade				
				colump (f))		14	%
			•	.,,			%
						· · · ·	
108							
h			-				
Ω							
47-							
1/8							
	-			-		-	
		0	•		•		
b		-					5 10% or
	· •						
 7 Amounts from line 4 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 partial on 							
18	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17	b, check this box a	and see instruction	IS 🕨 🛄

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020 GATEWAYS MUSIC FESTIVAL, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	166,044.	403,838.	307,629.	246,557.	427,879.	1551947.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	4,403.		27,744.	328.	8,449.	40,924.
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization'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	170,447.	403,838.	335,373.	246,885.	436,328.	1592871.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
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						0.
c	Add lines 7a and 7b						0.
8	Public support. (Subtract line 7c from line 6.)						1592871.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	170,447.	403,838.	335,373.	246,885.	436,328.	1592871.
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b 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 VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	170,447.	403,838.	335,373.	246,885.	436,328.	1592871.
14	First 5 years. If the Form 990 is for th	e organization's fir	rst, second, third, f	fourth, or fifth tax y	vear as a section 5	01(c)(3) organizatio	n,
						<u></u>	▶
Sec	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2020 (li	ine 8, column (f), di	ivided by line 13, c	olumn (f))			100.00 %
	Public support percentage from 2019					16	100.00 %
	ction D. Computation of Inves		¥				
17	Investment income percentage for 20)20 (line 10c, colun	nn (f), divided by lir	ne 13, column (f))		17	.00 %
	Investment income percentage from 2					18	%
19 a	33 1/3% support tests - 2020. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2019. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio	n did not check a l	box on line 14 19a	a or 19b check th	is box and see ins	tructions	

Schedule A (Form 990 or 990-EZ) 2020

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If* "Yes," *complete Part I of Schedule L (Form 990 or 990-EZ)*.
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If* "Yes." *complete Part I of Schedule L (Form 990 or 990-EZ).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If* "Yes," *provide detail in* **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2020 GATEWAYS MUSIC FESTIVAL, INC.

11 Has the organization accepted a gift or contribution from any of the following persons? Yes No 11 Has the organization accepted a gift or contribution from any of the following persons? Image: Control Content and one supported Control Control Conternation Control Control		rt IV Supporting Organizations (continued)	50207	<u> </u>	ige J
11 Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? b A family member of a person described in line 11a above? c A 35% controlled entity of a person described in line 11a above? d A 35% controlled entity of a person described in line 11a of 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations 10 bid the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regulary appoint or ellect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI howers during the tax year? If "No," describe in Part VI howers during the tax year. 2 bid the organization operate for the benefit of any supported organization? If "Yes," explain in Part VI how providing such benefit carried out the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the supported organization? If "Yes," explain in Part VI how control or management of the supporting Organizations. 2 were an apiority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the supporting Organizations. 2 bid the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's averant, bid as of the date of notification, and (ii) copies of the supporting organization, supported organizations, by the last d				Yes	No
 a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization? b A family member of a person described in line 11a above? c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization, describe how the power to regularly appoint or relocation the than draw the nore supported organization, describe how the power to regularly appoint or relocation the supported organization, describe how the powers or usported organization of the organization and what conditions or restrictors, if any, applied to such powers during the tax year. 2 Did the organization operate for the benefit of any supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organizations? 2 Exetton C. Type II Supporting Organizations 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization's usy ported organization. 2 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a control or managed the supporting organization. 2 Did the organization's durectors or trustees either (i) apophintd or relected by the suppo	11	Has the organization accepted a gift or contribution from any of the following persons?			
11c below, the governing body of a supported organization? 11a b A family member of a person described in line 11a above? 11b c A 395 controlled entity of a person described in line 11a or 11b above? // f"Yes" to line 11a, 11b, or 11c, provide delail in Part VI. 11c Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularize in Part VI how the supported organization's officers, directors, or trustees at all limes during the tax year? // No, "describe in Part VI how the supported organization's officers, directors, or trustees to appoint and/or remove officers, directors, or trustees were allocated among the supported organization, describe how the power to appoint and/or remove officers, directors, or trustees were allocated among the supported organization was to appoint and/or remove officers, directors, or trustees were allocated among the supported organization of the benefit carried out the purposes of the supported organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization? 2 2 Did the organization's directors or trustees during the tax year also a majority of the directors or trustees do the organization's directors or trustees do and the supporting Organization was vested in the same persons that controlled or managed the supporting organization (%)? If "No," describe in Part VI how control or managed the supporting Organization's appoint or goanization was vested in the same persons that controlled or managed the supporting Organization(%)? If "No," explain in Part VI how contr	а				
b A family member of a person described in line 11a above? 11b c A 35% controlled entity of a person described in line 11a or 11b above? // "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations 11c 11c 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? // "No," describe in Part VI how the supported organization and what controlled the organization and/brie controlled the organization and/brie controlled the organization and/brie controlled the supporting organization and/brie controlled the supporting organization and/brie controlled the supporting organization of the tax year. 1 2 Did the organization such bane enditions or restrictions, if any, applied to such powers during the tax year. 2 3 Were a majority of the organization's directors or trustees of the supported organization's (breat year. 2 4 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations. Yes 5 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization, by the last day of the fifth month of the organization for year. Yes			11a		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. Section B. Type I Supporting Organizations 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least and approximation's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's officers, activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization operated, supervised, or controlled the organization officers, increases and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated, supporting organizations officers, directors, or trustees were allocated among the supported organization (b) that operated, supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization? If "Yes," explain in Part VI how providing organization's directors or trustees during the tax year also a majority of the directors or trustees derived organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's upported organization, so that controlled the supporting organizations. Section D. All Type III Supporting Organizations by the last day of the fifth month of the organization's divertor, or trustees either (i) appointed or elected by the supported organization's organization's divertor, or trustees either (i) appointed organizations and (ii) copies of the organization's divertors, or trustees either (i) appointed organization's divertors, or trustees either (i) appointed organization's of the erganization was vested	b				
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Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization's officers, directors, or crustees the organization and more than one supported organization operate for the benefit of any supported organization and more than one supported organization operate for the benefit of any supported organization other than the supported organization of the organization operate or the benefit of any supported organization(s) that operated, supervised, or controlled the supporting organization(s) that operated, supervised, or controlled the supported organization(s) that operated, supervised, or controlled the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 1 Section C. Type II Supporting Organizations Yes No 1 Were a majority of the organization was vested in the same persons that controlled or managed the supporting organizations. 1 1 2 I No Yes No 1 User a majority of the organization was vested in the same persons that c	•		11c		
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Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, 2 Section C. Type II Supporting Organizations 2 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization is supported organization(s)? If "No," describe in Part VI how control or management of the supporting Organization was vested in the same persons that controlled or managed the supported organization(s)? 1 Section D. All Type III Supporting Organizations 1 1 Section D. All Type III Supporting Organizations 1 1 Vere any of the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's officers, directors, or trustees either (i) appointed or provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's officers, directors, or trustees either (i) appointed organization(s). 1 2 Were any of the organization during body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in line 2, above, did the organization's supported organization's have a significant voice in the organization's investment policies and in directing the use of the organization's 2	2	Did the organization operate for the benefit of any supported organization other than the supported			
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Section C. Type II Supporting Organizations Yes No 1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). I Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? I 2 Were any of the organization's officers, directors, or trustees either (i) appointed organization(s). I I 3 By reason of the relationship described in line 2, above, did the organization's supported organization's supported organization's investment policies and in directing the use of the organization's I I		Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
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1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations 1 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in line 2, above, did the organization's supported organization's investment policies and in directing the use of the organization's 2	Sec	tion C. Type II Supporting Organizations			
or trustees of each of the organization's supported organization(s)? <i>If</i> "No," <i>describe in</i> Part VI <i>how control</i> or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s). 2 Were any of the relationship described in line 2, above, did the organization's supported organization's upported organization(s). 2				Yes	No
or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations 1 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in line 2, above, did the organization's supported organization's significant voice in the organization's investment policies and in directing the use of the organization's 1	1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in line 2, above, did the organization's supported organization's use of the organization's new a significant voice in the organization's investment policies and in directing the use of the organization's 2		or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
Section D. All Type III Supporting Organizations 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in line 2, above, did the organization's supported organization's supported organization's investment policies and in directing the use of the organization's 2		or management of the supporting organization was vested in the same persons that controlled or managed			
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described in line 2, above, did the organization's supported organization's supported organization's investment policies and in directing the use of the organization's		the supported organization(s).	1		
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 organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization</i>(s). By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's 				Yes	No
 year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i> By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's 	1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
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organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how 2 the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's 2		organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's 2	2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's 		organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			2		
	3				
income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		significant voice in the organization's investment policies and in directing the use of the organization's			
		income or assets at all times during the tax year? If "Yes." describe in Part VI the role the organization's			

supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea	 (see instructions).
--	---

- a ____ The organization satisfied the Activities Test. *Complete* line 2 *below.*
- **b** The organization is the parent of each of its supported organizations. Complete line 3 below.

с		The organization supported a	governmental entity.	Describe in Part VI how	vou supported a government	al entity (see instructions).
---	--	------------------------------	----------------------	-------------------------	----------------------------	-------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

3

2a

2b

3a

3b

Yes No

Schedule A	(Form 990 or 990-EZ) 2020	GATEWAYS	MUSIC	FESTIVAL,	INC.	
Part V	Type III Non-Functio	nally Integrat	ed 509(a)	(3) Supporting	Organizations	3

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990 or 990-EZ) 2020

1

Schedule A (Form 990 or 990-EZ) 2020 GATEWAYS MUSIC FESTIVAL, INC.

Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations _{(continu}	ued)	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	6	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (<i>describe in Part VI</i>). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which th	e organization is responsive			
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
c	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.			_	
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

Schedule A	(Form 990 or 990-EZ) 2020 GATEWAYS MUSIC FESTIVAL,	INC.	16-1562873 Page 8
Part VI	Supplemental Information. Provide the explanations required by F Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also co (See instructions.)	Part II, line 10; Part II, line 17a or d 11c; Part IV, Section B, lines 1 3a, and 3b; Part V, line 1; Part V	17b; Part III, line 12; and 2; Part IV, Section C, , Section B, line 1e; Part V,

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

Employer identification number

	GATEWAYS MUSIC FESTIVAL, INC.	16-1562873
Organization type (cheo	ck one):	·
Filers of:	Section:	
Form 990 or 990-EZ	$\fbox{3}$ 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	

____ 4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \dots b \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\label{eq:LHA} \mbox{ For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Name of organization

Employer identification number

16-1562873

GATEWAYS MUSIC FESTIVAL, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X Person Payroll 18,480. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 2 Χ Person Payroll 65,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 50,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Person X Payroll 20,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 X Person Payroll 15,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 6 X Person Payroll 25,000. Noncash \$ (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

16-1562873

GATEWAYS MUSIC FESTIVAL, INC.

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 7 X Person Payroll 11,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 8 Χ Person Payroll 25,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 9 X Person Payroll 5,000. Noncash \$ (Complete Part II for noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 10 Person X Payroll 5,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 11 X Person Payroll 5,000. Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 12 X Person Payroll 10,000. Noncash \$ (Complete Part II for noncash contributions.)

023452 11-25-20

Name of organization

Employer identification number

16-1562873

GATEWAYS MUSIC FESTIVAL, INC.

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Farti	Noncash Floperty (see instructions). Use duplicate copies of Pal	n in in additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	

Page **4**

	prganization		Employer identification number			
GATEW	AYS MUSIC FESTIVAL, INC		16-1562873			
Part III	Exclusively religious, charitable, etc., contribut	ions to organizations described in set b) through (e) and the following line ent charitable, etc., contributions of \$1,000 or	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year			
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gif				
	Transferee's name, address, a		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
	Transferee's name, address, a		Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gif				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gif				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization 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 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.



OMB No. 1545-0047

GATEWAYS MUSIC FESTIVAL, INC.

Employer identification number 16 - 1562873

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

DESCENT AND INSPIRE AND ENLIGHTEN COMMUNITIES THROUGH THE POWER OF

PERFORMANCE.

FORM 990, PART VI, SECTION B, LINE 11B:

A COMPLETED COPY OF FORM 990 IS PROVIDED TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

DIRECTORS ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST STATEMENT ON AN

ANNUAL BASIS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE

AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

GRANT WRITING:

PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	7,080.
TOTAL EXPENSES	7,080.

MUSICIANS:

PROGRAM SERVICE EXPENSES	24,700.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.	Schedule O (Form 990 or 990-EZ) 2020
032211 11-20-20	

Name of the organization GATEWAYS MUSIC FESTIVAL, INC.	Employer identification numbe 16-1562873
TOTAL EXPENSES	24,700.
CONSULTANTS:	
PROGRAM SERVICE EXPENSES	39,784.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	39,784.
FUND RAISING:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	140,000.
TOTAL EXPENSES	140,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	211,564.