

**2018 Beaches Oktoberfest
Event Survey Of Attendees**

File

Handout 8/9/2018

Beaches Oktoberfest will survey 500 attendees at the 2018 festival.

Surveyors will gather the following info:

- City & Zip code of residence
- How many people are in their group
- If they are from out of town, How many night(s) they are staying in Jacksonville/ Duval County

The survey entries will be calculated into a total number of estimated tourist based off total attendance.

amended
application

File

Handout
8/9/2018



**DUVAL COUNTY TOURIST DEVELOPMENT COUNCIL
GRANT APPLICATION FORM AND INSTRUCTIONS**

For consideration by the Duval County Tourist Development Council, please make sure your application is filled out completely and accompanied by the following information:

TAB #

- Grant Application
- 1 Articles of Incorporation (except government entities);
 - 2 IRS letter of non-profit tax-exempt status as well as completed
 - > IRS Form W-9
 - > IRS Form 990
 - NA TDC Final or Interim Report (for previous TDC grantees only);
No request for funds was made in 2017
 - NA Written authorization for AUTHORIZED AGENT to act on behalf of Applicant;
 - 3 Organizational outline, including but not limited to names and addresses of each board member and corporate officer (except government entities);
 - 4 Sponsorship package;
 - 5 Complete project event budget;
 - 6 Three support documents (letter of recommendation, programs, brochures, media articles, etc.); and
 - NA All written agreements involving media, hotels/motels and venue contracts/leases.

Please submit your application in a format using dividers or tabs for the items outlined above along with this form. When completed, please be sure to mail fifteen (15) fully completed Application Form Packets (one (1) signed original, fourteen (14) copies, and one (1) ELECTRONIC SUBMISSION COPY with attachments along with all items on the checklist to:

INCOMPLETE APPLICATIONS WILL BE RETURNED

Annette R. Hastings
Executive Director
Tourist Development Council
117 W. Duval St., Suite 425
Jacksonville, FL 32202
(904) 630-7625
annetteh@coj.net

TDC GRANT GUIDELINES & PROCEDURES

Special Event Grants. Chapter 666.108(b)(5) of the Ordinance Code component shall authorize the Tourist Council to award special event grants to organizations or persons hosting an event in the City or surrounding areas. Any event funded under this component shall have as one of its primary purposes the attraction of tourists to the City as evidenced by the promotion of such event to tourists.

- This component shall be limited to the following grants:
 - o Grant awards for attendance of 25,000 tourists or 10,000 room nights or greater. The Tourist Council may award grants for special events designed to attract a minimum of 25,000 tourists to the City which grant award may not exceed \$250,000 for any such event.
 - o Grant awards for attendance of 5,000 tourists or greater for events held at publicly owned venues. The Tourist Council may award grants for special events designed to attract a minimum of 5,000 tourists to the City using publicly owned tourist venues such as the arena, performing arts center, or stadium or at the zoo or eligible museums. Such grant awards may not exceed \$100,000 per event.
- Florida Statute 125.104 Tourist" means a person who participates in trade or recreation activities outside the county of his or her permanent residence or who rents or leases transient accommodations.

The following are requirements to be provided by the grant recipients:

- Evidence of growth or increase in tourism to the City
- Evidence of a return on the City's investment
- Evidence of the marketing of City tourist-oriented facilities, attractions, activities

ANY USE OF THE TOURIST DEVELOPMENT TAX DOLLARS MUST HAVE THE PROMOTION AND ADVERTISEMENT OF TOURISM AS ITS PRILMARY PURPOSE

The City of Jacksonville Municipal Code prohibits the advance of City funds in Section 110.112. No advance of City funds shall be made in any case unless authorized by the appropriation concerned or other law. In all cases of contracts for the performance of any service or the delivery of any articles of any description for the use of the City, payment shall not exceed the value of the service rendered or of the articles delivered previously to the payment.

Section 1 PRELIMINARY INFORMATION	
Agent Name	Charles Wagoner
Agent Title	Managing Partner
Contact Person Name	Joshua Woolsey
Contact Person Title	Managing Partner
Company/Organization	Beaches Oktoberfest Inc.
Address	203 Fort Wade Road, Suite 105
City	Ponte Vedra
State	Florida
Zip Code	32081
E-mail Address	josh@woolseylawfirm.com
Work Phone	904-638-4235
Home Phone/Cell Phone	904-614-7556 cell
Event Website	www.beachesoktoberfest.com

Section 2 EVENT INFORMATION	
Event/Project Name	Beaches Oktoberfest
Event/Project Location	Jacksonville Beach Pavilion
Sponsoring Organization/Name	Beaches Oktoberfest Inc.
Event/Project Description	An Oktoberfest celebration at the beaches with live music and authentic German beers.
Event Date Begins	
(MM/DD/YY)	October 17, 2018
Event Date Ends	
(MM/DD/YY)	October 18, 2018
Is this a non-profit organization?	Yes No
Tax Code Status	501(c)(3) Organization
If your delegates are exempt from paying hotel occupancy tax, please explain.	

<p>Category (please check one)</p> <p>New Event</p> <p>Recurring Event</p> <p>Signature Event</p>	<p> <input type="checkbox"/> Convention <input type="checkbox"/> Conference <input type="checkbox"/> Special Event <input checked="" type="checkbox"/> Festival <input type="checkbox"/> Other </p> <p> <input type="checkbox"/> Professional Sporting Event <input type="checkbox"/> Amateur Sports Event <input type="checkbox"/> Equestrian Center Event </p> <p> <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO </p> <p> <input checked="" type="checkbox"/> YES Number of Years 3 <input type="checkbox"/> NO </p> <p> <input type="checkbox"/> YES Number of Years <input checked="" type="checkbox"/> NO </p>
<p>Event History Please provide the past five (5) years number of room nights attributable to this convention, conference, or event including: City event held Date/month/year of event Hotel(s) Number of room nights for each</p>	<p>We registered 2550 rooms in 2016. This is attached as Attachment B. We did not seek TDC funds in 2017 but verified every hotel was close to maximum capacity within a 5 mile radius of the event.</p>
<p>If you have already reserved Duval County hotel rooms, please list hotel(s), number of rooms reserved, total room nights (rooms reserved multiplied by total number of nights), and dates. Also, please attach the contracts from the hotel(s).</p>	<p>We will continue to pursue our successful strategy from last year as we bring on line additional properties.</p>
<p>Do contracts include hotel room night rebates? If yes, amount of rebate per room night.</p>	<p> <input type="checkbox"/> YES \$ <input checked="" type="checkbox"/> NO </p>
<p>How many rooms do you <u>project</u> this event will bring to Duval County (room nights)?</p>	<p>We project 3,000 room nights.</p>
<p>How many rooms do you <u>guarantee</u> to bring to Duval County (room nights)?</p>	<p>2500</p>
<p>How do you intend to provide a valid count of attendance and room nights at this year's event?</p>	<p>Follow up audit of hotel room night tracking.</p>
<p>Total amount of grant funding being requested from the Tourist Development Council for this event</p>	<p>\$ 25,000</p>
<p>Intended Use of Funds Note: Please remember to attach itemized expenditures to be funded by this grant. If funding is for advertising, detail the media and/or publication(s) which will be used Must be approved by Visit Jacksonville</p>	<p>See attached Regional Marketing Plan for advertising as approved by Visit Jacksonville and additional budget expenditures on Beaches Oktoberfest Budget spreadsheet.</p>

<p>List <u>ALL</u> other <u>actual</u> or <u>potential</u> city/county/state/federal funding sources for this event including: Visit Jacksonville Visit Florida Florida Sports Foundation Jacksonville City Council Downtown Investment Authority Jacksonville Office of Economic Development JEA JTA Jacksonville Children's Commission City of Jacksonville Office of Special Events/Sports & Entertainment, City of Jacksonville Parks & Recreation Department, Jacksonville Cultural Council, etc.). Do not include grant money from Duval County TDC. <u>Failure to disclose other funding sources will result in denying future TDC funding of events.</u></p>	<p>None of these listed.</p>
<p>List all other contributors, sponsors, and sources of funding for this event other than the grant money from Duval County or the City of Jacksonville. <u>Failure to disclose other funding sources will result in denying future TDC funding of events.</u></p>	<p>We can only list funding sources known as of Grant Application deadline of April 1, 2018.</p> <ol style="list-style-type: none"> 1. North Florida Sales 2. Swisher Sweets
<p>What additional sources of funding have you sought or intend to seek? <u>Failure to disclose other funding sources will result in denying future TDC funding of events.</u></p>	<ol style="list-style-type: none"> 1. Arlington Toyota 2. Verizon 3. Fidelity 4. Winn Dixie 5. Camping World 6. Restaurants/food trucks 7. Advance Disposal 8. Wawa
<p>List past TDC funding (to include each year with amount requested, amount granted, amount spent, and purpose).</p>	<p>In 2015 and 2016 we received 20,000. We spent the full amount on advertisements outside of a 50 mile radius. Much of our marketing campaigns focus on Orlando and Gainesville school attendees.</p>
<p>List media coverage of previous year(s) event(s) Note: Attach clippings or copies</p>	<p>Radio, Folio, Void, Times Union, Channel 4 News.</p>

of newspaper, magazine, or professional periodicals showing coverage of event(s), which may be beneficial to the TDC in making its decision. Also give a description of television, radio, or other coverage received	
If your event is profitable, would you be willing to return all or a portion of the grant to the TDC? Please explain your answer.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Section 3
BACKGROUND INFORMATION**

What are your target audiences?	Adults between the ages of 21 and 40 within a 5-hour drive time radius.
What is your projected attendance (include local participants, out-of-town participants and guests)?	Gross audience for the entire festival should exceed 75,000

**Section 4
PROJECT/EVENT DETAILS**

In this space, please give details on your project or event so the Tourist Development Council can evaluate the economic impact on the county. Include in your narrative projected numbers of attendees, hotel rooms needed, and restaurant meals to be consumed.	Beaches Oktoberfest is the largest off-season festival held at the beaches. The event expects over 75,000 people in attendance for 2018. With its media strategy the event should reach out to over 2 million people. The Facebook and beachesoktoberfest.com website received over 300,000 hits last year and should only increase this year. We will have a passport that allows attendees to drink around Germany and will have over 30 authentic beers for people to try. Live music will be free to the public. At least 10,000 restaurant meals are projected to be consumed outside of the food purchased at the festival site. We've been able to raise over \$50,000 for charity the last three years and look to add to that number!
What are your marketing and advertising plans (local, regional, national, and/or international)? <u>Must be approved by Visit Jacksonville</u>	<i>Regional.</i> Visit Jacksonville Approval <input checked="" type="checkbox"/> YES, approved

**Section 5
PROJECT BUDGET RECAP**

Income	\$ None	
Tourist Development Fund Request	\$ 25,000	
TOTAL REQUEST	\$ 25,000	
Contributors, sponsors and other funding sources (include in-kind)	North Florida Sales	\$ 10000
	Swisher Sweets	\$ 5000

<u>Failure to disclose other funding will result in denying future TDC funding of events.</u>		\$
		\$
		\$
		\$
TOTAL CONTRIBUTOR/SPONSOR FUNDS	\$ 15,000	
Other income sources (i.e. registration fees, ticket sales, concessions, vendor sales)	Room Night Rebates	\$ 0
	Food Vendor	\$ 10,000
	Ticket Sales	\$ 40,000
	Beverage Sales	\$ 40,000
	Merch Vendors	\$ 10,000
		\$
	\$	
TOTAL OTHER INCOME	\$ 100,000	
TOTAL INCOME	\$ 115,000	

Section 6		
EXPENSES (See Attached Budget Breakdown)		
Please list ALL event expenses and indicate which items will utilize TDC funds	Advertising and Promotion	= \$ 30,000 (TDC Funds)
	Talent Contracts	= \$ 50,000
	Fees and Insurance	= \$ 10,000
	Stage Production	= \$ 15,000
	Production Rentals	= \$ 10,000
	Security	= \$ 5,000
	Miscellaneous	= 20,000
	TOTAL EXPENSES	\$ 140,000

**Section 7
CERTIFICATIONS**

I have reviewed the GRANT APPLICATION to the Duval County Tourist Development Council. I am in full agreement with the information and certifications contained in this application and its attachments, confirm that such information is true, accurate, and complete, and understand that this application will be rejected, or that the previous acceptance of this application will be withdrawn, should such information or certifications be untrue, incorrect, or incomplete.

I certify that: I am not liable for any unpaid federal, state, or local taxes; no lien is currently filed or claimed against me; and, I have no knowledge of any threatened or pending action, suit, proceeding, inquiry, or investigation, in equity or law, before or by any court, governmental agency, public board or body to which I am a party.

I acknowledge my understanding that the Ordinance Code of the City of Jacksonville prohibits the advance payment of City funds and that all awards of the TDC are for purposes of reimbursement and are conditioned upon the submission of documentation, acceptable to the TDC and in keeping with its reimbursement criteria, evidencing the actual payment of all costs and expenses for which reimbursement is sought.

I further acknowledge my understanding that the TDC in making a grant for special promotions or other purposes does not assume any liability or responsibility for the ultimate financial profitability of the event for which the grant is awarded. The TDC, unless otherwise specifically stated, is only a financial contributor to the event and not a promoter or co-sponsor, and will not guarantee or be responsible or liable for any debts incurred for such event. The TDC is not responsible or liable to any third party; its only obligation is to a successful applicant for grant funds, provided such applicant remains at all times in compliance with all terms of the award.

Joshua Woolsey
Charles Wagoner

Managing Partner
Title

/s/ Charles Wagoner
Authorized Agent Signature

ATTACHMENT A
BEACHES OKTOBERFEST BUDGET

INCOME

Sponsors	
Vendors	\$15,000 Alcohol Sponsor and Swisher Sponsor *Still seeking sponsorships
Food Trucks	\$10,000 20 vendors @ \$500
Beer	\$10,000 10 Food trucks @ \$1000
Ticket Sales	\$40,000 profit on 200kegs @ \$5 per beer
TDC Grants	\$40,000 profit of 10 per ticket selling 4000 tickets
Total	\$25,000
	\$140,000

MAJOR EXPENSES

Music & Talent	\$50,000 Main Talent (25k), Supporting Act (15k), 5 local bands (10k)
Advertising and Promotion	\$30,000 See marketing plan approved by Visit Jacksonville
Security	\$5,000 3 officers and 1 worker at 3 entrances plus rescue for 20 total hours
Stage Equipment	\$15,000 Speakers, lighting, amps and music equipment with Sight and Sound
Insurance and Fees	\$10,000 7k to City for property and 3k for liability and property insurance
Event Rentals	\$10,000 8 large tents (5k) tables and chairs (3k) RV for bank (2k)
Miscellaneous	\$20,000 Volunteers, Prizes, Restrooms, Sales commissions
Total	\$140,000



2018 Beaches Oktoberfest Tourist Information

Number of Tourist - 5000
Guaranteed Room Nights - 2500

Conservatively at two people per room Beaches Oktoberfest will attract over 5000 tourists.

Beaches Oktoberfest draws a much larger crowd than Springing in the Blues, which receives TDC funding every year based on their tourist numbers.

Beaches Oktoberfest talent budget is approximately five (5) times that of Springing in the Blues and the main reason Beaches Oktoberfest draws significantly more tourists.

ANNETTE R. HASTINGS
 EXECUTIVE DIRECTOR
 TOURIST DEVELOPMENT
 COUNCIL
 (904) 630-7625
 (904) 630-2906 FAX



117 WEST DUVAL STREET, SUITE 425
 4TH FLOOR, CITY HALL
 JACKSONVILLE, FLORIDA 32202
 ANNETTEH@COJ.NET

ROOM NIGHT PICKUP CERTIFICATION FORM ATTACHMENT C

REQUEST FOR ROOM NIGHT PICK-UP

ATTN: General Manager, please provide the room night information for the event dates listed below as soon as possible:

Hotel/Location: _____

Contact Person: _____ **Phone:** _____

Hotel Representative Signature: _____

I certify the organization/event listed below consumed the following room nights.

Group Name:								
Event Name:								
Event Dates:								
Day:								Total
Pick-up:								

The purpose of this form is to certify the number of hotel/motel room nights in Duval County attributable to this event. The TDC reserves the right to unilaterally reduce the maximum amount of any grant awarded should the Applicant's room night guarantee not be satisfied or documented with this Room Night Pick-up Certification Form.

Your cooperation in completing this form is greatly appreciated. For additional information, please contact Annette Hastings, TDC Executive Director at (904) 630-7625.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. BEACHES OKTOBERFEST, INC.	Enter filer's identifying number Employer identification number (EIN) or 47-3706974
	Number, street, and room or suite no. If a P.O. box, see instructions. 4925 BEACH BLVD	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. JACKSONVILLE, FL 32207	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

PIVOT CPAS - 238 PONTE VEDRA PARK DRIVE, SUITE 201 -

• The books are in the care of ► **PONTE VEDRA BEACH, FL 32082**
Telephone No. ► **904-280-2053** Fax No. ► **904-280-2055**

• If the organization does not have an office or place of business in the United States, check this box
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2017**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► calendar year **2016** or
► tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile, click on Charities & Non-Profits, and click on e-file for Charities and Non-Profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
	BEACHES OKTOBERFEST, INC.	Employer identification number (EIN) or 47-3706974
	File by the due date for filing your return. See instructions.	Social security number (SSN)
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	4925 BEACH BLVD	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	JACKSONVILLE, FL 32207	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

PIVOT CPAS - 238 PONTE VEDRA PARK DRIVE, SUITE 201 -

• The books are in the care of ▶ **PONTE VEDRA BEACH, FL 32082**
Telephone No. ▶ **904-280-2053** Fax No. ▶ **904-280-2055**

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **NOVEMBER 15, 2018**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year **2017** or
- ▶ tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.