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FOURTHJULY 02/08/2010

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2008 Open to Public

Inspection 9/30/09 10/01/08 For the 2008 calendar year, or tax year beginning , and ending Please Fourth of July Town Celebration D Employer identification number Check if applicable C Name of organization use IRS Committee, Address change label or 22-2621965 Doing Business As print or Name change type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial return See 860-741-1013 P.O. Box 3203 Specific Termination 382,021 City or town, state or country, and ZIP + 4 G Gross receipts \$ Instruc-CT 06083 Enfield Amended return tions F Name and address of principal officer H(a) Is this a group return for Application pending affiliates? No Are all affiliates included? If "No," attach a list (see instructions) X 501(c) <u>3</u> ◀ (insert no.) 4947<u>(а)(1)</u> ог Tax-exempt status Website: ▶ www.enfieldcelebration.org H(c) Group exemption number ▶ Type of organization | X | Corporation Trust Year of formation M State of legal domicile Association Part I Summary Briefly describe the organization's mission or most significant activities TO PROVIDE THE RESIDENTS OF ENFIELD, CT A JULY 4TH Activities & Governance CELEBRATION AT NO CHARGE 2 Check this box I if the organization discontinued its operations or disposed of more than 25% of its assets 3 Number of voting members of the governing body (Part VI, line 1a) 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 5 Total number of employees (Part V, line 2a) 6 6 Total number of volunteers (estimate if necessary) 7a Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a 7b b Net unrelated business taxable income from Form 990-T, line 34 Prior Year **Current Year** 150,709 180,723 Contributions and grants (Part VIII, line 1h) 179,876 201,165 Program service revenue (Part VIII, line 2g) 1,669 133 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 60, 8c, 9c, 10c, and 11e) 12 Total revenue—addings charaled a must equal Part VIII, column (A), line 12) 332,254 382,021 13 Grants and similar amounts paid (Part IX, commin (A), lines 1-3) 14 Benefits paid Bor for fight mover & (Part 1) column (A), line 4) 15 Salaries, other compensation; employee bedding (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part 1X, as turner (A), line 11e) b Total fundralsing expenses (Part IX, Boliumn (D) line 25) 325,886 362,525 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 362,525 325,886 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 6,368 19,496 19 Revenue less expenses Subtract line 18 from line 12 Beginning of Year End of Year 62,672 81,970 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 81,970 62,672 22 Net assets or fund balances. Subtract line 21 from line 20 Part II Signature Block are that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Under penalties of perjury, I declared belies, it is true, correct, and Sign Here Signature of officer Scott Kaupih Chairman Type or print name and hile Preparer's identifying number Check if Preparer's (see instructions) Paid P00366572 signature 2/08/10 employed Preparer's 06-1597046 PASCOE & COMPANY, BEGLEY, EIN Firm's name for yours Use Only Oliver Rd Phone if self-employed), address, and ZIP + 4 860-745-8404 Enfield, CT06082-5511 Yes May the IRS discuss this return with the preparer shown above? (see instructions) Form 990 (2008) DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

orm 990 (2008)	Fourth of July To	wn Celebration 22-	2621965	Page 2
Part III	Statement of Program Servi	ce Accomplishments (see instruction	ns)	
TO PROV	cribe the organization's mission. YIDE THE RESIDENTS ATION AT NO CHARGE	OF ENFIELD, CT A JULY 4	łтн	
-	anization undertake any significant pr orm 990 or 990-EZ?	ogram services during the year which were not li	sted on	Yes X No
•	scribe these new services on Schedu			
services?	anization cease conducting, or make scribe these changes on Schedule O	significant changes in how it conducts, any progi	ram	Yes X No
		each of the organization's three largest program	services by expenses	
		nd section 4947(a)(1) trusts are required to report		
allocations	to others, the total expenses, and rev	enue, if any, for each program service reported		
	OF JULY WEEKEND ACTION OF THE STATE OF THE S	54,650 including grants of \$ CTIVITIES OFFER THE RESI AMILY ORIENTED CELEBRATI)
4b (Code) (Expenses \$	including grants of \$) (Revenue \$)
4c (Code:) (Expenses \$	including grants of \$) (Revenue \$)
4d Other near	ram services (Describe in Schedule C	2)		
(Expenses			Revenue \$	
	ram service expenses 🕨 \$	354,650 (Must equal Part IX, Line		
				Form 990 (2008)

Pa	art 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? If "Yes," complete	l		
	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	ļ		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	1		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete	ł		
	Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		ĺ	
	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,"		- 1	
	complete Schedule D, Part III	8		_X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part		İ	
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"		- 1	
	complete Schedule D, Part IV	9		<u> </u>
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VII, IX, or X as applicable	11		X
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		X
13	ls 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 U S?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	ŀ		
	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		Ì	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	ı		
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		<u> </u>
17	——————————————————————————————————————	17		X
18		18		<u> </u>
19	——————————————————————————————————————	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u>X</u>
21		21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			35
		23		<u> </u>
24a	· · · · · · · · · · · · · · · · · · ·			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			37
		24a		<u> </u>
b		24b		
С		.		
	F	24c		
d		24d		
25a		_	ļ	v
		25a		X
b		_	1	v
	F	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	_		v
		26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	_		x
	substantial contributor, or to a parson related to such an industrial? If "Voc." complete Schedule Part III	77		

	·		Yes	No
8	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity		1	
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
0	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
1	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
2	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
3	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
5	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
6	Section 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	36		X
7	Did 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? If "Yes," complete Schedule R, Part			
	VI	37		X

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of					
	U.S. Information Returns. Enter -0- if not applicable	1a	0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	1		1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able		<u> </u>		
	gaming (gambling) winnings to prize winners?			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		_			
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0	ļ		لــــا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	1				<u></u> -
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	-				
	over, a financial account in a foreign country (such as a bank account, securities account, or other finance	ıal				3,5
	account)?			4a		X
b	If "Yes," enter the name of the foreign country.	_				
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Ban	k		-		
	and Financial Accounts					v
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	_		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	17		5b		
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			ا		
_	Regarding Prohibited Tax Shelter Transaction?			5c		x
6a	Did the organization solicit any contributions that were not tax deductible?			6a		<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of	or		_ Ch		
_	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).	_				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than	11		7a		X
	\$75?			7b		-
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			10		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			7c		x
	required to file Form 8282?	7d		\ <u>'</u>		
d	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a person			1		
е	benefit contract?	Jilai		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	,		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as					
••	required?			7h		x
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section	on				
_	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsor					
	organization, have excess business holdings at any time during the year?	•		8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		X
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		ļ		'
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				'
11	Section 501(c)(12) organizations. Enter.					1
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					1
-	amounts due or received from them)	11b		<u> </u>	_	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	41?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions Enter the number of voting members of the governing body 4 b Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors or trustees, or key employees to a management company or other person? X 4 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X 5 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 6 Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members 7a Х of the governing body? 7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8h 9a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9b 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations X must describe in Schedule O the process, if any, the organization uses to review the Form 990 10 11 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at х the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies Nο 12a Х 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done 12c X 13 Does the organization have a written whistleblower policy? 13 14 14 Does the organization have a written document retention and destruction policy? 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 X The organization's CEO, Executive Director, or top management official? 15a Other officers or key employees of the organization? 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 b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 17 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public. 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > Kevin Zorda 6 Monroe Rd CT 06082 Enfield

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

 List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B) Average	Post	tion /	(C check	all #	nat ap	۱۷la	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Scott Kaupin Chairman								o	0	C
Dan Post										
Asst Chair Scott Crosson		├			_			0		
President								0	0	(
Kevin Zorda	·	<u> </u>						<u>. </u>		
Treasurer								0	0	
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Par	t VII Section A	. Officers, Directors, Trus	tees	, Ke	y En	plo	yees	, an	d Highest Compensated E	mployees (continued)				
	(A)	(B)	Door	t.a. (C)		لابداء	(D)	(E)	İ	(F)		
	Name and title	Average	_		check				Reportable	Reportable		≘stima amour		
		hours per week	할	nstut	Officer	ę	鬱	Former	compensation from	compensation from related		othe		
			Lect of	# F	<u> </u>	em F	est	<u>ĕ</u>	the	organizations	cor	mpen		
			Individual trustee or director	Institutional trustee		Key employee	[©] S		organization	(W-2/1099-MISC)		from		
			stee	rust		ď	pen		(W-2/1099-MISC)		•	ganız nd rel		
				8			Highest compensated employee				l .	ganıza		
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	Total		L	<u> </u>				▶					-	
2		viduals (including those in 1	a) w	ho re	ceiv	ed m	ore 1	han	\$100,000 in reportable com	pensation from the				
_	organization ▶ 0	(-,						, ,					
										•			Yes	No
3	Did the organization	list any former officer, direct	ctor o	or tru	stee	, key	emp	oloye	e, or highest compensated		F			
		? If "Yes," complete Schedu									Ļ	3		Х
4		ted on line 1a, is the sum of related organizations great												
	individual	related organizations great	er un	an p	150,	000,	11 1	es,	complete scriedule 3 loi st	ion		4		X
5	Did any person listed	d on line 1a receive or accru									_			
	services rendered to	the organization? If "Yes,"	com	plete	Sch	edul	e J fo	or su	ich person			5		X
Sec	tion B. Independent											_		
1		for your five highest comper	nsate	d ind	depe	nder	nt coi	ntrac	ctors that received more tha	n \$100,000 of				
	compensation from t	(A) Name and business address						Τ		(B) tion of services			(C) mpensal	
		Name and business address						├	Descrip	tion of services		Co	mpensa	tion
								┼─						
								+-			+			
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											1			
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2	Total number of inde	pendent contractors (include	ling t	hose	ın 1) wh	o rec	eive	d more than \$100,000 in					
	compensation from t					, .						O		
ΠΔΔ												Form	990	(2008

Pa	rt V	II Statement of Rev	enue					
1	•				(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
'O 'O	4 -	Code-sted composition	45			revenue		512, 513, or 514
Contributions, gifts, grants and other similar amounts		Federated campaigns	1a					
ge		Membership dues	1b					
ts, an		Fundraising events	1c		1			
igi ar	d	Related organizations	1d					
Sim	е	Government grants (contributions)	1e					
tio s	f	All other contributions, gifts, grants,						
혈축		and similar amounts not included above	1f	180,723				
탈	g	Noncash contributions included in lines 1	a-1f \$	70,735				
೧೯	-	Total. Add lines 1a-1f		▶	180,723			
-				Busn Code				
eun	2a	Taste of Enfield		3300 5505	117,131	117,131		
Š					63,645	63,645	· · · · · · · · · · · · · · · · · · ·	
Program Service Revenue	b	Beverage Sales			16,222	16,222		
Ž	С.	Road & Bike Race			2,923	2,923		
Š.	d	Craft Fair						
ם	е	Community Relations			640	640		
<u></u>		All other program service revo	enue	L	604	604		
<u> </u>	g	Total. Add lines 2a–2f			201,165			
	3	Investment income (including	dividend	s, interest, and				
		other similar amounts)		▶	133			133
	4	Income from investment of ta	k-exempt	bond proceeds ▶				
	5	Royalties						
		(ı) Real		(II) Personal				
	6a	Gross Rents			1			
	b	Less rental exps						
	c	Rental inc or (loss)						
	d	Net rental income or (loss)		•				
		Gross amount from (i) Securit	es	(II) Other				
		sales of assets		(11) 5 11161				
		other than inventory						
	b	Less cost or other						
		basis & sales exps						
	С	Gain or (loss)						
	d	Net gain or (loss)	_	•				
	8a	Gross income from fundraising ev	ents					
Ē		(not including \$						
Ve		of contributions reported on line 1	c).					
æ		See Part IV, line 18	a					
Other Revenu	b	Less. direct expenses	ьL					
ᅙ	С	Net income or (loss) from fun	draising <u>e</u>	events				
	9a	Gross income from gaming activit	es					
		See Part IV, line 19	a					
	b	Less. direct expenses	ьГ					
		Net income or (loss) from gar		uties		-		
		Gross sales of inventory, less		auco P				
	iva	returns and allowances						
			a					
		Less cost of goods sold	b[
	<u> </u>	Net income or (loss) from sale						
	<u> </u>	Miscellaneous Reven	ue	Busn. Code				
	11a							
	ь			ļ				
	С							L
	d	All other revenue						
	е	Total. Add lines 11a-11d		•				
	12	Total Revenue. Add lines 1h	, 2g, 3, 4,	5, 6d, 7d, 8c,				
		9c. 10c. and 11e			382,021	201,165	0	133

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (

	All other organizations must				<u> </u>
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	•				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				;
	U.S. 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 contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).				
a	Management				
	Legal	7,875		7,875	
	Accounting	7,075		7,075	
	Lobbying Professional fundraising services See Part IV, line 17				
f			-		
	A	116,115	116,115		
g 12	Advertising and promotion	220/225	220,220		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	4,056	4,056		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				;
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				1
	5% of total expenses shown on line 25 below.)	05 455	05 455		
a	Taste of Enfield Vendors	85,475	85,475		
b	Facilities & Equipment	34,619	34,619		
C	Advertising	30,400 26,316	30,400 26,316		
d	Food	26,316 19,952	19,952		
e	Beverage Costs	37,717	37,717		
	All other expenses Total functional expenses. Add lines 1 through 24f	362,525	354,650	7,875	
25 26	Joint Costs. Check here	302,323	334,030	7,075	
2 Ų	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation			1	

<u>_P</u> ;	art X	Balance Sheet						
				(A) Beginning of year		(B) End of y		
	•	Cash—non-interest bearing		44,617	1		4,1	13
	1	G		11,027	2			
	2	Savings and temporary cash investments			3			
	3	Pledges and grants receivable, net			4			
	4	Accounts receivable, net						
	5	Receivables from current and former officers, directors, tru	·		ا ء			
		employees, or other related parties. Complete Part II of Sc			5			
	6	Receivables from other disqualified persons (as defined un						
		4958(f)(1)) and persons described in section 4958(c)(3)(B)	Complete	L 		· 		
	_	Part II of Schedule L			6			
ets	7	Notes and loans receivable, net			7		-	
Assets	8	Inventories for sale or use			8			
ä	9	Prepaid expenses and deferred charges	[]		9			
	10a	, , , , , , , , , , , , , , , , , , , ,	10a					
	b	Less accumulated depreciation Complete						
		Part VI of Schedule D	10b	10 055	10c		17,8	5 5 7
	11	Investments—publicly traded securities		18,055	11		L / , C	, 5 /
	12	Investments—other securities See Part IV, line 11			12			
	13	Investments—program-related See Part IV, line 11			13			
	14	Intangible assets			14			
	15	Other assets See Part IV, line 11		60 670	15) 1 (.7.0
	16	Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses		62,672	16		31,9	70
	17	17						
	18	Grants payable			18			
	19	Deferred revenue			19			
۷۵	20	Tax-exempt bond liabilities			20			
Liabilities	21	Escrow account liability Complete Part IV of Schedule D			21			
Ħ	22	Payables to current and former officers, directors, trustees						
iak		employees, highest compensated employees, and disqual	ıfied					
_		persons Complete Part II of Schedule L			22			
	23	Secured mortgages and notes payable to unrelated third p	parties		23			
	24	Unsecured notes and loans payable			24			
	25	Other liabilities. Complete Part X of Schedule D			25			
	26	Total liabilities. Add lines 17 through 25			26			
es		Organizations that follow SFAS 117, check here	and					
Š		complete lines 27 through 29, and lines 33 and 34.		40 022			50,1	21
Balar	27	Unrestricted net assets		40,823			$\frac{30}{21}, 8$	
<u>m</u>	28	Temporarily restricted net assets		21,849			<u> </u>	,43
Fund	29	Permanently restricted net assets	. —		29			
Ţ		Organizations that do not follow SFAS 117, check here	e ▶					
ō		and complete lines 30 through 34.						
ŝţs	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building, or equipment for			31			
ĕ	32	Retained earnings, endowment, accumulated income, or o	ther funds	62 672	32		31,9	70
Net	33	Total net assets or fund balances		62,672	33		31,9	
	34	Total liabilities and net assets/fund balances		62,672	34		<u>) </u>	, , 0
<u> P</u>	art)	(I Financial Statements and Reporting					 T	
							Yes	No
1		· · ·		ther				
2		ere the organization's financial statements compiled or revie		nt?		2a		X
ŀ		ere the organization's financial statements audited by an ind				2b	-+	X
•		Yes" to lines 2a or 2b, does the organization have a commit					- 1	
		e audit, review, or compilation of its financial statements and				2c		
3		a result of a federal award, was the organization required to	o undergo an audit or audits as se	t forth in			- 1	v
		Single Audit Act and OMB Circular A-133?				3a		X
) f"	Yes," did the organization undergo the required audit or aud	lits?			3b		

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Fourth of July Town Celebration

Committee, Inc. Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

Employer identification number 22-2621965

										_			
The o	rgar	nization is not a	a private foundation becaus	e it is (Please check only one or	ganızatıon.)							
1	Ш	A church, con	vention of churches, or ass	ociation of churches described in	section 1	70(b)(1)(<i>i</i>	۹)(i).						
2	Ш	A school desc	cribed in section 170(b)(1)(A)(ii). (Attach Schedule E.)									
3	Ш	A hospital or a	a cooperative hospital servi	ce organization described in sect	ion 170(b)	(1)(A)(iii)	. (Attach	Schedu	le H)				
4	\square	A medical res	earch organization operated	d in conjunction with a hospital de	scribed in	section 1	170(b)(1)	(A)(iii).	Enter th	e hospi	ıtal's name,		
	_	city, and state											
5	Ш			of a college or university owned o	r operated	by a gove	ernmenta	il unit de	scribed	ın			
	\Box		o)(1)(A)(iv). (Complete Parl										
6	Н			overnmental unit described in sec									
7	Ш			substantial part of its support from	n a govern	mental un	iit or fron	n the gei	nerai pu	DIIC			
	П		section 170(b)(1)(A)(vi). (C	iomplete Part II.) I 70(b)(1)(A)(vi). (Complete Part I	1.3								
8 9	X	-		1) more than 33 1/3 % of its supp		ntribution	e mamh	orehin fe	es and	l arnee			
9	41	•	·	npt functions—subject to certain e									
		•		nd unrelated business taxable inc									
				0, 1975. See section 509(a)(2).			· · · · · · ·	O Dao	.00000				
10	\Box		-	exclusively to test for public safet			a)(4). (se	ee instru	ctions)				
11	Н	_	•	exclusively for the benefit of, to pe	•								
		•	•	ed organizations described in sec						tion			
		509(a)(3). Ch	eck the box that describes t	he type of supporting organizatio	n and com	plete lines	11e thr	ough 11	h				
		а П Туре	I b Type II	c Type III-Function	ally Integra	ited	d	Тур	e III–Ot	ner			
e		By checking to	his box, I certify that the org	anization is not controlled directly	or indirec	tly by one	or more	disqual	fied				
		persons other	than foundation managers	and other than one or more publi	cly suppor	ted organ	zations	describe	d in sec	tion			
		509(a)(1) or s	ection 509(a)(2)										
f		If the organiza	ation received a written dete	ermination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	g				
		-	check this box										
g		Since August	17, 2006, has the organiza	tion accepted any gift or contribut	ion from a	ny of the							
		following per											T
				ontrols, either alone or together w	ith persons	s describe	ed in (ii)					Yes	No
				of the supported organization?							11g(ı)	 	
			member of a person describ	• •							11g(ıı)		
			• •	described in (i) or (ii) above?							[11g(ııı)	'L	<u> </u>
h		Provide the f	ollowing information about t	he organizations the organization	 				· · · ·				
(i) I		e of supported	(ii) EIN	(iii) Type of organization (described on lines 1–9	1	organization sted in your	(v) Did y	ou notify uzation in	(vi) l organizat	s the	(vii) Am supp		
	org	anızatıon	• !	above or IRC section		document?	col (i)			zed in the	, July 1	,,,,,	
				(see instructions))				ort?		3?			
					Yes	No	Yes	No	Yes	No			
					1								
				-	+						<u> </u>		
					+	-							
						<u> </u>			<u> </u>				
					 								
Total													
For P	rıvad	y Act and Pape	rwork Reduction Act Notice,	see the Instructions for Form 990.					Scl	redule A	(Form 990 or	990-EZ)	2008

Sche	dule A (Form 990 or 990-EZ) 2008 Fou	rth of Ju	ly Town C	elebration	n 22	-2621965	Page 2
	art II Support Schedule for Or					70(b)(1)(A)(vi)	
	(Complete only if you che	cked the box	on line 5, 7, or	8 of Part I.)		_	
Sec	tion A. Public Support						
Cal	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization'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 1-3						
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 amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
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 carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					,	
11	Total support. Add lines 7 through 10	L	<u> </u>			140	
12	Gross receipts from related activities, etc (· · · · · · · · · · · · · · · · · · ·			. 504/)	12	
13	First five years. If the Form 990 is for the c	-	second, third, fourt	h, or fifth tax year a	s a section 501(c)	(3)	▶ □
<u></u>	organization, check this box and stop here						
	tion C. Computation of Public Su	· • · · · · · · · · · · · · · · · · · ·		(0)	-	44 1	
14	Public support percentage for 2008 (line 6,			(T))		14	<u>%</u>
15	Public support percentage from 2007 Sche				4.00.0/	<u>15</u>	%
16a	33 1/3 % support test—2008. If the organi			3, and line 14 is 33	1/3 % or more, cne	ECK THIS DOX	. □
_	and stop here. The organization qualifies a		•	40 11 45	- 00 4/0 0/		
b	33 1/3 % support test—2007. If the organi				s 33 1/3 % or mor	e, cneck this	▶ □
	box and stop here. The organization qualif				401 11 1	1 - 40% -	
17a							
	more, and if the organization meets the "fac			-		v now the	⊾ □
	organization meets the "facts-and-circumst		•		_	46 . 464	▶□
b	10%-facts-and-circumstances test—200	=					
	more, and if the organization meets the "fac		· ·	-	•	v now tne	⊾ □
4-	organization meets the "facts-and-circumst		•		_	note, objects	I H
18	Private foundation. If the organization did	not check a box or	ı iine 13, 16a, 16b,	1/a, or 1/b, check	ınıs box and see II	nstructions	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

Sec	(Complete only if you che tion A. Public Support	cked the box o	n line 9 of Part	1.)			
	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	88,903	110,115	139,251	151,174	180,723	670,166
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	174,572	219,434	212,111	179,411	201,165	986,693
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization'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 1-5	263,475	329,549	351,362	330,585	381,888	1,656,859
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
8 8	Public support (Subtract line 7c from	263,475	329,549	351,362	330,585	381,888	
<u></u>	tion B. Total Support	<u> </u>					1,656,859
	lendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	263,475	329,549	351,362	330,585	381,888	1,656,859
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	89	29	5	107	133	363
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	89	29	5	107	133	363
11	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 IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	263,564	329,578	351,367	330,692	382,021	1,657,222
14	First five years. If the Form 990 is for the o	rganization's first, se	econd, third, fourth,	or fifth tax year as	a section 501(c)(3)	
	organization, check this box and stop here		<u> </u>	<u> </u>		· · ·	_
<u>Sec</u>	tion C. Computation of Public Sup	oport Percentag	ge	_	·		
15	Public support percentage for 2008 (line 8,)		15	99.9781 %
16	Public support percentage from 2007 Scheo					16	99.9744 %
	tion D. Computation of Investmen			40)			0.0010 01
17	Investment income percentage for 2008 (lin		-	umn (t))		17	0.0219 % 0.0256 %
18 10a	Investment income percentage from 2007 S 33 1/3 % support tests—2008. If the organ			and line 15 is mo	re than 33 1/3 % a		0.0230 %
19a	17 is not more than 33 1/3 %, check this bo						▶ [X
b	33 1/3 % support tests—2007. If the organ	=	-				

line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Page 4

Schedule A (Form 990 or 990-EZ) 2008 Fourth of July Town Celebration 22-2621965

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

SCHEDULE M (Form 990)

NonCash Contributions

► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

OMB No 1545-0047

2008

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Fourth of July Town Celebration

Employer identification number

Da	Committee	, Inc			22-262196))		
Pa	rt I Types of Property	I						
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determinin revenues	9		
1	Art—Works of art							
2	Art—Historical treasures				· · · · · · · · · · · · · · · · · · ·		_	
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded							
10	Securities—Closely held stock							
11	Securities—Partnership, LLC,							
	or trust interests							
12	Securities—Miscellaneous	-						
13	Qualified conservation	1						
	contribution (historic							
	structures)							
14	Qualified conservation							
	contribution (other)							
15	Real estate—Residential							
16	Real estate—Commercial						_	
17	Real estate—Other							
18	Collectibles	x	13	32 735	Resale Value			
19	Food inventory	A	13	32,733	Resale Value			
20 21	Drugs and medical supplies Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
23 24	Archeological artifacts							
25	Other > (Various)	X	13	38,000	Resale Value			
26	Other ► (Validas)			30,000	1100010 1000			
27	Other ► (
28	Other ► (-			
29	Number of Forms 8283 received by the	ne organiza	ation during the tax year t	or contributions for				
	which the organization completed For	•	-		29			
		0200,		g			Yes	No
30a	During the year, did the organization i	receive by	contribution any property	reported in Part I, lines 1-2	8 that			
	it must hold for at least three years fro	-	• • • •				i	
	used for exempt purposes for the enti-			,		30a		X
b	If "Yes," describe the arrangement in		poriou					
31	Does the organization have a gift acc		licy that requires the revi	iew of any non-standard				'
	contributions?	-p-1000 p0		J. any new basiness		31		X
32a	Does the organization hire or use third	d parties or	related organizations to	solicit, process, or sell non-	cash			
	contributions?			and the state of t		32a		Х
b	If "Yes," describe in Part II							
33	If the organization did not report rever	nues in coli	umn (c) for a type of pror	perty for which column (a) is	checked,			;
	describe in Part II.							

Schedule M (Form 990) 2008 Fourth of July Town Celebration 22-2621965
Part II Supplemental Information. Complete this part to provide the information required by Part I, lines 30b,

Page 2

32b, and 33. Also complete this part for any additional information.

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

Fourth of July Town Celebration Committee, Inc.

Employer identification number 22 – 2621965

Form 990, Part VI, Line 10 - Organization's Process Used to Review Form 990 Review of Return contents by Chairman and Treasurer with Return Preparer

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Documents, financial statements, and policies are available to the public upon request.