

990

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public  
Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990)

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

Check if applicable

Address change

Name change

Initial return

Final return/terminated

Amended return

Application pending

C Name of organization

Lake County Visitors Bureau Inc

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite

One Victoria Place

City or town, state or province, country, and ZIP or foreign postal code

Painesville, OH 44077

F Name and address of principal officer

Arthur Shamakian

D Employer identification number

34-1607639

E Telephone number

G Gross receipts \$ 637,094

Tax-exempt status

☐ 501(c)(3) ☒ 501(c) ( 6 ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

Website: ▶ [www.Lakevisit.com](http://www.Lakevisit.com)

Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

L Year of formation 1987

M State of legal domicile OH

Part I Summary

1 Briefly describe the organization's mission or most significant activities

Promote tourism in Lake County Ohio

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a) . . . . . 3 8

4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . . 4 8

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a) . . . . . 5 4

6 Total number of volunteers (estimate if necessary) . . . . . 6

7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . . 7a 0

7b Net unrelated business taxable income from Form 990-T, line 34 . . . . . 7b 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h) . . . . .		622,038
9 Program service revenue (Part VIII, line 2g) . . . . .		0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d ) . . . . .		15,056
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		637,094
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . . .		0
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		135,225
16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e) . . . . .		386,459
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		521,684
19 Revenue less expenses Subtract line 18 from line 12 . . . . .		115,410

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16) . . . . .	629,192	747,748
21 Total liabilities (Part X, line 26) . . . . .	9,006	9,091
22 Net assets or fund balances Subtract line 21 from line 20 . . . . .	620,186	738,657

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

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Signature of officer

2018-05-10

Date

Arthur Shamakian Treasurer

Type or print name and title

Print/Type preparer's name

Preparer's signature

Date

PTIN