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Department of the Treasury

# **Return of Organization Exempt From Income Tax**

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

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

OMB No\_1545-0047 2008 Open to Public Inspection

-	ilai Reveilu				Inspection
<u>A</u>	For the 20	008 calendar year, or tax year beginning $11/01/08$ , and ending $10/31$		_	
<u>B</u> (	Check if applic		VESTOCK	D Empl	oyer identification number
$\square$	Address chan	ge use IRS ASSOCIATION ASSOCIATION			
Ē,	Name change	Devine Pusiness As		71-	-0589889
$\equiv$	•	type. Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepi	hone number
יע	nitial return	See 1709 EAST NORTH ST		870	0-234-8602
∐.	Termination	Specific		G Gross rec	eiots \$ 141,695
$\overline{\Box}$	Amended retu	MACNOTTA AD 71753		<u> </u>	CIDIO
$\equiv$		E. Name and address of principal officer	<del></del>	H(a) le this	a group return for
$\Box$	Application pe	RICHARD T BLACKWELL		1	
		1709 E NORTH ST		H(b) Are a	Il affiliates
				includ	
				- II 'No	," attach a list (see instructions)
	Tax-exemp			-	
		▶ N/A	· <sub> </sub> · · · · · · · · · · · · · · · · · · ·	H(c) Group	exemption number
	Type of organ		L Year of formation		M State of legal domicile
<u>P</u>	art I	Summary			
	1 Brie	efly describe the organization's mission or most significant activities			
o)	(	COUNTY FAIR AND JUNIOR LIVESTOCK SALE			
ĕ					
rna					
® Aදු(kෑ්ලිsෙ & Governance	2 Che	eck this box   if the organization discontinued its operations or disposed of more the	nan 25% of its assets		
ŏ	3 Nui	mber of voting members of the governing body (Part VI, line 1a)		3	27
οδ (γ	4 Nu	mber of independent voting members of the governing body (Part VI, line 1b)		4	
æ	E Tot	tal number of employees (Part V, line 2a)		5	16
3	5 Tol			6	20
€. \$3	6 10t	ial number of volunteers (estimate if necessary)			
	l	tal gross unrelated business revenue from Part VIII, line 12, column (C)		7a	0
$\equiv$	b Net	t unrelated business taxable income from Form 990-T, line 34	Prior Y	7b	Current Year
4	, Co.	ntributions and grants (Part VIII, line 1h)	4,024	79,896	
SCANNELLUAN		•		4,348	56,659
Ç₹	l	ogram service revenue (Part VIII, line 2g)		1	67
₩.	1	estment income (Part VIII, column (A), lines 3, 4, and 7d)	<b> </b>	1,941	210
氢		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
<b>Z</b> -	t	tal revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		6,435	136,832
		ants and similar amounts paid (Part IX, column (A), lines 1-3)		9,567	58,545
99	14 Ber	nefits paid to or for members (Part IX, column (A), line 4)		0 740	1,873
S	15 Sal	laries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1	3,740	8,771
sasu		ofessional fundraising fees (Part IX, column (A), line 11e)		1,208	
Expe	<b>b</b> Tot	tal fundraising expenses (Part IX, column (B) The \$5) ED			
ũ	17 Oth	ner expenses (Part IX, column (A), lines (14-241)	[8	3,465	83,752
	18 Tot	tal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	16	7,980	152,941
	l 19 Re	venue less expenses. Subtract lines 18 from Nible 18 52 69 10 10	-1	1,545	-16,109
Net Assets or Fund Balances		16  9   15	Beginning		End of Year
sets	20 Tot	tal assets (Part X, line 16) tal liabilities (Part X, line 26)		.3,766	
d As	21 Tot	tal liabilities (Part X, line 26)	4	2,182	26,266
훏	<b>22</b> Net	t assets or fund balances Subtract line 21 from line 20	17	1,584	155,475
	art II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying sched	fules and statements, an	d to the best	of my knowledge
		and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on a	ll information of which pr	eparer has ar	ny knowledge
Sig	ın	1 Proton Ole			115/10
He		Signature of officer		Date	
	. •		EASURER	50.0	•
		Type or print name and title			
					Preparer's identifying number
Pai	id	Preparer's Da	colf	Г	(see instructions)
	eparer's		1/05/10 emplo	yed ▶ L	J P00610779
	e Only	Firm's name (or yours & RICHAPO I. Blackwell, CPA, PA		EIN	<u> </u>
<b>J</b> 31	Comy	if self-employed), 1709 E North St		Phone	
		address, and ZIP+4 Magnolia, AR 71753-2446		no 🕨	· · · · · · · · · · · · · · · · · · ·
May	the IRS	discuss this return with the preparer shown above? (see instructions)			Yes No

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2008)

Form 990 (2008) COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589889	Page 2
Part III Statement of Program Service Accomplishments (see instructions)	
1 Briefly describe the organization's mission COUNTY FAIR AND JUNIOR LIVESTOCK SALE	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O	Tes A No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O	Yes X No
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a (Code ) (Expenses \$ 75,549 including grants of \$ 51,950 ) (Revenue \$ JR LIVESTOCK SALE - EXHIBITORS SHOW LIVESTOCK (CATTLE, SWINE & SHEEP) THAT ARE BID ON BY LOCAL PATRONS WITH BIDS ABOVE FMV CONSIDERED DONATIONS	)
4b (Code ) (Expenses \$ 30,194 including grants of \$ 6,595 ) (Revenue \$ COUNTY FAIR - EXHIBITORS DISPLAY WORKS AND ITEMS (PROEDUCE, CRAFTS, ARTWORK AND ANIMAL EXHIBITS). ENTRANTS ARE JUDGED AND AWARDED 1ST, 2ND AND 3RD PLACE RIBBONS. CASH PRIZES ARE AWARED BY PLACE.	)
4c (Code ) (Expenses \$ 23,599 including grants of \$ ) (Revenue \$ COUNTY FAIR EXHIBITS - LOCAL MERCHANTS AND INDUSTRY DISPLAY THEIR PRODUCTS. NIGHTLY ENTERTAINMENT INCLUDES A FAIR QUEEN CONTEST, DANCE CONTES, TALENT CONTEST AND MUSICAL PERFORMANCES.	)
4d Other program services (Describe in Schedule O)  (Expenses \$ 23,599 including grants of \$ ) (Revenue \$  4e Total program service expenses \$ \$ 152,941 (Must equal Part IX, Line 25, column (B))	)
	Form <b>990</b> (2008)

			V	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u>x</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			<del></del> -
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	<u> </u>		
•	Schedule C, Part II	4		x
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			<del></del> -
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to			
٠	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		x
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,"			
٠	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	∸		<del></del>
•	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		$\frac{\ddot{x}}{x}$
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	-'		
• •	Parts VI, VII, VIII, IX, or X as applicable	11	x	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
-	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{1}{x}$
. 0 14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		$\frac{1}{x}$
.ча b		170		
•	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	175		<del></del>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		<del></del>
. <i>.</i> 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		<u> </u>
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		$\frac{1}{x}$
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		$\frac{\ddot{x}}{x}$
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? 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	<del></del>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		X
24a	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, 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
đ	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		X
b		<del>-</del> -		
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		X
26	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		X
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		X

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			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			ĺ
	employee), or an indirect business relationship through ownership of more than 35% in another entity			Ĺ
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			É
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-39 If "Yes," complete Schedule R, Part I	33		X
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		X
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		Х
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			1
	VI	37		Х

Form 990 (2008)

Statements Regarding Other IRS Filings and Tax Compliance Yes No Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of 2 U.S. Information Returns Enter -0- if not applicable 1a Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 16 Statements, filed for the calendar year ending with or within the year covered by this return 22 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X 3a If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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)? X 4a If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? X 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b 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? 5c X 6a Did the organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any guid pro guo contribution of more than X 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was X required to file Form 8282? 7с d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as X required? 7h 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 X organization, have excess business holdings at any time during the year? 8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. X Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? X 9b 10 Section 501(c)(7) organizations. Enter 10a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b

Part VI Governance, Management  required by the Internal Revenue Code.)  Section A. Governing Body and Management  For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the corcumstances, processes, or fortuges in Schodulo C Se matrixclosis  1s. Einler the number of voltage members of the governing body  1s. Einler the number of voltage members and the governing body  2 Det any officer, decolor, fusite, or key employee:  2 Det any officer, decolor, fusite, or key employee:  3 Det the cognization declares, fusites, or key employee:  4 Det the cognization become eaven during the year of a malaryal diversion of the governing body  5 Det the segunization heaven members or stochholders?  6 Det the organization heaven members or stochholders, or other prosons who may elect one or more members  6 of the governing body  7 Designation of the following because the second processes of the powering body  8 Designation of the following  a The governing body  9 Designation have local chapters, invarious or an anticolar diversion of the prosons?  9 Designation of the following  a The governing body?  9 Designation have local chapters, invarious or an anticolar diversion of the governing body?  9 Designation of the governing body  10 Designation of the governing body subject to approval by members, stockholders, or other persons?  11 Designation of the governing body  12 Designation of the powering body  13 Designation of the governing body  14 Designation of the governing body  15 Designation of the governing body  16 Designation of the governing body  17 Designation of the governing body  18 Designation of the governing body  18 Designation of the governing body  19 Designation of the governing body  10 Designation of the governing body  11 Designation of the governing body  12 Designation of the governing body  13 Designation of the governing body  14 Designation of the governing body  15 Designation of the governing body  16 Designation of the governing body  17 Designation o	Form	990 (2008) COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589	889			F	Page 6
Section A. Governing Body and Management   For each "Yes" response to lines 8 or 9b below, describe the corcumstances, processes, or changes in Schedule O. See instructions   1	Pa	· · · · · · · · · · · · · · · · · · ·	est in	formation	about policies i		
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the corcumstances, processes, or Archarges in Schedule O. See instructions  1a. Einer the number of victing members of the governing body  2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management of under the direct supervision of officers, directors or frustees, or key employees to a management of under the direct supervision of officers, directors or frustees, or key employees to a management of under the direct supervision of officers, directors or frustees, or key employees to a management opporation by the organization make any applicant changes to its organizational concurrents since the prior Form 990 van filed?  5 Did the organization make any applicant changes to its organizational concurrents and the prior Form 990 van filed?  6 Does the organization have members, stockholders, or other persons who may elect one or more members  7 Did by the companization contingent podry?  8 Did the organization contingent podry subject to approval by members, stockholders, or other persons?  7 Did by the following  8 To governing body?  8 Did the organization contingent part of the governing body?  9 Did by the following  1 The governing body?  1 Did by the following  1 The governing body?  1 Did by the following  2 Did by the following  3 Did by the following  4 Did by the following  5 Did by the following  6 Did by the following  1 The governing body?  1 Did by the following  1 The governing body?  2 Did by the following  3 Did by the following  4 Did by the following  5 Did by the following  6 Did by the following  6 Did by the following  6 Did by the following  7 Did by the following  8 Did by the followin	Sec	<del></del>					
a Enter the number of voting members of the governing body  Eath of the number of voting members of the governing body  Did any officer, director, insiste, or key employee have a family retainantly performed by or under the direct  2 hay officer, director, insiste, or key employee and a manual performed by or under the direct  3 between officers, director or trustee, or key employees to an anagement company or other person?  3 between officers, director or trustees, or key employees to a management company or other person?  4 between officers, director or trustees, or key employees to a management company or other person?  5 between officers, director or trustees, or key employees to a management company or other person?  5 between officers, director or trustees, or key employees to a management company or other person?  5 but he organization have members a stockholders?  6 but he organization have members a stockholders?  7 boes the organization have members as otherwise, and in a manual person of the organization assets?  5 could be organization have members, stockholders, or other persons who may elect one or more members  6 of the governing body?  7 could be organization have members, stockholders, or other persons?  7 between organization themselves, such those and procedure special persons.  8 but the organization themselves, such those and procedure special persons.  9 but the governing body?  8 at X  8 but the organization themselves are such as a such committee with authority to act on behalf of the governing body?  8 at X  8 but the organization have with the polecular special persons.  9 but the governing body?  8 at X  8 but the organization have with the polecular special persons.  9 but the governing body?  10 Was a copy of the Form 990 provided to the organizations governing body before it was flied? All organizations manual persons, complete in Schedule O the process. If any the organization was such as a s						Yes	No
table the number of voling members of the governing body  Enter the number of voling members that are independent  Define the number of voling members that are independent  Define the number of voling members that are independent  Define the number of voling members that are independent  Define the number of voling members that are independent  Define the number of voling members that are independent  Define the number of voling members and the number of the		For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the	е				,
b Enter the number of voling members hild are independent 2 Did any officer, director, frustee, or key employee have a family relationship or a business rotationship with 3 Did the organization delegiate control over management duties customarily performed by or under the direct 3 Did the organization of officers, directions or frustees, or key employees to a management company or other person? 3 Life the organization have any significant changes to its organizational documents since the prior Form 990 was filed? 4 Life to generate the management of the organization sasses? 5 Life to Did the organization have aware during the year of a material diversion of the organization's assess? 5 Life to Did the organization have members or stockholders? 6 Does the organization have members, stockholders? 7 Does the organization have members, stockholders, or offithe persons who may elect one or more members 7 of the governing body? 7 A Can see the organization on contemporaneously document the meetings held or written actions undertaken during 8 the year by the following 9 The powering body? 8 Life Committee with authority to act on behalf of the governing body? 9 Does the organization on have written policies and procedures governing the activities of such chapters, 9 Life Committee with authority to act on behalf of the governing body? 9 Does the organization have written policies and procedures governing the activities of such chapters, 9 Life Committee with authority to act on behalf of the governing body? 9 Does the organization have written policies and procedures governing the activities of such chapters, 9 Life Committee with authority to act on behalf of the governing body? 9 Life Committee with authority to act on behalf of the governing body? 10 Vess a copy of the Form 990 provided to the organizations governing body before it was filed? All organization? 11 Life there any officer, director or frustees, and key employees sets of reverse the Form 990 12 Life there are such as a consideration of the such as a co		circumstances, processes, or changes in Schedule O See instructions	1				
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14 Does the organization have a written document retention and destruction policy?  15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision  a The organization's CEO, Executive Director, or top management official?  b Other officers or key employees of the organization?  15a X  b Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a X  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ None  18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply Own website Another's website Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public							77
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision  a The organization's CEO, Executive Director, or top management official?  b Other officers or key employees of the organization?  Describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed None  18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website Another's website Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public		· · · ·					
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Describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a X  1			cision		1		
Describe the process in Schedule O (see instructions)  16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  16a X  1							
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with a taxable entity during the year?  b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?  Section C. Disclosure  17 List the states with which a copy of this Form 990 is required to be filed ▶ None  18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website □ Another's website □ Upon request  19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public					ŀ		
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<ul> <li>List the states with which a copy of this Form 990 is required to be filed ► None</li> <li>Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply           Own website  Another's website  Upon request</li> <li>Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public</li> </ul>	500				100	L	
<ul> <li>Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.         <ul> <li>Own website Another's website Upon request</li> </ul> </li> <li>Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.</li> </ul>							
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Own website Another's website Upon request  Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public			. (0)(0)3	, Jy/			
Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public							
policy, and financial statements available to the public	19		ict of in	terest			
	20	·	cords o	of the			

870-234-8602

1709 EAST NORTH STREET

AR 71753

MAGNOLIA

organization > RICHARD T BLACKWELL

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B) Average	(C) Position (check all that apply)						(D) Reportable	(E) Reportable	(F)		
Name and Title	hours per week	Individual trustee		Officer		Highest compensated employee	Former	compensation compensation from from related the organizations (W-2/1099-MISC)		Estimated amount of other compensation from the organization and related organizations		
JIM GIVENS												
PRESIDENT	10							761	0	1,112		
RICHARD BLAC												
TREASURER	4							0	0	0		
KEN SIBLEY	_											
VICE PRES	1							0	0	0		
JAMES BUSSEY								ا _ ا		_		
VICE PRES	1	ļ	ļ	<u> </u>				0	0	0		
BILL FULLENW	1								_	_		
VICE PRES	1							0	0	0		
LYNN BARNHAR										_		
VICE PRES	1							0	0	0		
CHERYL GIVEN	-									_		
SECRETARY	4							0	0	0		
MIKE DODSON								ام				
DIRECTOR	1	-						0	0	0		
PAT DOOLY	•									•		
DIRECTOR PHILIP STORY	1			$\vdash$		-		0	0	0		
DIRECTOR	1								•	•		
RICHARD METZ	<u> </u>			$\vdash$				0	0	0		
DIRECTOR	1							o	0	0		
RUSTY HAYES	<u> </u>			$\dashv$		-						
DIRECTOR	1							o	0	0		
STACY BUSSEY	_											
DIRECTOR	1	i						o	0	0		
STEVE NIPPER					_					<u> </u>		
DIRECTOR	1							ol	0	0		
TROY WALLER												
DIRECTOR	1							o	o	0		
LANCE ALBIN									<del></del>			
DIRECTOR	1						_	0	0	0		
BRIAN HARRIN	GTON											
DIRECTOR	11							0	0	0		

Part VII

(A)	(B)	Posi	tion (		C) k all th	nat ap	ply)	(D)	(E)		(F)		
Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	cor or a	Estimated amount of other mpensation from the ganization and related ganization	f on on d	
BRUCE MALOCH	l e												_
DIRECTOR BUDDY BARNHA	1 pm				⊢		_		0	1			0
DIRECTOR	1								o				0
CARLIE HAGEN			-					<u> </u>	<u> </u>			-	
DIRECTOR	1								o				0
DAVID MCWILI													
DIRECTOR	1							0	0				0
DEBBIE DOOLY													
DIRECTOR	1							0	0				0
DOUG COLLIER													
DIRECTOR	11				ļ			0	0				0
FELTON FOSTE													_
DIRECTOR  JOEL MCMAHEN	1							0	0	<b></b>			0
DIRECTOR	1							0	o				0
LARRY HOLLAN					-				- 0	<del></del>			
DIRECTOR	1							O	o				0
	PHERD												
DIRECTOR	1							0	0				0
					_	-				ļ			
1b Total							<u> </u>	761				,1	12
2 Total number of indiv	iduals (including those in 1	a) wł	no re	ceiv	ed m	ore t	han	\$100,000 in reportable con	npensation from the				
organization ▶ 0									<u> </u>				
										<b>-</b>	Y	es l	No
	ist any former officer, direct						loye	e, or highest compensated		ŀ	3	- ₹	x
	If "Yes," complete Schedu ed on line 1a, is the sum of						on a	and other compensation fro	m	F	<del>-</del>	-	
	related organizations greate											1	
<ul><li>individual</li><li>Did any person listed</li></ul>											4		<u> </u>
, .	on line 1a receive or accru the organization? If "Yes," or									İ	5	1	X
Section B. Independent													
1 Complete this table for	or your five highest compen	sate	d ind	lepe	nden	t con	trac	tors that received more that	n \$100,000 of				
compensation from the								<del></del>	(B)	—-г		<u></u>	
<del></del>	(A) Name and business address							Descrip	(B) otton of services		Compe	nsation	<u> </u>
	<del> ·</del>									-			
								_					
					_								
		- <u></u> -							· · · · · · · · · · · · · · · · · · ·				
-													
	-												
2 Total number of inder	pendent contractors (includ	nc 4	2000	ır 1	٠ - ا		0000	d more than \$100 and :-			<del></del>		<del>_,_,</del>
compensation from the		ng t	iuse	111 1	<i>,</i> wiii	) 16G	eive	u more man a 100,000 in			0		
DAA	<u> </u>						_	<del> </del>	· · · · · · · · · · · · · · · · · · ·		Form 9	90 (2	008)

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

Pa	rt V	III Staten	<u>nent of Rėv</u>	enue						
							(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
····	4-	Federaled sea		1a	***************************************			revenue	<del></del>	512, 513, or 514
Program Service Revenue   Contributions, gifts, grants anounts	1a	Federated can	· -	1b						
gen	D	Membership de	1	1c		<del></del>				
fts	C	Fundraising ev	ſ							
9.5	d	Related organi		1d		22 241				
sins	8	Government grants		<u>1e</u>		22,341				
ž t	T	All other contribution and similar amounts								
턀			Į	1f		57,555				•
and	9		ns included in lines 1	a-1f \$		_ [	70.006			
	<u>h</u>	Total. Add line	es 1a–1f			<u> </u>	79,896			
nge						Busn. Code				
eve	2a	Fair an	d Carnival	Procee	ads	<del> </del>	56,659			56,659
е Ж	b					-		<del>-</del>		
3	С					-				<del></del>
Se	d					-				
ran	е					-				<del></del>
õ	f	All other progra		enue		L	56.650		, .,	
<u> </u>	_ 9	Total. Add line				<b>•</b>	56,659			
	3		ome (including	dividen	ds, interes	st, and				
	_	other similar a	•			. 🏲 📙				<del></del>
	4		vestment of ta	x-exemp	ot bond pro	oceeds -				· · · · · · · · · · · · · · · · · · ·
	5	Royalties				· · · · ·				
			(i) Real			Personal				
	6a	Gross Rents		3,595						
	b	Less rental exps		3,930						
	C	Rental inc or (loss)		-335	<u> </u>		225			225
	d 7a	Net rental inco Gross amount from			<del></del>	<b>P</b>	-335			-335
		sales of assets	(ı) Securiti	ies	(11)	) Other				
		other than inventory			-	1,000				
	b	Less cost or other								
		basis & sales exps			<del>                                     </del>	933				
	C	Gain or (loss)	L		<u> </u>	67	67	67	ŧ	
	d	Net gain or (los			f	<b>P</b>	67	67	<del></del>	<del> </del>
•	ва	Gross income fro	-	ents						
ž		(not including \$		_\						
9			eported on line 10			ĺ				
Other Revenue	_	See Part IV, line		a						
the		Less direct ex	•	b					ŧ	
O		Net income or Gross income from		_	events		<u> </u>			
	98					I				
	_	See Part IV, line Less direct ex		a b						
			•	_	L	<b></b>				
		Net income or	_	-	villes					
	IVa	Gross sales of returns and all								
		Less cost of g		a b	\					
		_		_	enton/	<b></b>				
	٠	Net income or	ellaneous Revent		CITIOI Y	Busn. Code		,, ,, , , , ,		<del></del>
	11a	Misc			<del>-</del>		545			545
	b	FILSC					343		Ţ	
	C									<del></del>
	d	All other reven	ue.			<del>                                     </del>		<del></del>		<del></del>
	e	Total. Add line					545			
	12		e. Add lines 1h,	20.3	15647	· -	543			
	' <b>-</b>	9c, 10c, and 1		, -y, J, <b>'</b>	., 0, 00, 70	u, oc, ▶	136,832	67	o	56,869
		,,			_	-				

#### 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).

	All other organizations must				<u> </u>
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and			<del> </del>	
•	organizations in the U.S. See Part IV, line 21				<b>‡</b>
2	Grants and other assistance to individuals in				
-	the U.S. See Part IV, line 22	58,545	58,545		Ī
3	Grants and other assistance to governments,				
•	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members	1,873	1,873	<del></del>	
5	Compensation of current officers, directors,		=13.5		
·	trustees, and key employees				
6	Compensation not included above, to disqualified				
٠	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	8,090	8,090		
8	Pension plan contributions (include section 401(k)	-,			
•	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	681	681		
11	Fees for services (non-employees)				
'' a	Management				
b	Legal				
c	Accounting	3,500	3,500	<del> </del>	-
d	Lobbying	7,000			
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	482	482		
12	Advertising and promotion	3,338	3,338		
13	Office expenses	1,223	1,223		
14	Information technology				
15	Royalties				
16	Occupancy	38,700	38,700		·
17	Travel	204	204		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,852	3,852		
20	Interest	484	484		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	15,511	15,511		
23	Insurance	4,114	4,114		
-		,		······	
24	Other expenses Itemize expenses not				Į.
	covered above (Expenses grouped together				<u> </u>
	and labeled miscellaneous may not exceed	1			
	5% of total expenses shown on line 25 below )				
а	Contest Expense	9,531	9,531		
b	Printing and Publications	3,252	3,252		
С	Excise Taxes	1,109	1,109		
d	JLS Expenses	1,079	1,079		
е	Membership dues	344	344		
f	All other expenses	-2,971	-2,971		
25	Total functional expenses. Add lines 1 through 24f	152,941	152,941		
26	Joint Costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation				
DAA	<del></del>	<del></del> -			Form 990 (2008

P3	$\frac{1}{1}$	Balance Sneet									
		• •			(A) Beginning of year		(B) End of				
	1	Cash—non-interest bearing			46,841	1			651		
	2	Savings and temporary cash investments		-	10/011	2	•	<u>-                                    </u>	-		
İ	3	Pledges and grants receivable, net		-	8,550	3		7.	800		
	4	Accounts receivable, net		-	<u> </u>	4			45		
	5	Receivables from current and former officers, directors, trus	stees.	kev		_	<del>                                     </del>				
		employees, or other related parties. Complete Part II of Sch		· ·		5	1				
	6	Receivables from other disqualified persons (as defined und		<del></del>					· · · · · ·		
	-	4958(f)(1)) and persons described in section 4958(c)(3)(B)		į.							
		Part II of Schedule L		'		6					
ဖွ	7	Notes and loans receivable, net				7	<del></del>				
Assets	8	Inventories for sale or use				8					
βš	9	Prepaid expenses and deferred charges				9					
`	10a	Land, buildings, and equipment cost basis	10a	673,081							
- 1		Less accumulated depreciation Complete					1				
1		Part VI of Schedule D	10b	524,836	158,375	10c	1 14	18,	245		
	11	Investments—publicly traded securities		1	·	11					
	12	Investments—other securities See Part IV, line 11				12					
	13	Investments—program-related See Part IV, line 11		_		13					
	14	Intangible assets		Ī		14					
	15	Other assets See Part IV, line 11				15					
	16	Total assets. Add lines 1 through 15 (must equal line 34)			213,766	16	18	31,	741		
	17	Accounts payable and accrued expenses			3,927	17			53		
	18	Grants payable			31,560	18		26,	138		
	19 Deferred revenue19										
	20 Tax-exempt bond liabilities 20										
Liabilities	21	Escrow account liability Complete Part IV of Schedule D				21					
≝	22	1									
ap	employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L						1				
تــّ		persons Complete Part II of Schedule L		L		22					
	23	Secured mortgages and notes payable to unrelated third pa	rties	<u> </u>	6,695	23	ļ				
	24	Unsecured notes and loans payable		<u> </u>		24			75		
	25	Other liabilities Complete Part X of Schedule D		<u> </u>		25	ļ				
	26	Total liabilities. Add lines 17 through 25			42,182	26		<u> 26, </u>	266		
ces		Organizations that follow SFAS 117, check here ▶ ☐	and				1				
일		complete lines 27 through 29, and lines 33 and 34.					1				
Balan	27	Unrestricted net assets		-		27	-				
8	28	Temporarily restricted net assets		<del> -</del>		28					
Fund	29	Permanently restricted net assets	. 6			29	<del> </del>				
ű		Organizations that do not follow SFAS 117, check here	▶ 2	<u>S</u>			1				
6	20	and complete lines 30 through 34.		ŀ		00	ŧ				
Assets	30	Capital stock or trust principal, or current funds		-		30					
SS	31	Paid-in or capital surplus, or land, building, or equipment fur			171,584	31	10	-	475		
Ä	32	Retained earnings, endowment, accumulated income, or other transfer accepts as fixed belonger.	ner tu	nas –	171,584	32			475 475		
Net	33	Total net assets or fund balances		<del> -</del>	213,766				$\frac{473}{741}$		
	34 irt )	Total liabilities and net assets/fund balances  (I Financial Statements and Reporting		L	213,700	34	1 20	<u>,                                    </u>	741		
	,,,,	T mancial Statements and Reporting					<del></del>	Yes	No		
1	Δο	counting method used to prepare the Form 990 Ca	ch	X Accrual Oth	or		F	res	No		
² 2a		ere the organization's financial statements compiled or review					2a	1	х		
b		ere the organization's financial statements complied of review ere the organization's financial statements audited by an inde	-	•	•		2a 2b		X		
		Yes" to lines 2a or 2b, does the organization have a committe			oversight of		-20		<del></del>		
J		e audit, review, or compilation of its financial statements and					2c				
3a		a result of a federal award, was the organization required to		•					l —		
_		Single Audit Act and OMB Circular A-133?		J			3a		}		
b		Yes." did the organization undergo the required audit or audit	s?				3b		T -		

# SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

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

OMB No 1545-0047

Open to Public

Name of the organization COLUMBIA COUNTY FAIR & LIVESTOCK

ASSOCIATION

Employer identification number 71-0589889

The	orga	nization is not a	a private foundation because	it is (Please check only one org	anization	)							
1	$\Box$	A church, cor	nvention of churches, or asso	ciation of churches described in	section 1	70(b)(1)(	A)(i).						
2	П	A school desc	cribed in section 170(b)(1)(A	)(ii). (Attach Schedule E )									
3	П	A hospital or	a cooperative hospital service	e organization described in secti	on 170(b)	(1)(A)(iii)	. (Attach	Schedu	le H)				
4	П			in conjunction with a hospital de-						ne hospi	ital's name,		
	_	city, and state	•	•						•	•		
5	$\Box$	An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	ernmenta	ıl unıt de	scribed	ın			
	_	-	b)(1)(A)(iv). (Complete Part I	•	•								
6	$\Box$	-		vernmental unit described in sec	tion 170(	b)(1)(A)(v	·).						
7	П		•	ubstantial part of its support from			-	n the aei	neral pu	iblic			
	_	-	section 170(b)(1)(A)(vi). (Co		3.								
8				'0(b)(1)(A)(vi). (Complete Part II	)								
9	П	•		more than 33 1/3 % of its suppo	•	ntribution	s. memb	ership fe	ees, and	d aross			
-		<del>-</del>	•	ot functions—subject to certain e						_			
		•	•	i unrelated business taxable inco	•								
		• •	-	, 1975 See section 509(a)(2). (0									
10			<del>-</del>	clusively to test for public safety	-	-	a)(4), (se	e instru	ctions)				
11		-	- ·	clusively for the benefit of, to pe		•							
	_	-	•	d organizations described in sect				-		tion			
				e type of supporting organization	-								
		a Type		c Type III–Functiona			d	—ĭ	e III–Oti	her			
е				nization is not controlled directly			or more						
		•	· · · · · · · · · · · · · · · · · · ·	ind other than one or more public				•		ction			
		·	ection 509(a)(2)	·		ŭ							
f				mination from the IRS that it is a	Type I, Ty	pe II, or 1	ype III s	upportin	g				
		-	check this box			•		•	•				
g		Since August	17, 2006, has the organization	on accepted any gift or contribution	on from a	ny of the							
•		following pers	•			•							
				itrols, either alone or together wil	th persons	s describe	d in (ii)					Yes	No
			pelow, the governing body of	<u>-</u>	•		( )				11g(		
			member of a person describe	• • •							11g(		
			ontrolled entity of a person de								11g(		
h			• •	e organizations the organization	supports								· · · · · ·
- (1)	Name	e of supported	(II) EIN	(III) Type of organization	<del></del>	organization	(v) Did v	ou notify	(40)	s the	(m) A	mount of	
(1)		anization	(11) = 114	(described on lines 1-9		sted in your		nzation in	organizat			pport	
				above or IRC section	governing	document?	∞l (ı)			zed in the			
				(see instructions))				ort?		§ ?			
					Yes	No	Yes	No	Yes	No			
		-			<del> </del> -	<u> </u>					·		
					<del>                                     </del>	<del> </del>			<u> </u>				
					-								
					<del>                                     </del>								
					<del> </del>								
Tota	1				1								
, J.a			l	<u> </u>	<u> </u>	L	L		L	ليسيسيا			

Sche		LUMBIA COL				L-0589889	Page 2
P	Support Schedule for O (Complete only if you ch				(1)(A)(iv) and	170(b)(1)(A)(vi)	
Sec	tion A. Public Support					<del></del>	
	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	tion B. Total Support	<del></del>					
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						··,
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	s a section 501(c)	(3)	
	organization, check this box and stop here			-			▶□
Sec	tion C. Computation of Public Su	pport Percent	tage				
14	Public support percentage for 2008 (line 6,	column (f) divided	by line 11, column	(f))		14	%
15	Public support percentage from 2007 Sche	dule A, Part IV-A, I	ine 26f			15	%
16a	33 1/3 % support test—2008. If the organ	ization did not chec	k the box on line 13	3, and line 14 is 33	1/3 % or more, ch	eck this box	
	and stop here. The organization qualifies a	as a publicly suppor	rted organization				▶ ∐
b	33 1/3 % support test—2007. If the organ	ization did not chec	k a box on line 13 o	or 16a, and line 15	is 33 1/3 % or mor	e, check this	
	box and stop here. The organization qualif	ies as a publicly su	pported organizatio	n			▶ 🗌
17a	10%-facts-and-circumstances test—200	8. If the organizatio	n did not check a b	ox on line 13, 16a,	or 16b, and line 14	l is 10% or	
	more, and if the organization meets the "fa-						_
	organization meets the "facts-and-circumst	ances" test. The or	ganization qualifies	as a publicly suppo	orted organization		▶ []
b	10%-facts-and-circumstances test-200						
	more, and if the organization meets the "fac-	cts-and-circumstan	ces" test, check this	s box and stop her	e. Explain in Part I	V how the	
	organization meets the "facts-and-circumst	ances" test. The or	ganization qualifies	as a publicly suppo	orted organization		▶ ∐
18	Private foundation. If the organization did	not check a box or	line 13 16a 16b	17a or 17b check	this box and see ii	nstructions	▶

Schedule A (Form 990 or 990-EZ) 2008

33 1/3 % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

20 DAA \*Schedule\*A (Form 990 or 990-EZ) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589889

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10;
Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

Page 4

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

#### **Supplemental Financial Statements**

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

OMB No 1545-0047

Open to Public

**Employer identification number** Name of the organization COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589889 ASSOCIATION Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and 5 enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

<u>Sche</u>	edule D (Form 990) 2008 COLUMBIA	COUNTY FAIR &	LIVESTOCE	<u> </u>	71-05	89889			Page 2
Pa	art III Organizations Maintaining	Collections of Art, I	<u> Iistorical Treas</u>	ures, c	or Other S	Similar As	sets (d	continu	ıed)
3	Using the organization's accession and other ritems (check all that apply)	records, check any of the fo	llowing that are a sig	ınıficant u	use of its coll	ection			
а	Public exhibition	d Loan o	r exchange program	ns					
b		e Other	· · · · · · · · · · · · · · · · · · ·						
c	Preservation for future generations	v 👝							
4	Provide a description of the organization's collinar XIV	ections and explain how the	y further the organiz	ation's e	xempt purpo	se in			
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	receive donations of art, his	torical treasures, or	other sim	ular			Yes	
D-	art IV Trust, Escrow and Custod	<del></del>			ancwara	d "Voc" to			∐ No
re	Part IV, line 9, or reported a	_	•		answere	u res to	COIIII	<del>33</del> 0,	
4 -									
та	Is the organization an agent, trustee, custodial	n or other intermediary for c	ontributions or other	assets n	ot			.,	П.,
	included on Form 990, Part X?							Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following to	ible					<b>A</b>	
						<del> </del>		Amoun	ι
	Beginning balance					1c			
	Additions during the year					1d			
0	Distributions during the year					16			<del></del>
f	Ending balance					1f			
	Did the organization include an amount on For	m 990, Part X, line 21?						Yes	∐ No
	If "Yes," explain the arrangement in Part XIV								
Pa	art V Endowment Funds. Comp			$\overline{}$	· · · · · · · · · · · · · · · · · · ·				
		(a) Current year	(b) Prior year	(c) Two	years back	(d) Three yea	rs back	(e) Fou	r years back
1a	Beginning of year balance				<del></del>				
b	Contributions								
С	Investment earnings or losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses				·····				*****
g	End of year balance			<u> </u>					
2	Provide the estimated percentage of the year	end balance held as							
а	Board designated or quasi-endowment   _	%							
b	Permanent endowment   %								
C	Term endowment ▶ %								
3a	Are there endowment funds not in the possess	sion of the organization that	are held and admini	stered fo	r the				
	organization by								Yes No
	(i) unrelated organizations							3a(i)	
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(II), are the related organizations I	isted as required on Schedi	ule R?					3b	
4	Describe in Part XIV the intended uses of the	organization's endowment fo	unds						
Pa	art VI Investments—Land, Buildi	ngs, and Equipment	. See Form 990	, Part	X, line 10.				
	Description of investment	(a) Cost or other basis	(b) Cost or oth	ner	(c) De	preciation	1	(d) Book	value
		(investment)	basis (other)	)					
1a	Land		45	,311					45,311
b	Buildings						$\bot$		
С	Leasehold improvements								
d	Equipment								
е	Other		627	,770		524,836	5	1	02,934
otal	I. Add lines 1a-1e (Column (d) should equal Fo	rm 990, Part X, column (B)	line 10(c) )			<b>&gt;</b>		1	48,245

Schedule D (Form 990) 2008

Schedule D (F			71-0589889	
Part VII	Investments—Other Securities. See Form	·		
	(a) Description of security or category	(b) Book value	(c) Method of valua	
	(including name of security)		Cost or end-of-year mark	ket value
Financial deriv	ratives and other financial products			
Closely-held e	quity interests			
Other				
		(		
<del>-</del> -	·			
	· <b></b>			<del></del>
	· - <del>-</del>			
Total (Column	n (b) should equal Form 990, Part X, col (B) line 12)	<b>•</b>		
Part VIII	Investments—Program Related. See For		<u> </u>	······································
1 411 7111	(a) Description of investment type	(b) Book value	(c) Method of valua	tion
	(a) Bescription of investment type	(5) Book Value	Cost or end-of-year mark	
				<del></del>
-				<del> </del>
	<del></del>		<u> </u>	<del></del>
			<del></del>	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		··-··
				<del></del>
	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·
	n (b) should equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>		
Total. (Column	Other Assets. See Form 990, Part X, line	15.		
		15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
	Other Assets. See Form 990, Part X, line	15.		(b) Book value
Part IX	Other Assets. See Form 990, Part X, line (a) Descript	15.		(b) Book value
Part IX  Total. (Column	Other Assets. See Form 990, Part X, line (a) Descript  (b) should equal Form 990, Part X, col (B) line 15)	15. tion		(b) Book value
Part IX	Other Assets. See Form 990, Part X, line (a) Descript  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, li	15. tion	<b>&gt;</b>	(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value
Part IX  Total. (Column Part X	Other Assets. See Form 990, Part X, line  (a) Description  (b) should equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, II  (a) Description of liability	15. tion		(b) Book value

Sche	dule D (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTO		71-058988	9	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to F	Finar	ncial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		·	1_	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
	rt XII Reconciliation of Revenue per Audited Financial Statemen	ts W	ith Revenue per Ret		·
1	Total revenue, gains, and other support per audited financial statements		Mirrio Vollado por Titos	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			<u> </u>	
a	Net unrealized gains on investments	2a	1		
	-	2b			
b	Donated services and use of facilities	20 2c		1	
C	Recoveries of prior year grants  Other (Describe in Part XIV)		<del>                                     </del>		
d	Other (Describe in Part XIV)	_2d	<del></del>		
e	Add lines 2a through 2d			2e	· · · · · · · · · · · · · · · · · · ·
3	Subtract line 2e from line 1	ı	1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	١.			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	L		
_C	Add lines 4a and 4b			4c	
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)	4 9		5	<del> </del>
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	nts v	Vith Expenses per R	eturr	<u> </u>
1	Total expenses and losses per audited financial statements			1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	ı	1		
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c		1	
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2е	
3	Subtract line 2e from line 1		1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1	
þ	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	
Pa	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines	1a and	d 4, Part IV, lines 1b		
and 2	b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and	4b			
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Schedule D (Fo	orm 990) 200	8 CO1	POWR I	A COU	N.T. X	FAT1	K &	PTA:	EST	OCK_	/1	05	8988	39				Page <b>5</b>
Part XIV	Supplem	nental In	formati	on (conti	nued)													
***************************************																 		
											 				_	 	_	
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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

Open to Public OMB No 1545-0047 2008 Inspection

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Employer identification number 71-0589889 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States COLUMBIA COUNTY FAIR & LIVESTOCK General Information on Grants and Assistance the selection criteria used to award the grants or assistance? ASSOCIATION Name of the organization Parti

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 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Part II

× (h) Purpose of grant or assistance non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) (d) Amount of cash grant | (e) Amount of non-cash assistance (c) IRC section f applicable (b) EIN (a) Name and address of organization or government

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Schedule I (Form 990) 2008

Page 2

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 71-0589889 Schedule I (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK Part III Grants and Other Assistance to Individuals in the United State

OSC OCHEGAIN 1 (1 OILL) SSO) II AVAIROITAI SPACE IS HEEDEN	יי ששעה ושוויטווישם יי	וככתכת			
(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
	recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
Livestock Premium		420			
Livestock Premium		395			
Livestock Premium		520			•
Livestock Premium		395			
Livestock Premium		995			
Livestock Premium		645			-
Livestock Premium		795			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	omplete this part to p	rovide the information	n required in Part I, li	ne 2, and any other additior	nal information.

Schedule I (Form 990) 2008

Schedule I-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK Part II Continuation of Grants and Other Assistance to Individuals in the U.S.	TY FAIR & LIVESTOCK Assistance to Individuals in	~ .	1-0589889 (Schedule I (Form 990), Part III.	II.)	Page 2
(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
Livestock Premium		1,345			
Livestock Premium		1,195			
Livestock Premium		395			•
Livestock Premium		520			
Livestock Premium		570			•
Livestock Premium		420			
Livestock Premium		545			
Livestock Premium		795			
Livestock Premium		395			
Livestock Premium		495			
Livestock Premium		495			
Livestock Premium		1,095			
Livestock Premium		1,045			
Livestock Premium		1,045			
Livestock Premium		1,195			
Livestock Premium		1,195			
Livestock Premium		420			
Livestock Premium		470			
Livestock Premium		420			
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Part II Continuation of Grants and Other Assistance to Individua	er Assistance to Individuals in	iduals in the U.S. (Schedule I (Form 990), Part III.)	ule I (Form 990), Pan	(111.)	•
(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
Livestock Premium		795			
Livestock Premium		795			
Livestock Premium		995			
Livestock Premium		395			
Livestock Premium		545			
Livestock Premium		1,845			
Livestock Premium		845			
Livestock Premium		395			
Livestock Premium		795			
Livestock Premium		745			
Livestock Premium		1,520			
Livestock Premium		1,095			
Livestock Premium		595			
Livestock Premium		545			
Livestock Premium		1,295			
Livestock Premium		795			
Livestock Premium		795			
Livestock Premium		395			
Livestock Premium		495			
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Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTC Part II Continuation of Grants and Other Assistance to Individual	COLUMBIA COUNTY FAIR & LIVESTOCK 1 of Grants and Other Assistance to Individuals in	STOCK 71-0589889 duals in the U.S. (Schedule I (F	SCK 71-0589889 s in the U.S. (Schedule I (Form 990), Part III.)	(i	Page 2
(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
Livestock Premium		1,545			
Regular Premium		20			
Regular Premium		12			•
Regular Premium		16			
Regular Premium		16			•
Regular Premium		24			
Regular Premium		16			
Regular Premium		20			
Regular Premium		12			
Regular Premium		16			
Regular Premium		1			
Regular Premium		7			
Regular Premium		3			
Regular Premium		8			
Regular Premium		27			
Regular Premium		8			
Regular Premium		12			
Regular Premium		2			
Regular Premium		30			
				i	Schedule I-1 (Form 990) 2008

Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589889  Part II Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990),	VIY FAIR & LIVESTOCK or Assistance to Individuals in	STOCK 71-0589889 duals in the U.S. (Schedule I (F	39889 ule I (Form 990), Part III.)	(il	Page 2
(a) Type of grant or assistance	(b) Number of reapients	(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
Regular Premium		8			
Regular Premium		2			
Regular Premium		8			•
Regular Premium		11			
Regular Premium		S			
Regular Premium		2			
Regular Premium		24			
Regular Premium		2			
Regular Premium		3			
Regular Premium		3			
Regular Premium		1			
Regular Premium		3			
Regular Premium		20			
Regular Premium		19			
Regular Premium		3			
Regular Premium		36			
Regular Premium		39			
Regular Premium		69			
Regular Premium		2			
					Schedule I-1 (Form 990) 2008

Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK / I - USB 98   Part ii Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule	IT FAIR & LIVESTOCK Fr Assistance to Individuals in	duals in the U.S. (Schedule I (F	ule I (Form 990), Part III	(1)	Page 2
(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
Regular Premium		3			
Regular Premium		2			
Regular Premium		13			•
Regular Premium		В			
Regular Premium		19			
Regular Premium		15			
Regular Premium		72			
Regular Premium		8			
Regular Premium		3			
Regular Premium		32			
Regular Premium		3			
Regular Premium		3			
Regular Premium		3			
Regular Premium		3			
Regular Premium		10			
Regular Premium		15			
Regular Premium		9			
Regular Premium		34			
Reqular Premium		7			
					Schedule I-1 (Form 990) 2008

~	NTY FAIR & LIV	LIVESTOCK 71-05	71-0589889		Page 2
Part II Continuation of Grants and Other Assistance to Individuals in the U.S.	er Assistance to Indiv	iduals in the U.S. (Sche	(Schedule I (Form 990), Part III	II.)	•
(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
Recullar Premium		16			
Regular Premium		21			
Regular Premium		6			•
Regular Premium		113			
Regular Premium		06			
Regular Premium		28			
Regular Premium		S			
Regular Premium		7			
Regular Premium		17			
Regular Premium		22			
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Regular Premium		8			
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		4			
Regular Premium		9			
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					Schedule I-1 (Form 990) 2008

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Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTC Part II Continuation of Grants and Other Assistance to Individual	TTY FAIR & LIVE er Assistance to Indivi	LIVESTOCK 71-0589889 Individuals in the U.S. (Schedule I (F)	SCK 71-0589889 s in the U.S. (Schedule I (Form 990), Part III	II.)	Page 2
(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
Regular Premium		25			
Regular Premium		2			
Regular Premium		ĸ			
Regular Premium		8			
Regular Premium		R			
Regular Premium		29			
Regular Premium		3			
Regular Premium		8			
Regular Premium		13			
Regular Premium		9			
Regular Premium		229			
Regular Premium		7.9			
Regular Premium		10			
Regular Premium		13	:		
Regular Premium		18			
Regular Premium		2			
Regular Premium		5			
Regular Premium		16			1
Regular Premium		24			
					Schedule I-1 (Form 990) 2008

Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTO  Part II Continuation of Grants and Other Assistance to Individual	COUNTY FAIR & LIVESTOCK Of Other Assistance to Individuals in	STOCK 71-0589889 duals in the U.S. (Schedule I (F	OCK 71-0589889 s in the U.S. (Schedule I (Form 990), Part III	II.)	Page 2
(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
Regular Premium		7			
Regular Premium		4			
Regular Premium		8			
Regular Premium		11			
Regular Premium		24			
Regular Premium		1			
Regular Premium		3			
		95			
Regular Premium		9			
Regular Premium		7			
Regular Premium		9			
Regular Premium		20			
Regular Premium		31			
Regular Premium		23			
Regular Premium		23			
Regular Premium		1			
Regular Premium		11			
Regular Premium		21			
Regular Premium		2			
					Schedule I-1 (Form 990) 2008

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Schedule I-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOP Part II Continuation of Grants and Other Assistance to Individua	COLUMBIA COUNTY FAIR & LIVESTOCK of Grants and Other Assistance to Individuals in	STOCK 71-0589889 duals in the U.S. (Schedule   (F	OCK 71-0589889 Is in the U.S. (Schedule I (Form 990), Part III.)	CI	Page 2
	(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
Regular Premium		80			
Regular Premium		6			
Regular Premium		3			
Regular Premium		1			
Regular Premium		59			
Regular Premium		29			
Regular Premium		7			
Regular Premium		3			
Regular Premium		42			
Regular Premium		15			
Regular Premium		45			
Regular Premium		40			
Regular Premium		2			
Regular Premium		5			
Regular Premium		3			
Regular Premium		25			
Regular Premium		24			
Regular Premium		57			
Regular Premium		20			
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Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK 71-05898  Part II Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I	ITY FAIR & LIVESTOCK Pr Assistance to Individuals in	STOCK 71-0589889 duals in the U.S. (Schedule I (F	39889 ule I (Form 990), Part III	II.)	Page 2
(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
Regular Premium		24			
Regular Premium		2			
Regular Premium		3			•
Regular Premium		ю			
Regular Premium		9			•
Regular Premium		8			
Regular Premium		12			
Regular Premium		98			
Regular Premium		9			
Regular Premium		1			
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Regular Premium		81			
Regular Premium		45			
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Regular Premium		30			
Regular Premium		87			
Regular Premium		21			
Regular Premium		30			
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Schedule I-1 (Form 990) 2008 COLUMBIA COUNTY FAIR	NTY FAIR & LIVESTOCK	STOCK 71-0589889	==   -		Page 2
Fart it Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule	er Assistance to Indivi	duals in the U.S. (Sched	7		
(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
Regular Premium		33			
Regular Premium		18			
Regular Premium		8			
		9			
Regular Premium		3			
Regular Premium		46			
Regular Premium		41			
Regular Premium		6			
Regular Premium		13			
Regular Premium		3			
Regular Premium		3			
Regular Premium		16			
Regular Premium		9			
Regular Premium		26			
Regular Premium		8			
Regular Premium		6			
Regular Premium		3			
Regular Premium		3			
Regular Premium		3			
					Schedule I-1 (Form 990) 2008

Schedule 1-1 (Form 990) 2008 COLUMBIA COUN	COLUMBIA COUNTY FAIR & LIVESTOCK	STOCK 71-0589889	89889		Page 2
rart ii continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III.	er Assistance to Indivi	duals in the U.S. (Sched	Jule I (Form 990), Part II	[.)	
(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
D. C. 1		c			
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Regular Premium		10			
Regular Premium		O.			
Regular Premium		36			
Regular Premium		8			
Regular Premium		36			
Regular Premium		15			
Regular Premium		10			
Regular Premium		27			
Regular Premium		21			
Regular Premium		9			
Regular Premium		2			
Regular Premium		2			
Regular Premium		6			
Regular Premium		2			
Regular Premium		5			
Regular Premium		3			
Regular Premium		10			
Regular Premium		30			
					Schedule I-1 (Form 990) 2008

Schedule 1.1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589889  Part II Continuation of Grants and Other Assistance to Individuals in the 11 S (Schedule 1 (Form 990)) Bart III	COLUMBIA COUNTY FAIR & LIVESTOCK	STOCK 71-0589889	89889		Page 2
	(b) Number of recipients	(c) Amount of	(d) Amount of	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Regular Premium		m			
Regular Premium		25			
Regular Premium		3			•
Regular Premium		16			
Regular Premium		36			•
Regular Premium		20			
Regular Premium		80			
Regular Premium		10			
Regular Premium		3			
Regular Premium		8			
Regular Premium		1			
Regular Premium		2			
Regular Premium		24			
Regular Premium		27			
Regular Premium		21			
Regular Premium		18			
Regular Premium		21			
Regular Premium		8			
Regular Premium		1			
					Schedule I-1 (Form 990) 2008

Schedule I-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK 7  Part II Continuation of Grants and Other Assistance to Individuals in the U.S.	TY FAIR & LIVESTOCK r Assistance to Individuals in	STOCK 71-0589889 duals in the U.S. (Schedule I (F	39889 ule I (Form 990), Part III	11)	Page 2
(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
Regular Premium		Ю			
Regular Premium		34			
Regular Premium		24			
Regular Premium		10			
Regular Premium		2			•
Regular Premium		42			
Regular Premium		57			
		2			
Regular Premium		8			
Regular Premium		7			
Regular Premium		3			
Regular Premium		2			
Regular Premium		3			
Regular Premium		6			
Regular Premium		42			
Regular Premium		£			
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Regular Premium		2			
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Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589889  Part ii Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III.)	ITY FAIR & LIVESTOCK or Assistance to Individuals in	STOCK 71-05 iduals in the U.S. (Scheen	71-0589889 . (Schedule I (Form 990), Part II		Page 2
	(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
Regular Premium		2			
Regular Premium		1			
Regular Premium		7			•
Regular Premium		2			
Regular Premium		3			•
Regular Premium		5			
Regular Premium		3			
Regular Premium		5			,
Regular Premium		1			
Regular Premium		3			
Regular Premium		15			
Regular Premium		2			
Regular Premium		18			
Regular Premium		3			
Regular Premium		95			
Regular Premium		2			
Regular Premium		13			
Regular Premium		39			
Regular Premium		18			
					Schedule I-1 (Form 990) 2008

Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK 71-0589889  Part II Continuation of Grants and Other Assistance to Individuals in the II S (Schedule I (Form 990))	NTY FAIR & LIVE	& LIVESTOCK 71-0589889	89889 Mile I (Form 990), Dart III		Page 2
i	(b) Number of recipients	(c) Amount of cash grant		(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
Regular Premium		71			
Regular Premium		24			
Regular Premium		10			•
Regular Premium		3			
Regular Premium		2			•
Regular Premium		18			
Regular Premium		48			
Regular Premium		19			
Regular Premium		15			
Regular Premium		2			
Regular Premium		30			
Regular Premium		120			
Regular Premium		51			
Regular Premium		1			
Regular Premium		5			
Regular Premium		8			
Regular Premium		3			
Regular Premium		3			
Regular Premium		7			
					Schedule 1-1 (Form 990) 2008

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Schedule 1-1 (Form 990) 2008 COLUMBIA COUNTY FAIR & LIVESTOCK Part II Continuation of Grants and Other Assistance to Individuals in	r Assistance to Indivi	duals in the U.S. (Schedule I (Form 990), Part III.)	ule I (FUIII 330), FAIL	III.)	٨
(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
Regular Premium		1			
Regular Premium		7			
Regular Premium		2			
Regular Premium		П			
Award		20			
Award		15			
Award		15			
Award		15			
Award		10			
Award		25			
Award		600			
Award		10			
Award		25			
Award		300			
Award		150			
Award		006			
Award		8			
					Schedule I-1 (Form 990) 2008

**SCHEDULE O** 

(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

Inspection

2008

Open to Public

Department of the Treasury Internal Revenue Service

▶ 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.

Name of the organization

COLUMBIA COUNTY FAIR & LIVESTOCK **ASSOCIATION** 

Employer identification number

71-0589889

Form 990, Part III, Line 4d - All Other Achievements CONCESSIONS & GAMES - LOCAL NON-PROFIT ORGANIZATIONS OPERATE CONCESSIONS & GAME BOOTHS AND PAY A PORTION OF GROSS PROCEEDS TO THE FAIR. A CARNIVAL IS CONTRACTED TO PROVIDE RIDES AND AMUSEMENTS.

Form 4562

Department of the Treasury Internal Revenue Service

For Paperwork Reduction Act Notice, see separate instructions.

DAA

### **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172 2008

Attachment Sequence No

Form 4562 (2008)

Name(s) shown on return

COLUMBIA COUNTY FAIR & LIVESTOCK ASSOCIATION

Identifying number 71-0589889

	less or activity to which this form relates ndirect Depreciat:	ion								
	art I Election To Exper	se Certain Prop	•						··	
	Note: If you have a				re you	com	<u>plete Pa</u>	rt I.	,	050 000
1	Maximum amount See the instruct	•		S					1_	250,000
2	Total cost of section 179 property p	•	•						2_	000 000
3	Threshold cost of section 179 prop	erty before reduction	in limitation (see instri	uctions)					3	800,000
4	Reduction in limitation Subtract lin		•						4	
5_	Dollar limitation for tax year Subtract lin								5	
	(a) Description	n of property	(b	o) Cost (bu	siness use	only)	(c) E	lected cost		
6										
	·····									
7	Listed property Enter the amount f	rom line 29				7				
8	Total elected cost of section 179 pe	roperty Add amounts	ın column (c), lines 6	and 7					8	
9	Tentative deduction Enter the small	aller of line 5 or line 8							9	
10	Carryover of disallowed deduction	from line 13 of your 2	007 Form 4562						10	
11	Business income limitation. Enter t	he smaller of busines	s income (not less tha	an zero) o	r line 5 (s	ee ins	tructions)		11	
12	Section 179 expense deduction Ad	dd lines 9 and 10, but	do not enter more tha	an line 11					12	
13	Carryover of disallowed deduction	to 2009 Add lines 9 a	and 10, less line 12		<b>•</b>	13				
Note	: Do not use Part II or Part III below	for listed property Ins	stead, use Part V							
Pa	art II Special Depreciat	ion Allowance a	nd Other Depred	ciation	(Do no	t incl	ude liste	d prope	rty) (	(See instructions.)
14	Special depreciation allowance for	qualified property (oth	ner than listed property	y) placed	ın service	€				
	during the tax year (see instruction	s)							14	_
15										
Other depreciation (including ACRS)  Part III MACRS Depreciation (Do not include listed property.) (See instructions.)									16	15,195
Pa	art III MACRS Depreciat	ion (Do not inclu	ide listed propert	ty.) (See	e instru	ction	s.)			
			Section	ı A						
17	MACRS deductions for assets place	ed in service in tax ye	ears beginning before	2008					17	0
18	If you are electing to group any assets p	aced in service during th	e tax year into one or mo	re general	asset acco	ounts, c	heck here	▶□		
	Section B—	Assets Placed in Se	rvice During 2008 Ta	ax Year U	sing the	Gene	ral Depred	iation Sy	stem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for deprecial (business/investment only-see instruction	use (G)	Recovery period	(e) (	Convention	(f) Met	thod	(g) Depreciation deduction
19a	3-year property				-					
b	5-year property		1,7	750	5.0		MQ	200	DB	88
С	7-year property									
d		1								· · · · · · · · · · · · · · · · · · ·
е	15-year property	1		1						
f	20-year property	1		1 -						, -
a	25-year property	1		2	5 yrs			S/L		
	Residential rental				7 5 yrs		ММ	S/L		, ,
	property				7 5 yrs		MM	S/L		<del></del>
i	Nonresidential real				9 yrs		MM	S/L		
•	property			—   <u> </u>	<i>J</i> 113		MM	S/L		
	Section C—A	ssets Placed in Serv	rice During 2008 Tax	Year Usi	ing the A	l			vstem	
20a	Class life					1	Ворга	S/L	, 515	
	12-year	†			2 yrs			S/L		
	40-year						MM	S/L S/L		<u> </u>
	art IV Summary (See ins	tructions )	L		10 yrs	L	IVIIVI	- 3/L		
21	Listed property Enter amount from								21	228
22	Total. Add amounts from line 12, li		see 10 and 20 in colum	nn (n) as-	d line 24					220
	Enter here and on the appropriate I					tr			22	15,511
23	For assets shown above and place			porations.	-sce IIIS	<u>"</u> -				15,511
	enter the portion of the basis attribu	•	• •		į	23				
	and portion of the basis attribt	10 30011011 2037				<u>4</u> .7	1			

0	2

Form	4562 (2008	))		11,1101	.0010			,5050								Page 2
P	art V	Listed Prope	rty (Include	automobil	les, cerl	ain o	ther ve	hicles,	cellul	ar tele	phone	es, cer	ain cor	nputers	, and	<u>`</u>
		property used	d for entertai	nment, re	creation	i, or a	amuse	ment.)			•			·		
		Note: For any ve 24a, 24b, column	hicle for which yous (a) through (c)	ou are using of Section A	the stand all of Se	ard mil	eage rat	te or dedu ection Cur	ucting le f annlica	ase exp ble	ense, c	omplete	only			
Sec	tion A—D	epreciation and O									nobiles )					
24a		eve evidence to suppo					Yes	No			<u>_</u>	evidence	written?		Yes	X No
_ ,,,	(a)	(b)	(c)	(d		T	(e)	1 1.1.5	(1)	1 100,	(g)	1	(h)		<u>(i</u>	
	of property	Date placed in	Business/ investment	Cost or			s for depi		Recover	y i	Method/		Depreciat	tion	Elec	
(lis	t vehicles first)	service	use percentage	bas	iis	(bus	iness/inv use onl		period	C	onventior	•	deduction	on	sectio co	
25		depreciation allowa	<del></del>	listed proper	ty placed	in seni		··				-				
	•	used more than 50	· · · · · · · · · · · · · · · · · · ·		•			ig the tax				25				
26		used more than 50	•			11 000101	13)									
		dsmobile	770 III a qualifica	D03///C03 03/	<u> </u>	Ī			I				_			
•	<b></b> 0-	8/31/09	100.00%		4,564		4	,564	5.	0 20	)ODBI	νO		228		
		0/01/05			1,00.	<del>' </del>		7001	<del></del>	<del></del>	, <u>, , , , , , , , , , , , , , , , , , </u>	<del>-</del> ×				
			%													
27	Proporty	used 50% or less		IDOSS USO					L							
	Floperty	used 30 % of less i	ii a quaiileu bus	illess use					I			$\neg \neg$	·			
			0.4						l	S/						
			<u> </u>		<del></del>	<del> </del>	·	·		- 3/						
			0/							S/						
20	Add am	Lunta in actions (h)	%	27 Fatas b			1	4	l			<u>,,                                   </u>		228		
28 20		ounts in column (h),	•				i, page	1			ــا	28				
29	Add amo	ounts in column (i),	iine 26 Enter ne										-	29		
C					tion B—I											
		section for vehicles chicles to your employ										on for tho	se vehicles	3		
30	•	siness/investment r		7			<del>i .</del>		Γ	<u> </u>	1		т .			n.
30					(a)			b)	l .	c) 	,_	(d)	1	(e)	(1	
	during the year (do not include commuting miles)					Vehicle 1 Vehicle 2			Vehicle 3 Vehicle 4			nicle 4	ven	ncle 5	Vehicle 6	
-4	miles)  1 Total commuting miles driven during the year											+				
		<del>-</del>					-		<del> </del>		+					
32 33		er personal (nonco							1		<del> </del>					
33		es driven during the														
n 4		through 32	- T	N -	\			N.	<del> </del>	T	<del> </del>	1				
34		vehicle available fo	or personal		Yes	No	Yes	No	Yes	No	Yes	No_	Yes	No	Yes	No
25		ng off-duty hours?	rahi bu a				<del> </del>				<del>                                     </del>	<del> </del> -	<del> </del>	<del> </del>		
35		vehicle used prima in 5% owner or rela	• •								1					
36			<b>F</b>	2				-			╁	+	+	<del>                                     </del>		
30	_is anothe	er vehicle available				- 14/h -		- Mahial		b T	<u> </u>		1	<u></u>		
۸ncı	ver these		Section C—Qu							•			i			
		questions to determ 5% owners or relat				ung se	ection B	ioi venici	es useu	by emp	noyees	willo are				
iot	more triair	376 OWNERS OF TERAL	eu persons (see	instructions,	<u> </u>			<del></del>				<del></del>			Voc	Ma
37	Dovous	nointain a writtan n	aliair atatamant fl	nat arabibita	all naraan	مورر ام	of walas	بيامم بما	d		<b>h</b>		2		Yes	No X
3 <i>1</i> 38	-	naintain a written pe	•	-	•				•	•	• • •		ees			
30	-	naintain a written po instructions for vehi	•		•			•		iig, by y	our em	noyees				х
39		reat all use of vehic				) S, OI	1 76 OF III	ore owne	:15							X
40		rovide more than fi				nform	ation from	m vous or	nnlovoo	about						
••		of the vehicles, and					311011 1101	ii youi ei	прюуес	about						x
41		neet the requiremen				monetr	ation us	o2 (Soo u	netruetio	nc \				}		X
•	-	your answer to 37,	• .					•						1		
P	art VI	Amortization		13 103, 00	not comp	ele de	CHOILD	or the co	vereu ve	TIICIES_						
			·			T		(-)				(e	) [			
		(a)		(b) Date amor				(c) rtizable		(d	l) de	Amortiz		Amo	(f) rtization fe	or
		Description of costs		begir				nount		sect		perior			nis year	
42	Amortiza	tion of costs that be	eains durina voiri	2008 tax ve	ar (see in	structio	ons)			·	l.					
_						1			,,							
													1			
43	Amortiza	tion of costs that be	egan before your	2008 tax ve	ar	·		•					43	-		
14		d amounts in colur	-	=		героп	t						44			
															4.5.	