

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



**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)

OMB No 1545-0047

2008

Department of the Treasura Internal Revenue Service

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

Open to Public Inspection

C		2000 Calent	dar year,	or tax year beginn	my II/OI	, 2000, 4	and ending	<u> </u>			, 2009	
	heck if a	pplicable							D Employ	yer Identif	fication Number	
	Addr	ess change	Please use IRS label	THE GREAT F	REDERICK FAIR	R, INC.		L	52-	09158	839	
ı	Nam	e change	or print or type.	P.O. BOX 60				Г	E Telephi	one numb	per	
İ	Initia	ıl return	Sée specific	FREDERICK,	MD 21705-0604	1			301	-663-	-5895	
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}	_		tions.						G 0		2,277	702
1		nded return	F **		" DECKY DE	ACHEAD		H(a) Is this a	G Gross			100
Į	Appl	ication pending	i i	and address of principal of	officer BECKY BR	ASHEAR		H(b) Are all a			=	==
_				AS C ABOVE					ttach a list		tructions) Yes	, □"
		xempt statu				947(a)(1) or	527					
_	Webs	ite: ► WW		GREATFREDERI	CKFAIR.COM	· · · · · · · · · · · · · · · · · · ·		H(c) Group e				
		organization	X Corpor	ation Trust	Association Other	L Ye	ear of Formation	on 1971	<u>M</u> :	State of le	egal domicile MI	<u>D</u>
1	<u>t I                                   </u>	Summa										
1					n or most significant							<u>XISTS</u>
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	ک	CONTINUE	D_ON_S	SCHEDULE_Q_			<del> </del>					
	<b>2</b> C	theck this bo	x ► [_]	if the organization	discontinued its ope	erations or dispo	sed of mo	ழ் [Баћ 25	% of its	assets	7	_
	3 N	lumber of vo	itina men	nbers of the govern	iing body (Part VI. III	ne ia)	-		. 3 )	/ 3		1
	4 N	lumber of in	depender	nt voting members	of the governing boo 2a) ecessary)	ty (Part VI, line	10 2			4	<del> </del>	
	5 I	otal number	of emplo	yees (Part V, line	2a)		171	JUN 🛚 🔏	4 2013	5	<del>!                                      </del>	19
	7 - T	otal number	or volun	teers (estimate ii n	ecessary)	2 aalumn (C)	144			7(a)	<del> </del>	1,15 0
		_			rom Part VIII, line 12			CIL		- 7b		
_	D IV	et unrelated	busines	s taxable income in	om Form 990-T, line	: 34		<del>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</del>	<del>√. ∷</del>	<del>                                      </del>		
								Pr	ior Year		Current Y	
			_	nts (Part VIII, line 1	•				475,0			0,707
				nue (Part VIII, line :		•		1	<u>, 683, (</u>		1,609	<u>},841</u>
			-		), lines 3, 4, and 7d)					10.		
			-		es 5, 6d, 8c, 9c, 10c,				223,			2,121
	12 T	otal revenue	<u> – add I</u>	ines 8 through 11 (	must equal Part VIII	<u>, column (A), lın</u>	ne 12)	<u> 2</u>	<u>,381,</u>		2,262	
	<b>13</b> G	Grants and si	ımılar am	ounts paid (Part IX	(, column (A), lines 1	1-3)			131,4	427.	129	9,860
	14 B	enefits paid	to or for	members (Part IX	, column (A), line 4).							
	<b>15</b> S	alaries, othe	er compe	nsation, employee	benefits (Part IX, co	lumn (A), lines	5-10)		430,	788.	540	0,602
					olumn (A), line 11e)							
				- ·								
				enses (Part IX, colu	- · · · -			<del></del>			1 766	
l					es 11a-11d, 11f-24f).				,689,2			9,398
l	18 T	otal expense	es. Add li	ines 13-17 (must e	qual Part IX, column	(A), line 25)		2	<u>,251,4</u>		2,439	<u> 3,860</u>
	19 R	Revenue less	expense	es Subtract line 18	from line 12				130,0	095.	177	7,191
						•		Begin	ning of \	Year	End of Y	ſear
	<b>20</b> T	otal assets	(Part X. I	ine 16).					, 926,			3,209
		otal liabilitie						<u> </u>	551,0	$\overline{}$		5,006
					a 21 frame line 20		·	1	,375,			8,203
		<del></del>		ances Subtract lin	e 21 from line 20	<del></del>		<del></del>	, 373, .	334.	1,190	3,203
	rt II	Signate			<del></del>							
		Under penaltie true, conect, a	s of perjury, and complete	I declare that I have exa Declaration of preparer	mined this return, including (other than officer) is base	j accompanying sched d on all information c	dules and state of which prepai	ements, and t rer has any k	o the best nowledge	of my kno	wledge and belief,	, it is
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r	е	Signature	of officer	40				Day	E			
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		Type or pr	int name an	id title								
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(	u	Preparer's	► DON	ALD C. LINTO				1		$\square_{\mathbf{P}}$	00026878	
		signature			NARFIELD & GA	RRETT, P.A	., CPA	·s				
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e E	- er's	Firm's name (i yours if self- employed), address, and	or <u>LIN</u> <b>≥</b> 201	THOMAS JOHN				EIN		52-12		100
I	- er's ; y	Firm's name (i yours if self- employed), address, and ZIP + 4	► LIN 201 FRE	THOMAS JOHN DERICK, MD 2	NSON DRIVE 21702 shown above? (see i				one no	4 = 2 =		00 No

Form 990 (2008) THE GREAT FREDERICK FAIR, INC.		2-091583	39		Pag
Part III Statement of Program Service Accomplishments (see	instructions)				
1 Briefly describe the organization's mission:					
SEE SCHEDULE O			~		. <b></b> -
· ·					. <b>_</b> -
2 Did the organization undertake any significant program services during the y	ear which were not listed on the p	orior		_	
Form 990 or 990-EZ?			Yes	X	N
If 'Yes,' describe these new services on Schedule O.					
3 Did the organization cease conducting, or make significant changes in how i	t conducts, any program services	? []	Yes	X	N
If 'Yes,' describe these changes on Schedule O					
4 Describe the exempt purpose achievements for each of the organization's the and 501(c)(4) organizations and section 4947(a)(1) trusts are required to rep	ree largest program services by e	xpenses. Se	ction 5	501(c)	(3)
and 501(c)(4) organizations and section 494/(a)(1) trusts are required to reject expenses, and revenue, if any, for each program service reported	ort the amount of grants and allo	cations to of	iners, 1	ine to	aı
expenses, and revenue, if any, for each program service reported					
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4'a (Code: ) (Expenses \$ including grants of	\$) (Reve	nue \$			
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4c (Code:) (Expenses \$ including grants of	\$ ) (Reve	nue \$			
To (Codd)	, (1816				_
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					_
4d Other program services (Describe in Schedule O.)	A				
(Expenses \$ including grants of \$	) (Revenue \$				
4e Total program service expenses ► \$ (Must equi	al Part IX, Line 25, column (B).)				

Part IV Checklist of Required Schedules

			Yes	No
,	le the expension described in section E01(a)(2) as 4047(a)(1) (ather than a private foundation)? If (Veg.) complete			
ı	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		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
5	Section 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any accounts where 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		х
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		Х
9	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 hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Х	
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	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14a	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
ı	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		x
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total 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 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	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	Х	
23	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		X_
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No,'go to question 25	24a		x
't	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<del></del>
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	_	
	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
١	b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		
	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		х
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Form 990 (2008) THE GREAT FREDERICK FAIR, INC.

Part IV Checklist of Required Schedules (continued)

	_		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
	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 (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		X
t	Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		Х
(	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	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		<u>x</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	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		Х
34	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	Х	
35	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		х
36	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		
37	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		Х

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12.

			Yes	No
1	a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable 52			
	<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	х	
2	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 193			
2	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
	<b>b</b> If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3 b		
4	a 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)?	4a		Х
	b If 'Yes,' enter the name of the foreign country ▶			
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1</b> , Report of Foreign Bank and Financial Accounts			
5	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
	c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
€	a Did the organization solicit any contributions that were not tax deductible?	6 a	Х	
i '.	b if 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		Х
7	Organizations that may receive deductible contributions under section 170(c).	_		
	a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7 a		
	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7Ь		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		
	d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
g	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	a Did the organization make any taxable distributions under section 4966?	9a		
	<b>b</b> Did the organization make any distribution to a donor, donor advisor, or related person?	9b		Ĺ
10	Section 501(c)(7) organizations. Enter			
	a Initiation fees and capital contributions included on Part VIII, line 12	,		
	<b>b</b> Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
1	a Gross income from other members or shareholders . 11a			
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
12	2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	L	L
•	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b		990 /	(2000

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Form **990** (2008)

Form 990 (2008) THE GREAT FREDERICK FAIR, INC.

Part VI 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

sec		Governing Body and Management				
	For each processes	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below s, or changes in Schedule O See instructions	v, describe the circumstances,		Yes	No
1	a Enter the	number of voting members of the governing body .	1a 13			
	<b>b</b> Enter the	number of voting members that are independent .	1b 1		l	
2	Did any o officer, di	fficer, director, trustee, or key employee have a family relationship or a business rector, trustee or key employee?	relationship with any other	2		<u>x</u> _
3	Did the or of officers	rganization delegate control over management duties customarily performed by o s, directors or trustees, or key employees to a management company or other pei	r under the direct supervision rson?	3		X
4	Did the oi	rganization make any significant changes to its organizational documents		4		X
	since the	prior Form 990 was filed?				
5	Did the or	rganization become aware during the year of a material diversion of the organizat	ion's assets?	5		<u>X</u>
6	Does the	organization have members or stockholders? .		6		X
7	a Does the governing	organization have members, stockholders, or other persons who may elect one og body?	r more members of the .	7a		X
	<b>b</b> Are any c	decisions of the governing body subject to approval by members, stockholders, or	other persons? .	7b		X
. 8	Did the or the follow	rganization contemporaneously document the meetings held or written actions un ring	dertaken during the year by			
	a The gove	rning body?		8a	X	
		nmittee with authority to act on behalf of the governing body?		8ь		<u>X</u>
		organization have local chapters, branches, or affiliates?		9a		<u>X</u>
	<b>b</b> If 'Yes,' d and brand	loes the organization have written policies and procedures governing the activities ches to ensure their operations are consistent with those of the organization?	s of such chapters, affiliates,	9b		
10	Was a co describe	py of the Form 990 provided to the organization's governing body before it was fil in Schedule O the process, if any, the organization uses to review the Form 990	ed? All organizations must SEE SCHEDULE O	10		X
11	ls there a organizat	any officer, director or trustee, or key employee listed in Part VII, Section A, who com's mailing address? If 'Yes,' provide the names and addresses in Schedule O	cannot be reached at the	11		Х
Se	ction B.	Policies				
					Yes	No
		organization have a written conflict of interest policy? If 'No,' go to line 13.		12a	Yes	No
12	<b>a</b> Does the <b>b</b> Are office  to conflic	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests?	_	12a		No X
12	a Does the b Are office to conflic c Does the	organization have a written conflict of interest policy? If 'No,' go to line 13.	_	12b 12c		<u>х</u> х
12	a Does the b Are office to conflic c Does the Schedule Does the	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests? organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy?	_	12b 12c 13		х х х
12	a Does the b Are office to conflic c Does the Schedule Does the	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the O how this is done	_	12b 12c		<u>х</u> х
12 13 14	a Does the b Are office to conflic c Does the Schedule Does the Does the Dot the p	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests? organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and of	policy? If 'Yes,' describe in	12b 12c 13		X X X X
12 13 14	a Does the b Are office to conflic c Does the Schedule Does the Does the Dot the p	organization have a written conflict of interest policy? If 'No,' go to line 13. ers, directors or trustees, and key employees required to disclose annually interests? organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy?	policy? If 'Yes,' describe in	12b 12c 13 14		x x x x
12 13 14	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other office	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official?	policy? If 'Yes,' describe in	12b 12c 13		X X X X
12 13 14	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other office	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official?	policy? If 'Yes,' describe in	12b 12c 13 14		x x x x
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi Describe a Did the o	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official?	policy? If 'Yes,' describe in	12b 12c 13 14		x x x x
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offin Describe a Did the o entity dur b If 'Yes,' h in joint ve	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the Ohow this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official?  incers of key employees of the organization? the process in Schedule O (see instructions) organization invest in, contribute assets to, or participate in a joint venture or similaring the year?  inast the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safegua	policy? If 'Yes,' describe in	12b 12c 13 14 15a 15b		x x x x
12 13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offin Describe a Did the o entity dur b If 'Yes,' h in joint ve status wif	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official?  incers of key employees of the organization? the process in Schedule O (see instructions)  rganization invest in, contribute assets to, or participate in a joint venture or similaring the year?	policy? If 'Yes,' describe in	12b 12c 13 14 15a 15b		x x x x
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi Describe a Did the o entity dur b If 'Yes,' h in joint ve status wi ction C.	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the Ohow this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official?  incers of key employees of the organization? the process in Schedule O (see instructions) reganization invest in, contribute assets to, or participate in a joint venture or similaring the year?  inas the organization adopted a written policy or procedure requiring the organization enture arrangements under applicable federal tax law, and taken steps to safeguath respect to such arrangements?	policy? If 'Yes,' describe in	12b 12c 13 14 15a 15b		x x x x
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The organ b Other offi Describe a Did the o entity dur b If 'Yes,' h in joint ve status wif ction C. List the s Section 6	organization have a written conflict of interest policy? If 'No,' go to line 13 ers, directors or trustees, and key employees required to disclose annually interests?  organization regularly and consistently monitor and enforce compliance with the O how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official? Incers of key employees of the organization? The process in Schedule O (see instructions) organization invest in, contribute assets to, or participate in a joint venture or similaring the year?  The assistence organization adopted a written policy or procedure requiring the organization and the org	policy? If 'Yes,' describe in and approval by independent decision for arrangement with a taxable from to evaluate its participation and the organization's exempt	12b 12c 13 14 15a 15b 16a	Х	x x x x
12 13 14 15 16	a Does the b Are office to conflict c Does the Schedule Does the Does the Did the p persons, a The organ b Other offin Describe a Did the o entity dur b If 'Yes,' h in joint ve status wit ction C. List the s Section 6 inspection Own	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interest to 2 how this is done organization regularly and consistently monitor and enforce compliance with the 2 how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review are comparability data, and contemporaneous substantiation of the deliberation and conization's CEO, Executive Director, or top management official? Incers of key employees of the organization? Interest of key employees of the organization of the following persons include a review are comparable of the following persons include a review are comparable of the following persons include a review are comparable of the following persons include a review are comparable of the following persons include a review are comparable of the following persons include a review are comparable of the following persons include a review are comparable of the following persons include a review are comparable of the following persons include a review are comparable of the	policy? If 'Yes,' describe in and approval by independent decision lar arrangement with a taxable from the organization's exempt and 990-T (501(c)(3)s only) and	12b 12c 13 14 15a 15b 16a	X le for	X X X X X
12 13 14 15 16	a Does the b Are office to conflict c Does the Schedule Does the Does the Did the p persons, a The organ b Other offin Describe a Did the o entity dur b If 'Yes,' h in joint ve status wit ction C. List the s Section 6 inspection Own	organization have a written conflict of interest policy? If 'No,' go to line 13.  ers, directors or trustees, and key employees required to disclose annually interest to?  organization regularly and consistently monitor and enforce compliance with the O how this is done  organization have a written whistleblower policy?  organization have a written document retention and destruction policy?  rocess for determining compensation of the following persons include a review ar comparability data, and contemporaneous substantiation of the deliberation and onization's CEO, Executive Director, or top management official?  incers of key employees of the organization?  the process in Schedule O (see instructions)  reganization invest in, contribute assets to, or participate in a joint venture or similaring the year?  inas the organization adopted a written policy or procedure requiring the organization through the respect to such arrangements?  Disclosures  inasted with which a copy of this Form 990 is required to be filed NONE  into 1024 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, in Indicate how you make these available Check all that apply	policy? If 'Yes,' describe in and approval by independent decision lar arrangement with a taxable from the organization's exempt and 990-T (501(c)(3)s only) and	12b 12c 13 14 15a 15b 16a	X le for	X X X X X

# 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) or 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.

Check this box if the organization did no	ot compen	sate a	ny c	office	er, d	directo	or, tr	ustee, or key employe	ee	
(A)	(B)			((				(D)	(E)	(F)
Name and Title	Average hours		tion (		all t	hat app		Reportable	Reportable compensation from	Estimated amount of other
	per week	Individual trustee or director	Inst	Officer	Key	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the
		rectc	tutio	ğ	Key employee	lest c	ner	( 2 7055	( 2	organization and related
		or true	hal tr		loye	gmo;				organizations
		stee	institutional trustee			ensa				
<u>-</u> *	<u> </u>		e			řed.				
JOHN BARE	<u> </u>									
DIRECTOR	2			_			ļ	3,000.	0.	0.
CHARLES CRAMER	↓ <u></u>									_
DIRECTOR	4.5						ļ	3,000.	0.	0.
ROBERT W. FRANK	┨			v				2 000		0
SECRETARY MAURICE A. GLADHILL	5	<b></b>		Х				3,000.	0.	0.
TREASURER	3			х				3,000.	0.	0.
NANCY N. HENDRICKS	1 3			≏			├─	3,000.		<u> </u>
DIRECTOR	3							3,000.	0.	0.
JOHN W. BELL	╁─┷┈			$\dashv$				3,000.	0.	<u></u>
DIRECTOR	1 2							3,000.	0.	0.
CLYDE C. CRUM	<del> </del>									
DIRECTOR	3.3							0.	0.	0.
COLBY HUBBLE										
DIRECTOR	4							3,000.	0.	0.
JOSEPH C. FREE								·		
DIRECTOR	3	ļ						3,000.	0.	0.
JAMES S. GRIMES	<b>↓</b>									
VICE PRESIDENT	9.5			Х			<u> </u>	3,000.	0.	0.
DR. JAMES E. MCCLELLAN	1							2 000		•
DIRECTOR JOSEPH DEVILBISS, SR	3	-	Н			<u> </u>	<del> </del>	3,000.	0.	0.
DIRECTOR	4		i					3,000.	0.	_ 0
JACOB R. RAMSBURG, JR.							-	3,000.		
PRESIDENT	10			х				3,000.	0.	0.
BECKY BRASHEAR	1							3,000.		<u> </u>
EXECUTIVE ASST	40			х				78,002.	0.	0.
	1						T			<del></del>
						<u> </u>				
	<u> </u>						<u> </u>			
	<u> </u>									

Part VII   Section A. Officers, Directors, Trust	lees, K	(ey	Em	plo	ye	es,	and	d Highest Con	pensated Emp	oloyee	s (con	it.)
(A)	(B)			((	c)			(D)	(E)		(F)	
Name and Title	Average hours							Reportable compensation from	Reportable compensation from		stimated ount of oth	or.
	per week	Indiv or di	Instit	Officer	ē	Highest co employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	co	npensation	
		idual recto	ution	द्ध	employee	est con	Ęť	(	( 2	Or a	ganization nd related	i
	per week	า	nstitutional trustee		oyee	ompe				or	janization:	S
		68	stee			insat						
**						ed.						
						L				<u> </u>		
		<u> </u>		<u> </u>	ļ	<u> </u>				<u> </u>		
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<del></del>				<u> </u>	<del>                                     </del>	┢┈				<del>                                     </del>		
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		-	-		╁╾	├	-		<u></u>	<del> </del>		
					ł					ł		
1 b Total						1	<b></b>	114,002.	0.			0.
2 Total number of individuals (including those in 1a) v	who rece	eive	d me	ore 1	thar	n \$10	00,0	00 in reportable o	ompensation from	the		
organization 🕨 0												
											Yes	No
3 Did the organization list any former officer, director	or trust	ee, I	key	emp	oloy	ee, d	or hi	ghest compensat	ed employee		-	
on line 1a <sup>3</sup> If 'Yes,' complete Schedule J for such in					<b>1</b>				£	3	┼	<u>X</u>
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	han \$15	0,00	npe )0?	if 'Y	ion 'es'	com	ı oın ıplet	e Schedule J for :	such			
ındıvıdual										4	<del>  </del>	<u>X</u>
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Scl	ompens	atio	n fro	om a	any	unre	elate	ed organization fo	r services	_		Х
Section B. Independent Contractors	ledule J	TOI	Suc	пре	2150	111		·	<del></del>	5	<u> </u>	<u> </u>
1 Complete this table for your five highest compensal	ed inde	pend	dent	cor	ntra	ctors	tha	nt received more t	han \$100,000 of		_	
compensation from the organization								· · · · · · · · · · · · · · · · · · ·				
(A)	c							(B	) of Sorgeon	Ca	(C)	<b>n</b>
Name and business address Description of Services H-E MECHANICAL 1460 BRICKCRAFTER RD NEW OXFORD, PA 17350 HVAC							or services		ensatioi 172 Ω			
JOSEPH F. DEVILBISS CONSTR 7730-B SUNDAY'S L				MD	21	702		BLDG. 9 RENOV	ATIONS	172,000. 134,693.		
ALL CO. INVESTIG & SECURITY 8386 COURT AVE E								PARKING/SECUR		110,481.		
SAREPTA, INC. 1025 16TH AVE SOUTH, STE 202 NASHVILLE, TN 37212 ENTERTAINMENT								101,971.				
								L		. —		
2. Total number of independent contractors (including	those "	<b>م ۱۱</b>	who	100		od ~	2010	than \$100 000	I			

compensation from the organization ► 4

<u> </u>	,	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
<u>.</u> ري	1a Federated campaigns 1a		revenue		312, 313, 01 314
ANT	b Membership dues . 1b				
E S	c Fundraising events 1c				
F A	d Related organizations 1d 21,000.				
S.G	e Government grants (contributions) 1e 107,000.				,
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 312,707.				
ž Š	g Noncash contribns included in lns 1a-1f. \$ 105,733.	]			
8₹	h Total. Add lines 1a-1f	440,707.			
NE I	Business Code				
EVE	2a GROSS RECEIPTS-FAIR	1,609,841.	1,609,841.		
8	b				<del></del>
Ž	<u></u>	<u> </u>			
A SE	<u></u>				
ĭ.KA	f All other program service revenue	<u> </u>			<del> </del>
<u>و</u>	g Total. Add lines 2a-2f	1,609,841.		······································	<del></del>
_	3 Investment income (including dividends, interest and	1,005,041.		<del></del>	<u> </u>
	other similar amounts)				
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties				
	(i) Real (ii) Personal				
.	<b>6a</b> Gross Rents 218, 802.				
٠:١	<b>b</b> Less rental expenses				
	c Rental income or (loss) 218, 802 .	<b>.</b>			
	d Net rental income or (loss)	218,802.			218,802.
	7a Gross amount from sales of assets other than inventory (i) Securities (ii) Other	1			
	b Less: cost or other basis and sales expenses.				
. '	c Gain or (loss)	1			
:	d Net gain or (loss)	1			
ĄĘ.	8a Gross income from fundraising events (not including \$				
	of contributions reported on line 1c).	ļ			
OTHER REVE	See Part IV, line 18				
ᇎ	b Less: direct expenses b				
ò	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	b Less direct expenses b	]			
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a 8,188.				
	<b>b</b> Less cost of goods sold <b>b</b> 15,033.	1			
,	c Net income or (loss) from sales of inventory	-6,845.			-6,845.
	Miscellaneous Revenue Business Code				
	11a MISCELLANEOUS INCOME	164.	164.		
	b	ļ			
	c				<del> </del>
	d All other revenue.	100			<del>                                     </del>
	e Total. Add lines 11a-11d	164.			<del> </del>
	<b>Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	2,262,669.	1,610,005.	0.	211,957.

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 (D).

				200 2014111113 (2), (2), 21	
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
-	Grants and other assistance to governments and 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	129,860.			
. <b>3</b>	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	114,002.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	351,568.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	9,616.			
9	Other employee benefits	29,673.			
10	Payroll taxes	35,743.		·····	
11	Fees for services (non-employees)	33,133.			
	` ' '				
	Management	750.			
	Legal	38,457.			
	Accounting	38,457.			
	Lobbying	<del></del>			
	Prof fundraising svcs. See Part IV, In 17				<u> </u>
	Investment management fees				
	Other	2,869.			
12	Advertising and promotion	64,471.			
13	Office expenses	6,597.			
14	Information technology				
15	Royalties				
16	Occupancy	102,000.			
17	Travel	9,986.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			· <u></u>	
20	Interest	83,273.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	120,609.			ļ
23		58,347.			
	Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
i	ATTRACTIONS & ENTERTAINMENT	388,476.			
	UTILITIES	172,445.			
	SPONSORSHIP EXPENSES	110,469.			
	REPAIRS & MAINTENANCE	95,290.			
	SECURITY	92,163.			<del> </del>
	All other expenses	423,196.			
	Total functional expenses. Add lines 1 through 24f	2,439,860.	<del></del>		
	Joint Costs. Check here ► If following	2/307/000.			<del>                                     </del>
<b>40</b>	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form <b>990</b> (2008)

Pa	r A	Daiance Silect				r 1			
					(A) Beginning of year		<b>(B)</b> End of <u>y</u>	/ear	
,	1	Cash - non-interest-bearing			44,398.	1	20	6,9	74.
	2	Savings and temporary cash investments				2			
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net			22,192.	4	2	5,7	82.
٠,	5	Receivables from current and former officers, director or other related parties. Complete Part II of Schedule	s, truste L	ees, key employees,		5			
	6	Receivables from other disqualified persons (as define							
		and persons described in section 4958(c)(3)(B). Comp	olete Pa	rt II of Schedule L		6			
A S E T S	7	Notes and loans receivable, net				7			
S	8	Inventories for sale or use			17,921.	8		9,7	32.
T S	9	Prepaid expenses and deferred charges			24,958.	9	2	3,2	72.
	10 a	Land, buildings, and equipment cost basis	10a	3,187,304.			•		
		Less: accumulated depreciation. Complete Part VI of							
		Schedule D	10Ь	1,019,855.	1,816,983.	10 c	2,16	7,4	49.
	11	Investments — publicly-traded securities				11			
	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		. 1		15			
	16	Total assets. Add lines 1 through 15 (must equal line	34)	·	1,926,452.	16	2,43	3,2	09.
_	17	Accounts payable and accrued expenses			37,000.	17			95.
	18	Grants payable				18	<u>-</u>		
	19	Deferred revenue	30,303.	19	3	2.0	79.		
Ļ	20	Tax-exempt bond liabilities			20				
Å	21	Escrow account liability Complete Part IV of Schedul			21				
AB-L-T-ES	22	Payables to current and former officers, directors, tru highest compensated employees, and disqualified per							
4		of Schedule L .		.		22			
\$	23	Secured mortgages and notes payable to unrelated the	nird part	ies		23			
	24	Unsecured notes and loans payable				24			
	25	Other liabilities Complete Part X of Schedule D			483,755.	25	1,00		
	26	Total liabilities. Add lines 17 through 25			551,058.	26	1,23	5,C	06.
N E		Organizations that follow SFAS 117, check here ►	X and	d complete lines					
		27 through 29 and lines 33 and 34.			1,375,394.	27	1,19	0 2	. N 3
ANOM	27	Unrestricted net assets			1,3/5,394.	27	1,19	0,2	.03.
Ī	ł .	Temporarily restricted net assets		•		29			
Q R	29	Permanently restricted net assets			<del> </del>	29			
	1	Organizations that do not follow SFAS 117, check he	re =	and complete					,
F 0.20		lines 30 through 34.				30			
	30	Capital stock or trust principal, or current funds				31			
Ä	31	Paid-in or capital surplus, or land, building, and equip				32			
Ā	32	Retained earnings, endowment, accumulated income	, or othe	er tunas	1 275 204	33	1 10	0 7	003
<b>B々し々えい辿り</b>	33	Total net assets or fund balances.	•		1,375,394.		1,19		
	34	Total liabilities and net assets/fund balances			1,926,452.	34	2,43	3,2	.09.
Pa	ırt X	Financial Statements and Reporting						/es	No
	۸.		Sooh	X Accrual	Other		<del></del>	. 65	No
,		counting method used to prepare the Form 990. [ ] Cere the organization's financial statements compiled or			= :		2-		v
.2					accountant		2a 2b		<u>X</u>
		ere the organization's financial statements audited by a			ty for oversight of the	audit	20		
'	rev	Yes' to 2a or 2b, does the organization have a commit view, or compilation of its financial statements and sele	ection of	f an independent acco	ountant?	iuuit,	2c		
3	a As	a result of a federal award, was the organization requidit Act and OMB Circular A-133?	red to u	ındergo an audıt or au	udits as set forth in the	Single	3a		Х
		Yes,' did the organization undergo the required audit o					3b	-	
BA		,		·			Form 9	990 (	2008)

# SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990. To be completed by organizations that answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Open to Public Inspection Employer Identification number

THE GREAT FREDERICK FAIR, INC.	52-0915839
Part I Organizations Maintaining Donor Advised Funds or Other Similar Fun	nds or Accounts Complete if
the organization answered 'Yes' to Form 990, Part IV, line 6.	<u> </u>
(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	
2 Aggregate contributions to (during year)	
3 Aggregate grants from (during year)	
4 Aggregate value at end of year	
5 Did the organization inform all donors and donor advisors in writing that the assets held in d funds are the organization's property, subject to the organization's exclusive legal control?	onor advised Yes No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant fun used only for charitable purposes and not for the benefit of the donor or donor advisor or oth impermissible private benefit??	ids may be ner . Yes No
Part II   Conservation Easements Complete if the organization answered 'Yes'	
1 Purpose(s) of conservation easements held by the organization (check all that apply)	to remove, activities
	of an historically important land area
	of certified historic structure
Preservation of open space	
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form	m of a conservation easement on the last day
of the tax year.	
	Held at the End of the Year
a Total number of conservation easements	2a
<b>b</b> Total acreage restricted by conservation easements	2 b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2 d
3. Number of conservation easements modified, transferred, released, extinguished, or terminal	ated by the organization during the taxable
year >	
4 Number of states where property subject to conservation easement is located ▶	<del>_</del>
5 Does the organization have a written policy regarding the periodic monitoring, inspection, vie enforcement of the conservation easement it holds?	
6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during	
7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the	e year ► \$
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of si 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	ection . Yes No
In Part XIV, describe how the organization reports conservation easements in its revenue and experimentally, if applicable, the text of the footnote to the organization's financial statements that conservation easements.	nse statement, and balance sheet, and describes the organization's accounting for
Part III Organizations Maintaining Collections of Art, Historical Treasures, o Complete if the organization answered 'Yes' to Form 990, Part IV, line	r Other Similar Assets 8.
1a If the organization elected, as permitted under SFAS 116, not to report in its revenue staten treasures, or other similar assets held for public exhibition, education, or research in further the text of the footnote to its financial statements that describes these items	nent and balance sheet works of art, historica ance of public service, provide, in Part XIV,
b If the organization elected, as permitted under SFAS 116, not to report in its revenue staten treasures, or other similar assets held for public exhibition, education, or research in further amounts relating to these items	nent and balance sheet works of art, historica ance of public service, provide the following
(i) Revenues included in Form 990, Part VIII, line 1	. <b>&gt;</b> \$
(ii) Assets included in Form 990, Part X	<b>&gt;</b> \$
2 If the organization received or held works of art, historical treasures, or other similar assets amounts required to be reported under SFAS 116 relating to these items	for financial gain, provide the following
a Revenues included in Form 990, Part VIII, line 1	<b>*</b> \$
<b>b</b> Assets included in Form 990, Part X	►\$ ►\$

Schedule D (Form 990) 2008 THE C Part III Organizations Maintai				52-091 Other Similar Ass	
Using the organization's accessic that apply)				-	<del></del>
a Public exhibition		d Loan o	r exchange programs		
<b>b</b> Scholarly research		e Other			
c Preservation for future gener	ations				
4 Provide a description of the orga Part XIV	nization's collections	and explain how	they further the organ	ization's exempt purpos	ie in
5 During the year, did the organiza assets to be sold to raise funds r					Yes No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arranger	nents Comple	te if organization a	answered 'Yes' to F	orm 990, Part
1a Is the organization an agent, trus included on Form 990, Part X?				ner assets not	Yes No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIV and com	plete the following	ng table.		
					Amount
c Beginning balance				1c	
<b>d</b> Additions during the year .				1 d	
e Distributions during the year.			• •	1 e	
f Ending balance .			•	. 1f	
2a Did the organization include an a	mount on Form 990.	Part X, line 21?		<u> </u>	Yes No
<b>b</b> If 'Yes,' explain the arrangement		,		'	
Part V Endowment Funds Co		ation answere	d 'Yes' to Form 99	0, Part IV, line 10.	
	(a) Current year	(b) Prior year	(c) Two years back		(e) Four years back
1 a Beginning of year balance		1-1	1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1		1
<b>b</b> Contributions .					1
c Investment earnings or losses					
<b>d</b> Grants or scholarships				···	
Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance.		·	•		
2 Provide the estimated percentage	e of the vear end bal	ance held as:	<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>
a Board designated or quasi-endov	=	*			
<b>b</b> Permanent endowment ►					
c Term endowment ►					
3a Are there endowment funds not a organization by:	n the possession of	the organization t	that are held and admi	nistered for the	Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations	•		•		3a(ii)
<b>b</b> If 'Yes' to 3a(II), are the related of	organizations listed a	s required on Sch	nedule R?		3b
4 Describe in Part XIV the intended	d uses of the organiz	ation's endowme	nt funds.		
Part VI Investments-Land, B	uildings, and Eq	uipment. See	Form 990, Part X	line 10.	
Description of investment		t or other basis evestment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book Value
1a Land .					
<b>b</b> Buildings					
c Leasehold improvements			2,699,147.	755,288.	1,943,859.
<b>d</b> Equipment			321,695.	177,009.	144,686.
e Other			166,462.	87,558.	78,904.
Total. Add lines 1a-1e (Column (d) sho	ould equal Form 990,	Part X, column	(B), line 10(c).)	<b></b>	2,167,449.
BAA				Sched	ule <b>D</b> (Form 990) 2008

TEEA3302L 12/23/08

Part VII	Investments-Other Securities See	<u>-orm 990, Part X, line 1</u>	2. N/A
,	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial c	derivatives and other financial products		
Closely-he	eld equity interests		
O.I.			
			· · · · · · · · · · · · · · · · · · ·
		-	
		-	<del></del>
		-	
Total (Calu	um (b) should say [Form 000 Part V asl (P) kee 12)	- <del></del>	
	mn (b) should equal Form 990 Part X, col. (B) line 12)	Form 000 Port V line	12) N7/3
Part VIII	Investments—Program Related (See		
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
-	•	<del>                                     </del>	oust of the of year market value
		<del>                                     </del>	
	······································		
			· - · · · · · · · · · · · · · · · · · ·
		<del>                                     </del>	
		- <del></del>	
`	<del></del>		
	<u> </u>		
Total. Colum	in (b) bhoard oquar rorm boo, ruren, con (b) mio ro	<u> </u>	
Part IX	Other Assets (See Form 990, Part X	<del></del>	
	(a) [	Description	(b) Book value
:			
	<del> </del>	<del></del> ·	
Total Coli	umn (b) Total (should equal Form 990, Part X,	col (R) line 15)	
Part X	Other Liabilities (See Form 990, Par		
· uit A	(a) Description of Liability	(b) Amount	
Fodoral I-		(b) Amount	
	come Taxes	7 540	
	PAYABLE	7,542.	
	F CREDIT	400,000.	
	AYABLE - FCAS	584,398.	
PAYROL	L & SALES TAX PAYABLE	17,092.	
, 1			
			<u> </u>
Total Colum	nn (b) Total (should equal Form 990, Part X, col (B) line 25)	► 1,009,032.	

Schedule D (Form 990) 2008 THE GREAT FREDERICK FAIR, INC.

52-0915839

Page 3

		-091		Page 4
	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		N/A	
1	Total revenue (Form 990, Part VIII,column (A), line 12)			
2	Total expenses (Form 990, Part IX, column (A), line 25)			
3	Excess or (deficit) for the year. Subtract line 2 from line 1		<del></del>	
4	Net unrealized gains (losses) on investments .		<del></del>	
5	Donated services and use of facilities			
6	Investment expenses		<del></del>	
7	Prior period adjustments			
8	Other (Describe in Part XIV)			
9	Total adjustments (net) Add lines 4-8			
	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	*****	NI / 7	
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	N/A	
1 2	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12	<del>  '-</del>		
	a Net unrealized gains on investments			
	b Donated services and use of facilities 2b	ł		
	c Recoveries of prior year grants			
	d Other (Describe in Part XIV)	i l		
	e Add lines 2a through 2d	2 e		
	Subtract line 2e from line 1	3	· · · · · · · · · · · · · · · · · · ·	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		<del></del>	
	a Investments expenses not included on Form 990, Part VIII, line 7b			
	b Other (Describe in Part XIV) .			
•	c Add lines 4a and 4b.	4c		
	Total revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12.)	5		
	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	ırn N/A	
	Total expenses and losses per audited financial statements	1	.,, .,	
	Amounts included on line 1 but not on Form 990, Part IX, line 25	<u> </u>		
	a Donated services and use of facilities 2a			
	b Prior year adjustments . 2b			
	c Losses reported on Form 990, Part IX, line 25	1		
	d Other (Describe in Part XIV)	1		
	e Add lines 2a through 2d	2e		
	Subtract line 2e from line 1	3	<del> </del>	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investments expenses not included on Form 990, Part VIII, line 7b			
	b Other (Describe in Part XIV)			
	c Add lines 4a and 4b.	4c		
· 5	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18)	5		-
	rt XIV   Supplemental Information	•		
Com line	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b.	, lines	1b and 2b, Part	V, 
<del>-</del>				
BAA	TEEA3304L 12/23/08	Sche	dule <b>D</b> (Form 990	0) 2008

Schedule D	(Form 990) 2008 Supplemental Information (continued)	Page <b>5</b>
Part XIV	Supplemental Information (continued)	
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<b>→</b>		
	· · · · · · · · · · · · · · · · · · ·	
•		
		<b></b>
<b>-</b>		
<b>-</b>		

SCHEDULE I	•	<b>.</b>	Grants and Oth Governmen	nts and Other Assistance to Organizations, Governments and Individuals in the U.S.	to Organization als in the U.S.	IS,	,	2008 2008
Department of the Treasury Internal Revenue Service		▼ Comple	te if the organizati	<ul><li>Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.</li><li>Attatch to Form 990.</li></ul>	orm 990, Part IV, lines J.	; 21 or 22.	J	Open to Public Inspection
Name of the organization THE GREAT FREDERICK	FAIR.	INC.					Employer identification number 52-0915839	ation number
	formation on Gr	General Information on Grants and Assistance	ance					
1 Does the organiza the selection criter	ition maintain record ria used to award th	ds to substantiate the	e amount of the gra	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	rantees' eligibility for the	he grants or assistanc	e, and	X Yes No
Part II Grants and 990, Part IV	d Other Assistar V, line 21 for an	11 Grants and Other Assistance to Governments a 990, Part IV, line 21 for any recipient that receive Part IV and Schedule 1.1 (Form 990) if additional	eceived more than \$5,0	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV, and Schedule I.1 (Form 990) if additional space is needed	ed States. Compleithis box if no one r	te if the organizati	ion answered 'Yomore than \$5,00	es' on Form 00. Use
1 (a) Name and address of organization or government	ss of organization	(b) EIN		(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
					-			
2 Enter total number	Enter total number of section 501(c)(3) are	Enter total number of section 501(c)(3) and government organizations	rganızatıons				ΔΔ	
	nd Paperwork Redu	ction Act Notice, see	e the Instructions f	or Form 990.	TEEA3901L 12/19/08	12/19/08	Sched	Schedule I (Form 990) 2008

OMB No 1545 0047

Page 2 Schedule I (Form 990) 2008 THE GREAT FREDERICK FAIR, INC.,

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22.

Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
EXHIBITOR PREMIUMS	2,181	129,860.			
Part IV   Supplemental Information. Complete this part to		provide the information required in Part I, line	non required in Pa	rt I, line 2, and any other	er additional information.
PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF		<u>HOW GRANTS ARE USED</u>	<u>USED</u>		 
IHE_GREAT_FREDERICK_FAIR'S_PROCEDURES_FOR		MONITORING THE USE OF GRANT	SE OF GRANT FU	FUNDS IN THE	
UNITED STATES INCLUDE:	         	;             	! ! ! ! ! !	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
SIGNED AGREEMENTS/CONTRACTS WITH THE GRANTOR	WITH THE GRA	NTOR			
ACCOUNTING AND TRACKING OF FUNDS IS THR	FUNDS IS THRO	OUGH_THE_FAIR'S	FAIR'S OPERATING		
ACCOUNT_AND_IN_ACCORDANCE_WITH_ACCOUNTI	IITH ACCOUNTIN	NG PRACTICES AND PROCEDURES	PROCEDURES	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
AS_DIRECTED_AND_ADVISED_THROUGH_OUR_ACC	QUGH_QUR_ACCO	OUNTING FIRM	1		
RECEIPTS/INVOICES FOR GRANT FUND USE AR	_FUND_USE_ARE	E_MAINTAINED	! ! ! ! !		
END OF GRANT REPORTS ARE FILED WITH APP	LED WITH APPRO	ROPRIATE GRANTORS, DETAILING	S. DETAILING		
USE OF FUNDS					Schedule I (Form 990) 2008
BAA					),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

### SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service **Transactions with Interested Persons** 

➤ Attach to Form 990 or Form 990-EZ.
➤ To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

Schedule L (Form 990 or 990-EZ) 2008

2008

Open to Public Inspection

Name of the organization Employer identification number THE GREAT FREDERICK FAIR, INC. 52-0915839 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under \$ . . . . . . . . . . . . . .. .. 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Ś Loans to and/or From Interested Persons. To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (b) Loan to or from the organization? (f) Approved by board or committee? (g) Written agreement? (a) Name of interested person and purpose (c) Original principal amount (d) Balance due Yes No No Τo From Yes No Yes Total Grants or Assistance Benefitting Interested Persons. Part III To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 27. (b) Relationship between interested person and (a) Name of interested person (c) Amount of grant or type of assistance the organization **Business Transactions Involving Interested Persons.** To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (b) Relationship between interested person and the organization (d) Description of transaction (c) Amount of transaction \$ (e) Sharing of (a) Name of interested person organization's revenues? Yes No JOSEPH DEVILBISS. DIRECTOR 96,041. BLDG 9 RENOVS AND R&M X

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

### **SCHEDULE M** (Form 990)

## **Non-Cash 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

THE GREAT FREDERICK FAIR, INC

Employer identification number

	E GREAT FREDERICK FAIR, INC.			52-	091583	9		
Pai	t I Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Metho	od of o	determin	ıng
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		<u> </u>					
9	Securities-Publicly traded							
	Securities—Closely held stock							
	Securities-Partnership, LLC, or trust interests	<b></b>				·		
,	Securities-Miscellaneous					_		
13	Qualified conservation contribution (historic structures)	ļ						
	Qualified conservation contribution (other)				:			
15	Real estate—Residential	-						
	Real estate—Commercial .	ļ	· -					
17		-	<del> </del>					
	Collectibles						• • • • • • • • • • • • • • • • • • • •	<del></del>
	Food inventory	<del></del>						
20	Drugs and medical supplies							
	Taxidermy Historical artifacts.							
	0 11	<del>                                     </del>						
		<del> </del>						
25	Archeological artifacts  Other ► (SEE PART II )	<b></b>						
26	Other ► ()							
27	Other ► ()							
**	Other ► (							
29	Number of Forms 8283 received by the organization completed Form 8283, Part IV, Done	e Acknowled	gement	ions for which the	29			
			-				Yes	No
30 :	During the year, did the organization receive by co	ontribution ai	ny property reported in	Part I lines 1-28 that	it must			
50.	hold for at least three years from the date of the	initial contribi	ution, and which is no	t required to be used fo	rexempt			
	purposes for the entire holding period?					30 a		X
t	If 'Yes,' describe the arrangement in Part II							- <del>-</del>
31	Does the organization have a gift acceptance poli	cy that requir	res the review of any r	non-standard contribution	ons?.	31		X
32 8	Does the organization hire or use third parties or	related organ	nizations to solicit, pro	cess, or sell				
٠,	noncash contributions?	-	•			32 a		<u> X</u>
įŧ	olf 'Yes,' describe in Part II.							
33	If the organization did not report revenues in coludescribe in Part II	ımn (c) for a	type of property for wl	hich column (a) is chec	ked,			

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2008

Schedule M. (Form 990) 2008 THE GREAT FREDERICK FAIR, INC.	52-0915839	Page 2
Supplemental Information. Complete this part to provide the information required and 33. Also complete this part for any additional information.	by Part I, lines 30b,	32b,
SEE ATTACHED FEDERAL STATEMENT FOR DETAIL		
		<u>÷</u>
<u> </u>		
***************************************		
		. – – –
		. – – – –
·	<b></b>	
	<b></b>	
·	<b></b>	

TEEA4602L 07/14/08

Schedule M (Form 990) 2008

BAA

# SCHEDULE O (Form 990)

# **Supplemental Information to Form 990**

OMB No 1545-0047

Employer identification number

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

THE GREAT FREDERICK FAIR, INC.	52-0915839
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	
THE GREAT FREDERICK FAIR, INC. EXISTS TO PROMOTE AGRI	CULTURE AND THE EDUCATION OF
OUR YOUTH ABOUT THE INDUSTRY OF AGRICULTURE.	
CONTINUED ON SCHEDULE O	
THE FOLLOWING ARE STRATEGIES AND POLICIES FOR CARRYIN	NG OUR OUR MISSION:
THE FAIR MUST BE THE PREMIER SHOWCASE FOR AGRICULTURE	E AND AGRICULTURAL EDUCATION.
THE FAIR'S CORE ACTIVITIES ENCOMPASSES THE EXHIBITION	
AND_HANDMADE_GOODS, WHILE_ENCOURAGING_IMPROVEMENTS_IN	
THE DEVELOPMENT OF BETTER AGRICULTURAL PRODUCTS THROU	JGH A SYSTEM OF AWARDS.
EDUCATION IS THE NUMBER ONE PRIORITY ACCOMPLISHED BY	PROVIDING 4-H AND FFA MEMBERS
AND YOUTH AT LARGE WITH A MEANS OF LEARNING BY DOING	
ACCOMPLISHMENTS.	
PARTNERSHIPS WITH 4H, FFA, AND THE AG COMMUNITY WILL	PROMOTE AG LITERACY AND AG
CAREER_PATHS	
· 	
THE FAIR IS IN A UNIQUE POSITION TO FOSTER UNDERSTAND	DING BETWEEN THE AGRICULTURAL
COMMUNITY AND THE PUBLIC, AND IS A LEADER IN THIS EFF	FORT.
WE MUST CONDUCT OUR FINANCIAL AFFAIRS IN A BUSINESS I	LIKE MANNER.
PRODUCE THE ANNUAL CREAT FREDERICK FAIR	

Schedule <b>0</b> (Form 990) 2008	Page <b>2</b>
Name of the organization	Employer identification number 52-0915839
THE GREAT FREDERICK FAIR, INC.	32 0313033
FORM 990, PART III, LINE 1 - ORGANIZATION MISSION (CONTINUED)	·
THE FAIR SHALL FACILITATE THE DISPLAY OF IMPLEMENTS OF HUSBAN	DRY AND ADVANCES IN THE
TECHNOLOGY OF AGRICULTURE.	
THE FAIR SHALL PROVIDE RESOURCES FOR EDUCATIONAL EDEAVORS AND	PRODUCTION
AGRICULTURES PROMOTIONS.	
THE FAIR SHALL GENERATE RESOURCES FROM ADMISSIONS, ENTERTAINM	ENT, CARNIVAL
ATTRACTIONS, PARKING, COMMERCIAL EXHIBITS, PREMIUM LISTS, MEM	ORABILIA, RECREATIONAL
AGRICULTURE, AND NON FAIR RENTAL OF FACILITIES.	
THE FAIR SHALL STRIVE TO COLLECT SPONSORSHIPS, STATE APPROPRI	ATIONS, PRIVATE GRANTS
AND ANY OTHER PUBLIC FUNDING AVAILABLE TO SUPPORT OUR EDUCATION	
·	ONNE NAD NORTCOBIONE
ENDEAVORS.	
WE SHALL PROMOTE A YEAR ROUND FARMERS MARKET	
OUR FACILITY SHALL BE A MULTI-USE COMPLEX OF QUALITY STRUCTUR	ES TO SERVE THE NEEDS
OF THE FAIR AND THE AG COMMUNITY.	
WHILE THE FAIR MAINTAINS AN AGRICULTURAL FOCUS, WE ENCOURAGE	
BY ALL.	
PROTECT AND STRENGHTHEN OUR TAX FREE STATUS.	
FORM 990 PART VILLINE 10 - FORM 990 REVIEW PROCESS	
HISTORICALLY, THE EXECUTIVE ASSISTANT AND TREASURER HAVE REVI	EWED THE FEDERAL FORM

990. THE BOARD MAY MODIFY ITS REVIEW PROCESS.

Schedule <b>O</b> (Form 990) 2008	Page <b>2</b>
Name of the organization	Employer identification number
THE GREAT FREDERICK FAIR, INC.	52-0915839
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY A	VAILABLE
GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS ARE AVA	ILABLE UPON REQUEST.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions.

2008

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) (2008) (F)
Direct controlling entity (F)
Direct controlling entity N/A Employer identification number 52-0915839 (fb) Public charity status (if section 501(c)(3)) (End-of-year assets (C) (D)
Legal domicile (state or foreign country) S (**D)** Total income <u>ပ</u> TEEA5001L 12/23/08 501 (C)
Legal domicile (state or foreign country) Ø DEBT-FINANCED BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (B) Primary activity (B) Primary activity RENTAL OF PROPERTY Part II | Identification of Related Tax-Exempt Organizations FREDERICK CO. AGRICULTURAL SOCIETY, INC. P.O. BOX 604 (A) Name, address, and EIN of related organization (A) Name, address, and EIN of disregarded entity Part I Identification of Disregarded Entities THE GREAT FREDERICK FAIR, INC FREDERICK, MD 21705-0604 52-0318921

52-0915839

Part III Identification of Related Organizations Taxable as a Partnership

(J) General or managing partner?	No							
Gener mana partr	Yes		-		_			
Code V-UBI amount in Box 20 of Schedule K-1	(Form 1065)							
4) opor- late tions?	No							
(H) Disproportonate allocations?	Yes	,						
Share of total income Share of end-of-year assets						:		
(F) Share of total income						:		
(E) Predominant income (related, investment, unrelated)								
Legal Direct domicile controlling entity (state or foreign								
(C) Legal domicile (state or foreign	country)							
(B) Primary Activity								
Name, address, and EIN of related organization				3 6 7 8 8 8				

Trust
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Organizations
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Part IV

(A) Name, address, and EiN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	Primary Activity   Legal domicile   Composite   Corp. State or foreign   Controlling entity   Corp. State or foreign   Country)   Corp. State or foreign   Country   Corp. State or foreign   Corp	( <b>G)</b> Share of end-of-year assets	(H) Percentage ownership
ВАА		TEEA5002L 12/23/08	23/08			Schedule R (Form 990) (2008)	990) (2008)

anizations
Related Orga
sactions With
Part V Trans

Note Complete line 1 if any entity is listed in Parts II III or IV		۲	Yes No	۰ ا
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV			<u> </u>	
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a	$\hat{-}$	×
<b>b</b> Gift, grant, or capital contribution to other organization(s)		1 p	$\hat{-}$	×
c Gift, grant, or capital contribution from other organization(s)		1c \	×	
d Loans or loan quarantees to or for other organization(s)		10	_	×
e Loans or loan quarantees by other organization(s)	li	1e \	×	
f Sale of assets to other organization(s)		1,	$\hat{-}$	$\times$
g Purchase of assets from other organization(s)	J	19	_	×
		14	~	×
i Lease of facilities, equipment, or other assets to other organization(s)		=	7	×
i Lease of facilities, equipment, or other assets from other organization(s)			×	
k Performance of services or membership or fundraising solicitations for other organization(s)	<u>L.</u>	<del>*</del>		×
l Performance of services or membership or fundraising solicitations by other organization(s)	<u>l</u>	1	_	×
m Sharing of facilities, equipment, mailing lists, or other assets		1 m	_	X
n Sharing of paid employees		1n	^	$ \times $
o Boimburcoment and to other organization for expenses				×
		Ļ	    }	ı
<b>p</b> Keimbursement paid by other organization for expenses			_	
<b>a</b> Other transfer of cash or property to other organization(s)		19	_	×
r Other transfer of cash or property from other organization(s)	<u> </u>	1-	<u> </u>	×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	ction thresholds			H
(B) Name of other organization	tion	(C) Amount involved	olved	
(1) FREDERICK CO. AGRICULTURAL SOCIETY, INC.		20	20,000.	ان
(2) FREDERICK CO. AGRICULTURAL SOCIETY, INC.		584,	, 398	~i
		102	102,000.	<u>.</u>
יייייייייייייייייייייייייייייייייייייי		-	000	ہ ا
(4) FREDERICK CO. AGRICULIURAL SOCIETI, INC.		1		:
(5)		•		
(9)				- 1
<b>BAA</b> TEEA5003L 07/02/08	Schedule R (Form 990) (2008)	orm 99(	) (200	Θ,

52-0915839

# Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross

(A) (B) (C) (B) (C) (D)	(B)	(2)	<b>e</b>	(E)	<b>E</b>	(9)	E	
Name, address, and EIN of entity	Primary activity	Legal Domicile (State or Foreign Country)	Are all partners section 501(c)(3)	lers. Share of end-of-year assets	Dispropor- tionate allocations?	Code V-UBI amount in Box 20 of Schedule K-1	General or managing partner?	ral or aging ner?
			Yes No	ر کا و	Yes No	Form (1065)	Yes	S S
			<u>.</u>					
1								
11								
ВАА		TEEA5004L 01/21/09				Schedule <b>R</b> (Form 990) (2008)	n 990)	(2008)

2008

# **FEDERAL STATEMENTS**

PAGE 1

THE GREAT FREDERICK FAIR, INC.

52-0915839

### SCH M, PART I, LINES 25-28 OTHER NON-CASH CONTRIBUTIONS

			REVENUE				
		NUMBER OF	ON FORM 990,	METHOD OF			
DESCRIPTION	APPL?	CONTR.	PART VIII	DETER, REV.			
CAMPERS .		3	\$ 1,500.	FMV			
LANDSCAPING		5	62,538.	FMV			
LIGHTING		4	4,650.	FMV			
MD AG TRAILER		1	1,200.	FMV			
SIGNAGE		42	4,700.				
ADVERTISING .		2	7,488.	FMV			
ENTAINER VAN		1	385.				
TANK PUMPINGS .		17	1,200.	FMV			
TABLES, CHAIRS		98	1,684.				
DRAPE, CARPET		100	3,021.	FMV			
FOOD & BEVERAGE		4	11,922.				
SCREEN & EQUIP .		8 1	2,345.				
HORSE & CARRIAG		1	550.	FMV			
PHOTOS		288	1,550.	FMV			
BAND		1	250.				
PALM TREES		30	450.	FMV			
GOLF CARTS		2	300.				
		_					

# Form OOOO (Rev April 2009)

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

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

nternal Revenue	Service		File a Separate application	Horeactifetuin.			
O If you are	filing for an A	Automatic 3-Month E	xtension, complete only Part I	and check this box			□ X
•	-		matic) 3-Month Extension, comp		age 2 of this f	orm)	_
•	-	•	ly been granted an automatic 3-				
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ion of Time. Only submit				
,	•		equesting an automatic 6-month				<del></del>
All other corp income tax re		udıng 1120-C filers),	partnerships, REMICS, and trus	sts must use Form 700	4 to request a	an extension of tii	ne to file
returns noted the additional Form 990-T I	below (6 mol not automat nstead, vou r	nths for a corporatio tic) 3-month extension must submit the fully	ectronically file Form 8868 if you n required to file Form 990-T) Fon or (2) you file Forms 990-BL, completed and signed page 2 ( -file for Charities & Nonprofits	łowever, you cannot fil 6069. or 8870. group r	e Form 8868 eturns, or a c	electronically if ( composite or cons	i) you want solidated
1	Name of Exemp	t Organization				Employer identificat	on number
Type or print							
[		T FREDERICK				52-0915839	)
File by the due date for	Number, street,	and room or suite number	If a P O box, see instructions				
filing your return See	P.O. BOX						
instructions	City, town or po	st office, state, and ZIP co	ode. For a foreign address, see instruction	ns			
1	FREDERIC	K, MD 21705-	0604				
			e application for each return).				
X Form 990		· · · · · ·	Form 990-T (corporation)		Form 472	20	
Form 990			Form 990-T (section 401(a) or	408(a) trust)	Form 522	27	
Form 990			Form 990-T (trust other than		Form 606		
Form 990		}	Form 1041-A	35010)	Form 887		
		□ DECIZI E	DACIEAD				
O The books	s are in the c	are of ► <u>BECKY</u> <u>E</u>	KASULAK				
Telenhone	No. № 301	-663-5895	FAX No. ▷	301-663-9719			
			or place of business in the Unit	- <i></i>	OX		▶ □
			nization's four digit Group Exen			this is for the wh	ole group
	`		ne group, check this box				
	\	•	le group, crieck this box	Janu attach a nst with	TIC HAITICS A	ria Elias of all file	HIDOIS
	sion will cove		s for a corporation required to f	ula Form 000 T) avtans	ion of time	<del></del>	
•		·					
_		_, ∠0 <u>_L0</u> _, to file the organization's re	the exempt organization return	for the organization ha	med above		
_		•	turrior.				
	calendar yea		00 00	10/21 00 (	١.0		
<b>►</b> [X]	tax year beg	inning _11/U1	, 20 <u>08</u> _, and ending	10/31,20_0	<u>19</u>		
2 If this ta	ax year is for	less than 12 months	, check reason Initial re	turn Final retu	ırn 🔲 🤇	Change in accoun	ting period
		or Form 990-BL, 990 s See instructions	)-PF, 990-T, 4720, or 6069, ente	r the tentative tax, less	any	3a \$	0.
			990-T, enter any refundable crec nt allowed as a credit	lits and estimated tax p	ayments	3ь\$	0.
deposit	Due. Subtra with FTD cou tructions	ct line 3b from line 3 upon or, if required,	Ba. Include your payment with th by using EFTPS (Electronic Fed	is form, or, if required, eral Tax Payment Syst	tem)	3c \$	0.
Caution. If yo payment instr		o make an electroni	c fund withdrawal with this Form	8868, see Form 8453-	EO and Form	n 8879-EO for	
BAA For Priv	vacy Act and	Panerwork Reduction	on Act Notice, see instructions.			Form 886	8 (Rev. 4-2009)