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# Short Form

## Return of Organization Exempt From Income Tax

OMB No 1545-1150

2008

Department of the Treasury  
Internal Revenue Service

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

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form  
► The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public  
Inspection

<b>A</b> For the 2008 calendar year, or tax year beginning <b>10/01</b> , 2008, and ending <b>9/30</b> , 2009			
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending		<b>C</b> SPOKANE AGRICULTURAL EXPOSITION 801 W. RIVERSIDE #100 SPOKANE, WA 99201	
		<b>D</b> Employer identification number <b>91-0998656</b>	
		<b>E</b> Telephone number <b>509-459-4125</b>	
		<b>F</b> Group Exemption Number ►	
<b>• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).</b>			
<b>G</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual Other (specify) ►			
<b>H</b> Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)			
<b>I</b> Website: ► <b>WWW.GREATERSPOKANEINCORPORATED.ORG</b>			
<b>J</b> Organization type (check only one) — <input checked="" type="checkbox"/> 501(c) (6) ▶ (insert no.) <b>4947(a)(1) or 527</b>			
<b>K</b> Check ► <input type="checkbox"/> if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return			
<b>L</b> Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ► <b>\$ 280,208.</b>			
<b>Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances</b> (See the instructions for Part I.)			
REVENUE	1	1	
	2	2	280,208.
	3	3	
	4	4	
	5a	5a	
	5b	5b	
	5c	5c	
	6	6	
	6a	6a	
	6b	6b	
6c	6c		
7a	7a		
7b	7b		
7c	7c		
8	8		
9	9	280,208.	
10	10		
11	11		
12	12	4,086.	
13	13	2,738.	
14	14		
15	15	12,052.	
16	16	261,332.	
17	17	280,208.	
18	18	0.	
19	19	0.	
20	20		
21	21	0.	
<b>EXPENSES</b>			
22	22		
23	23		
24	24	126,621.	
25	25	126,621.	
26	26	126,621.	
27	27	0.	
<b>ASSETS</b>			
19	19		
20	20		
21	21	0.	
<b>Part II Balance Sheets.</b> If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II)			
		<b>(A) Beginning of year</b>	<b>(B) End of year</b>
22	22		
23	23		
24	24	126,621.	
25	25	126,621.	
26	26	126,621.	
27	27	0.	



## Part V Other Information (Note the statement requirement in General Instruction V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If 'Yes,' attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?	35a	X
b If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	35b	
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions	37a	0.
b Did the organization file <b>Form 1120-POL</b> for this year?	37b	X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 501(c)(7) organizations Enter:	39a	N/A
a Initiation fees and capital contributions included on line 9	39b	N/A
b Gross receipts, included on line 9, for public use of club facilities		
40a 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► <u>N/A</u> ; section 4912 ► <u>N/A</u> , section 4955 ► <u>N/A</u>		
b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' complete Schedule L, Part I	40b	
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d Enter amount of tax on line 40c reimbursed by the organization		0.
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T	40e	X
41 List the states with which a copy of this return is filed ► <u>WA</u>		

42a The books are in care of ► GREATER SPOKANE INCORPORATED Telephone no. ► 509-624-1393  
 Located at ► 801 W. RIVERSIDE, SUITE 100 SPOKANE WA ZIP + 4 ► 99201

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If 'Yes,' enter the name of the foreign country. ►  

Yes	No
42b	X

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts  
 c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If 'Yes,' enter the name of the foreign country. ►  

42c	X
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43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43 ►  N/A  
N/A

Yes	No
44	X
45	X

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

**Part VI** **Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

**46** 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

	Yes	No
46		
47		
48		
49a		
49b		

**47** Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

**48** Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

**49a** Did the organization make any transfers to an exempt non-charitable related organization?

**b** If 'Yes,' was the related organization(s) a section 527 organization?

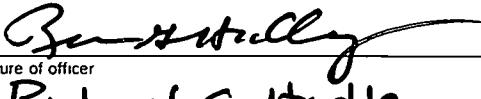
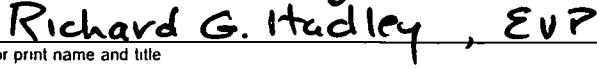
**50** Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
-----	-----	-----	-----	-----
Total number of other employees paid over \$100,000 ►				

**51** Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
-----	-----	-----
Total number of other independent contractors receiving over \$100,000 ►		

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.

**Sign Here** ►   
Signature of officer 05/10/10  
Date  
►   
Type or print name and title

<b>Paid Preparer's Use Only</b>	Preparer's signature ► JOHN P. BJORKMAN, CPA	Date 4/29/10	Check if self-employed <input type="checkbox"/> <span style="float: right;">Preparer's Identifying Number (See instructions)</span>	<span style="float: right;">N/A</span>
	Firm's name (or yours if self employed), address, and ZIP + 4 ► LEMASTER & DANIELS, PLLC 601 W. RIVERSIDE, SUITE 700 SPOKANE, WA 99201	EIN <span style="float: right;">N/A</span>	<span style="float: right;">(509) 624-4315</span>	Phone no ► <span style="float: right;">(509) 624-4315</span>

May the IRS discuss this return with the preparer shown above? See instructions.

BAA

►  Yes  No  
Form 990-EZ (2008)

2008

## FEDERAL STATEMENTS

PAGE 1

SPOKANE AGRICULTURAL EXPOSITION

91-0998656

**STATEMENT 1**  
**FORM 990-EZ, PART I, LINE 16**  
**OTHER EXPENSES**

ADVERTISING AND PROMOTION	\$ 40,626.
EQUIPMENT AND FACILITY RENTAL	53,178.
EXHIBITOR SALES	2,279.
INFORMATION TECHNOLOGY	983.
INSURANCE	881.
MANAGEMENT FEES	118,302.
MEALS AND ENTERTAINMENT	8,236.
MEETINGS	359.
MISCELLANEOUS	4,218.
OFFICE EXPENSES	1,285.
PROGRAM MATERIALS	18,468.
TRAVEL	12,517.
<b>TOTAL</b>	<b>\$ 261,332.</b>

**STATEMENT 2**  
**FORM 990-EZ, PART II, LINE 24**  
**OTHER ASSETS**

	<u>BEGINNING</u>	<u>ENDING</u>
ACCOUNTS RECEIVABLE	\$ 129,520.	\$ 115,217.
PREPAID EXPENSES AND DEFERRED CHARGES	9,381.	11,404.
<b>TOTAL</b>	<b>\$ 138,901.</b>	<b>\$ 126,621.</b>

**STATEMENT 3**  
**FORM 990-EZ, PART II, LINE 26**  
**TOTAL LIABILITIES**

	<u>BEGINNING</u>	<u>ENDING</u>
DEFERRED REVENUE	\$ 138,901.	\$ 126,621.
<b>TOTAL</b>	<b>\$ 138,901.</b>	<b>\$ 126,621.</b>

**STATEMENT 4**  
**FORM 990-EZ, PART III**  
**ORGANIZATION'S PRIMARY EXEMPT PURPOSE**

TO PRODUCE A MAJOR AGRICULTURAL EXPOSITION ANNUALLY IN THE CITY OF SPOKANE; TO PROMOTE SPOKANE AS A DESTINATION FOR EXHIBITORS ON TOUR; AND TO PERFORM ANY AND ALL ACTS NECESSARY, SUITABLE AND PROPER IN THE JUDGMENT OF THE BOARD OF DIRECTORS OF THE ORGANIZATION FOR THE PURPOSE OF CONDUCTING AN ANNUAL AGRICULTURAL EXPOSITION AND TO CONTRACT ACCORDINGLY.

**STATEMENT 5**  
**FORM 990-EZ, PART III, LINE 28**  
**STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS**

SPOKANE AGRICULTURAL EXPOSITION PROMOTES THE AGRICULTURAL INDUSTRY IN AND AROUND SPOKANE, WASHINGTON AND THE INLAND EMPIRE REGION. THE ORGANIZATION'S EXEMPT PURPOSE IS TO HOLD AN AGRICULTURAL EXPOSITION IN AN EFFORT TO BOOST ECONOMIC DEVELOPMENT IN THE LOCAL AGRICULTURAL INDUSTRY.

**STATEMENT 6**  
**FORM 990-EZ, PART IV**  
**LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
KEVIN PAULSON 601 W RIVERSIDE STE 400 SPOKANE, WA 99201	PRESIDENT 1.00	0. \$	0. \$	0.
RYAN KILE P.O. BOX 2515 SPOKANE, WA 99220	1ST VICE PRESID 1.00	0.	0.	0.
JAKE HOLLING P.O. BOX 267 FAIRFIELD, WA 99012	2ND VICE PRESID 1.00	0.	0.	0.
MARY SULLIVAN 907 W. RIVERSIDE SPOKANE, WA 99201	PAST PRESIDENT 1.00	0.	0.	0.
RICH BADEN 210 N HAVANA SPOKANE, WA 99202	SECRETARY 1.00	0.	0.	0.
MICHAEL STOLP P.O. BOX 2515 SPOKANE, WA 99220	TRUSTEE 1.00	0.	0.	0.
BRAD HOYT 104 S. FREYA #125 SPOKANE, WA 99202	TRUSTEE 1.00	0.	0.	0.
DONNEL RAINVILLE 4003 E. BROADWAY SPOKANE, WA 99202	TRUSTEE 1.00	0.	0.	0.
SYBIL TRESCH P.O. BOX 40085 SPOKANE, WA 99220	TRUSTEE 1.00	0.	0.	0.

## SPOKANE AGRICULTURAL EXPOSITION

91-0998656

**STATEMENT 6 (CONTINUED)**  
**FORM 990-EZ, PART IV**  
**LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES**

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
GARY JURGENSEN E. 4719 LO DOLCE ROAD COLBERT, WA 99005	TRUSTEE \$ 1.00	0. \$	0. \$	0.
DAVE AUBLE 5704 S. MOHAWK DR. SPOKANE, WA 99206	TRUSTEE 1.00	0.	0.	0.
RICH HARTZELL 404 N. HAVANA SPOKANE, WA 99202	TRUSTEE 1.00	0.	0.	0.
BRENT MATHISON 802 W. RIVERSIDE SPOKANE, WA 99201	TRUSTEE 1.00	0.	0.	0.
HARLAN HEGLAR 8426 N. PINE MEADOWS LANE NINE MILE FALLS, WA 99026	TRUSTEE 1.00	0.	0.	0.
JAY ALLERT 11016 E. MONTGOMERY SPOKANE, WA 99206	TRUSTEE 1.00	0.	0.	0.
DON POFFENROTH 1003 E. TRENT, STE. 200 SPOKANE, WA 99202	TRUSTEE 1.00	0.	0.	0.
BLINN CARSTENSEN P.O. BOX 2515 SPOKANE, WA 99220	TRUSTEE 1.00	0.	0.	0.
BILL NELSON 14915 E. 17TH COURT VERADALE, WA 99037	TRUSTEE 1.00	0.	0.	0.
RICH HADLEY 801 W. RIVERSIDE STE 100 SPOKANE, WA 99201	EXEC. VICE PRES 1.00	0.	0.	0.
TOTAL \$		0. \$	0. \$	0.