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Department of the Treasury Internal Revenue Service

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

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

Open to Public

OMB No 1545-0047

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

		coop - Last - Principal Pr			
	-		NOV 30, 200		
Bo	Check if pplicable	Please C Name of organization	D Employer ident	ification number	
	TAddre:	use IRS			
L	chang	print or YORK COUNTY AGRICULTURAL SOCIETY			
Ļ	Name chang	Doing Business As	23-	1241290	
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/sui	-		
L	Termir ation	Instruc-334 CARLISLE AVENUE	(71	<u>7)848-2596</u>	
X	Ameno	ed tions City or town, state or country, and ZIP + 4	G Gross receipts \$	5,774,104.	
	Applic tion	YORK, PA 17404	H(a) Is this a group	return	
	pendir	F Name and address of principal officer LEON I. BUTLER	for affiliates?	Yes X No	
		SAME AS C ABOVE	H(b) Are all affiliates		
1 1	Tax-exe	mpt status: X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527		a list (see instructions)	
		e: ► WWW.YORKFAIR.ORG	H(c) Group exempt		
				M State of legal domicile: PA	
	art I	Summary	a or formation. TOSS	WI State of legal dollifiche. E A	
L:		Briefly describe the organization's mission or most significant activities YORK COUN	MV ACDICITE	IIDAI EATD	
õ		AMERICA'S OLDEST FAIR	II AGRICULI	OKAL PAIK -	
Activities & Governance					
/eri	1	Check this box  If the organization discontinued its operations or disposed of mo	1	1	
é	ı	Number of voting members of the governing body (Part VI, line 1a)	13	3 12	
∞ ব	i	Number of independent voting members of the governing body (Part VI, line 1b)	4		
ies	5	Total number of employees (Part V, line 2a)			
₹	6	Total number of volunteers (estimate if necessary)	<u> </u>		
Act	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7		
	b	Net unrelated business taxable income from Form 990-T, line 34	7	ы -206,790.	
			Prior Year	Current Year	
0	8	Contributions and grants (Part VIII, line 1h)	42,975		
Revenue	9	Program service revenue (Part VIII, line 2g)	2,754,579	. 3,335,918.	
eve	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	996		
Œ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,789,939		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,588,489		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,000		
		Benefits paid to or for members (Part IX, column (A), line 4)	17000	1,0001	
£O.	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,236,641	. 818,687.	
enses	l	Professional fundraising fees (Part IX, column (A), line 11e)	0		
Den	l	Fotal fundraising expenses (Part IX, column (D), line 25)	<u>_</u>	•	
Exp	1	- · · · · · · · · · · · · · · · · · · ·	E 040 240	2 974 227	
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5,040,340		
		Total expenses Add lines 13-17 (must requal Part X) gottom (A), line 25)	6,280,981		
_ S	19	Revenue less expenses Subtract-line 18 from line 12	-692,492		
ts or	1	Total assets (Part X, line 16)	Beginning of Year	End of Year	
sset Balai	1		16,976,413		
et	1	Total liabilities (Part X, line 26)	11,780,660		
콭		Net assets or fund balances Subtract [ne/2] [from line 20]	<u>5,195,753</u>	. 4,573,284.	
Pa	art II	Signature Block	<del></del>		
1		Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statement and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	s, and to the best of my knowl	edge and belief, it is true, correct,	
				. 1.	
Sig	n	1 Dem 1 Dem	21 مي	411-	
Her	e	Signature of officer	Date		
LEON I. BUTLER, TREASURER					
		Type or print name and title			
		Preparer's Date,		parer's identifying number	
Paid		X\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	self- knployed ▶ [ (see	instructions)	
	arer's	Firm's name (or PARENTER FARITILE)	EIN ►		
Use	Only	yours if SUITE 200 221 W PHILADELPHIA ST.	LIIV P	· · · · · · · · · · · · · · · · · · ·	
		address, and YORK, PA 17401-2993	Phone no.	/717\ Q46_7000	
NA 0:	, the IF		[ Pilone no. >		
		S discuss this return with the preparer shown above? (see instructions)		X Yes No	
8320	01 12-1	8-08 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate in	istructions.	Form <b>990</b> (2008)	

		<u>3-1241290                                    </u>	Page 2
Pai	art III Statement of Program Service Accomplishments (see instructions)	·- ·- ·	
1	Bnefly describe the organization's mission		
	FOSTER AND IMPROVE AGRICULTURE AND HORTICULTURE, THE DOMES	STIC AND	
	HOUSEHOLD ARTS, AS WELL AS, THE INSTRUCTION OF THE PUBLIC		
	EXHIBITING ARTISTIC, MECHANICAL, AGRICULTURAL, AND HORTICAL		
		THI OKAL	<del></del>
	PRODUCTS.		
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.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
-	If "Yes", describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expens		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of gran	its and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code ) (Expenses $3$ , $847$ , $364$ . including grants of $4$ , $000$ . ) (Rever	ue\$ 2,357,	992.)
	THE ORGANIZATION CONDUCTS AN ANNUAL AGRICULTURAL FAIR FOR		
	BEGINNING THE FIRST FRIDAY AFTER LABOR DAY AND CLOSING ON		V OF
	THE SECOND WEEKEND. ATTENDANCE DURING THE 10 DAY FAIR WAS		1 01
		<u> </u>	
	APPROXIMATELY 560,000.		
			<del></del>
4b	(Code ) (Expenses \$ including grants of \$ ) (Rever	nue \$	)
			,
			<del></del>
		<u> </u>	
		<del></del>	
		<del></del>	
		<del></del>	
4c	(Code: ) (Expenses \$ including grants of \$ ) (Rever	nue \$	<u> </u>
	, Carpensor , Market		,
4d	Other program services (Describe in Schedule O.)		
<b>→</b> u	· · ·	1	
	(Expenses \$ including grants of \$ ) (Revenue \$		
4e	Total program service expenses ►\$ 3,847,364. (Must equal Part IX, Line 25, column (B))		20 (222)

832002 12-18-08

			V	
	Is the organization described in section 501(a)(2) or 4947(a)(1) (other than a private foundation)?	Γ	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A		х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			$\vdash$
3	public office? If "Yes," complete Schedule C, Part I	3		v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	-		^
5		_	N/	, n
e	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	11/	^-
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			l "
_	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,	_ !		٠,
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_ :		۱,,
_	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 X; or provide	_		١,,
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, 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	<u> </u>
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S?	14a_		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			١
	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 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			l
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 19 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 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		Х
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		
С	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		
d	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	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		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	ı		X

Form 990 (2008)

YORK COUNTY AGRICULTURAL SOCIETY
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 employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
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		X
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 301.7701-3? 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		X
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?	İ		
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X_
		_	OOO .	

Form 990 (2008)

YORK COUNTY AGRICULTURAL SOCIETY

Part V Statements Regarding Other IRS Filings and Tax Compliance

16 Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter 0- if not applicable  1 U.S. Information Returns Enter 0- if not applicable  2 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) with making with ording rules for reportable payments to vendors and reportable gamming (gambling) with making with or within the year covered by this return  2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, Red of the celendary year ending with or within the year covered by this return  8 Red of the celendary year ending with or within the year covered by this return.  9 If Yes, Thas if filed a Torm 590-T for this year? If Ywo, "provide an explanation in Schedule O Sh II Yes," and the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  9 If Yes, "has if filed a Torm 590-T for this year? If Ywo, "provide an explanation in Schedule O Sh II Yes," and the during the calendary year, did the organization have entered in, or a sphalar or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  1 If Yes, "I was the organization a party to a prohibited tax shelter transaction and the properties of the organization file form 8886T, Disclosure by Tax Eveript Entity Regarding Prohibited Tax Shelter Transaction?  1 If Yes, "I due the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  10 If the organization sheld may receive deductible contributions under section 170(c).  10 If the organization sheld may receive deductible contributions under section 170(c).  10 If the organization provide goods or services in exchange for any quip pro quo contribution of more than \$75?  11 Yes, "I did the organization include with every solicitation an express statement				Yes	No
b Enter the number of Forms W26 included in line 1a. Enter 0- if not applicable  □ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) winnings to prize winners?  □ Enter the number of employees reported on Form W3, Transmital of Wage and Tax Statements, filed for the cachedar year ending with or within the year covered by this return  □ It I all least one is reported on line 2a, did the organization file all required federal employment tax returns?  □ Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file the return, soe instructions)  □ If I all least one is reported on line 2a, did the organization file all required federal employment tax returns?  □ Note, if the sum of lines 1a and 2a is greater than 250, you may be required to e-file the return, soe instructions)  □ If I all least one is reported on line 2a, did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  □ If "Yes," has it filed a Form 990 T for this year? If "No," provide an explanation in Schedule 0  □ If "Yes," there the name of the foreign country (such as a bank account, securities account, or other financial account)?  □ If "Yes, a there the name of the foreign country (such as a bank account, securities account, or other financial account)?  □ If "Yes, a did the organization and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts.  □ If "Yes, a did the organization and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts.  □ If "Yes, a did the organization of exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts.  □ If "Yes, a did the organization of exceptions and filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts.  □ If "Yes, a did the organization in Foreign Bank and Financial Accounts.  □ If "Yes, a did the organ	1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
c Dot the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?  2a. Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  5		U.S. Information Returns Enter 0 if not applicable	ľ		
Gambling) winnings to prize winners?  2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar-year ending with or within the year covered by this return  5 b If at least one is reported on line 2a, did the organization file all required (dedraf employment tax returns?  Note. If the sum of lines 1 and 2a is greater than 250, you may be required to e-life this return, Gee instructions)  3a Dd the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  5 b If 1 1 2 a a strip 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 leuch as a bank account, securities account, or other financial accountly over, a financial account in a foreign country leuch as a bank account, securities account, or other financial accountly?  5 b If 1 1 2 a a b 1 1 2 a a strip 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 leuch as a bank account, securities account, or other financial accountly?  5 b If 1 1 2 a a strip time during the fact year?  5 c If 1 2 a a strip time the main of the foreign country leuch as a bank account, securities account, or other financial accountly?  5 c If 1 2 a a strip time the main of the foreign country leuch as a bank account, securities account, or other financial accountly?  5 c If 1 2 a a strip time the account in a foreign country leuch as a bank account and any time during the text year?  5 d Was the organization a party to a prohibited tax shelter transaction?  5 d Was the organization a party to a prohibited tax shelter transaction?  5 d With the organization shell the organization file Form 8886 T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6 d Was the account and the second and the second and the second transaction of the second account the se	b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.  2	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
the for the calendar year ending with or within the year covered by this return.  b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note, if the sum of lines 1 and 2a is greater than 250, you may be required to e-file this return (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If 1'Yes, 1's as 1 filed a Form 990 To fir this year? If 1'No, 1'provide an explanation in Schedule 0  b If 1'Yes, 2' enter the name of the foreign country (such as a bank account, securities account, or other financial account)?  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 in party to a prohibited tax shelter transaction?  6 If 1'Yes, 2' did the organization had it was or as party to a prohibited tax shelter transaction?  6 If 1'Yes, 2' did the organization in the filing and the report of Foreign Bank and Financial Accounts.  5a Was the organization of prohibited tax shelter transaction?  6 If 1'Yes, 2' did the organization that it was or as party to a prohibited tax shelter transaction?  6 If 1'Yes, 2' did the organization into a prohibition that it were not tax deductible?  6 If 1'Yes, 2' did the organization into any prohibition in the prohibition of more than \$75?  7 Organizations that may receive deductible contributions under section 170(c).  8 Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  9 If 1'Yes, 2' did the organization notly the donor of the value of the goods or services provided?  10 If 1'Yes, 2' did the organization notly the donor of the value of the goods or services provided?  11 In Internation of qualitied intellectual property, did the organization file a Form 1098 carequired?  12 Internation of qualitied intellectual property, did the organization file a Form 1098 carequired?  13 Section		(gambling) winnings to prize winners?	1c	X	
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1 a and 2a is greater than 250, you may be required to e-fife this return. (see instructions)  3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b If "Yes," has if filed a Form 990.*T for this year? If "No," provide an explanation in Schedule 0  a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country less than a sound an interest in, or a signature or other authority over, a financial account in a foreign country year.  b If "Yes," enter the name of the foreign country less was a bank account, securities account, or other financial account;?  b If "Yes," enter the name of the foreign country less was necessary to a prohibited tax shelter transaction?  b If "Yes," to question 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction?  b If "Yes," to question 5a or 5b, did the organization file Form 88861, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shetter Transaction?  b If "Yes," to question 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  b If "Yes," did the organization only the donor of the value of the goods or services provided?  c Did the organization stat may receive deductible contributions under section 170(c).  a Did the organization of qualified mellectual property, did the organization of qualified mellectual property of the goods or services provided?  b Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7b Did the organiz	2a				
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unrelated business gross isomerio €18,000 or more during the year covered by this return? 3b X  3b X  3b X  3b X  3c X  3		filed for the calendar year ending with or within the year covered by this return			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?  b if "Yes," has if field a Form 990 T for this yea? If "No," provide an explanation in Schedule 0  3b X  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   ▶  b if "Yes," enter the name of the foreign country   ▶  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.  b do any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  c if "Yes," to question 5a or 5b, did the organization the Form 8886 T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  c if "Yes," did the organization solicit any contributions that were not tax deductible?  d b did the organization solicit any contributions that were not tax deductible?  d b did the organization solicit any contributions under section 170(c).  a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?  b if "Yes," did the organization notify the donor of the value of the goods or services provided?  c Did the organization, during the year, or otherwise dispose of tangible personal property for which it was required to the Form 8282?  d if "Yes," indicate the number of Forms 8282 filed during the year  b off the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract?  7 b organization make any taxable distributions under section 4966?  N/A  a flots the organization make any stable distributions under section 4966?	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b If "Yes," has if lied a Form 990-T for this year / If "No," provide an explanation in Schedule O  4a 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)?  5b If "Yes," enter the name of the foreign country IS—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?  5b IV any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?  6c If "Yes," to question 5a or 5b, did the organization file Form 8888-T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction?  6c Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization shell and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization shell and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?  6c Did the organization shell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8829?  6c Did the organization shell, exchange, or otherwise dispose of tangible personal property which it was required to file Form 8829?  6c Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  7c X  7d X  7e X  7f X  7e X  7f X  7e X  7f X  7e X  7f X  7e Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Brief in N/A  a linkation fees and capital contributions under section 4966?  N/A		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
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d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  a Did the organization make any taxable distributions under section 4966?  N/A  b Did the organization make a distribution to a donor, donor advisor, or related person?  N/A  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  11 Section 501(c)(12) organizations. Enter N/A  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
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benefit contract?  f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?  h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?  8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?  9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.  a 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?  N/A  linitiation 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  Section 501(c)(12) organizations. Enter N/A  a Gross income from members or shareholders  b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)  11a  Section 4947(a)(1) non-exempt charitable trusts, Is the organization filing Form 990 in lieu of Form 1041?  b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b		,			
			12a		
	b	If "Yes," enter the amount of tax exempt interest received or accrued during the year N/A 12b	<u>r-</u>	000	(0000)

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Form 990 (2008)

YORK COUNTY AGRICULTURAL SOCIETY

23-1241290

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code )

Sec	tion A. Governing Body and Management			r
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions.			
1a	Enter the number of voting members of the governing body  1a 12			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	X	<u> </u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	1		
	governing body?	7a	X	<u> </u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following			
а	The governing body?	8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?	8b		X
9a	Does the organization have local chapters, branches, or affiliates?	<u>9a</u>		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	_X_	<u> </u>
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		<u> </u>
Sec	tion B. Policies			Γ
40	Donatha annount of house another another of others to also 0.00 MNA Bank to Loca 10.	40-	Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u>X</u>	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	406	Х	
	to conflicts?	12b	_^_	$\vdash$
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	х	
12	Does the organization have a written whistleblower policy?	13	<u> </u>	Х
13 14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent	1-4		
13	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
,	The organization's CEO, Executive Director, or top management official?	15a		x
	Other officers or key employees of the organization?	15b		X
.,	Describe the process in Schedule O (see instructions)			<del></del>
16=	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		
	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			<del> </del>
-	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶PA			
18	Section 6104 requires an organization to make its Forms 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 X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	incial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion 🕨	<b>-</b>	
	LEON I. BUTLER, TREASURER - (717) 848-2596			
22000	334 CARLISLE AVENUE, YORK, PA 17404			

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

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

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

(A)	(B)		(C)		(D)	(E)	(F)			
Name and Title	Average hours	Position (check all that apply)					M	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
MICHAEL N. RUTTER										
PRESIDENT	3.00	Х		X				0.	0.	0.
H. EUGENE SCHENCK					1					
VICE PRESIDENT	3.00	X		X				550.	0.	0.
CRESTON F. OTTEMILLER									_	_
SECRETARY	3.00	X	_	X	<u> </u>	<u> </u>		600.	0.	0.
LEON I. BUTLER				l						
TREASURER	3.00	X	-	X	<u> </u>			0.	0.	0.
EDWARD W. MELHORN	1 2 20	١.,			l			600	_	
ASST SECRETARY	3.00	X	-	X	<del> </del>	├	<u> </u>	600.	0.	0.
S. TERRY LEHR	2 00		l	х			ļ	600.	0.	0.
ASST TREASURER JOHN W. LAFEAN	3.00	<u> </u>	╁─	┢	$\vdash$			800.	<u> </u>	<u> </u>
DIRECTOR	3.00	Y			ļ			450.	0.	0.
TIM HORN	3.00	1			$\vdash$		-	430.	•	•
DIRECTOR	3.00	x						0.	0.	0.
GEORGE R. SPANGLER JR		† <del></del>								
DIRECTOR	3.00	x						550.	0.	0.
RICHARD SINDICICH										
DIRECTOR	3.00	X						550.	0.	0.
DON YOUNG										
DIRECTOR	3.00	X	ļ		<u> </u>	1	<u> </u>	500.	0.	0.
SCOTT WEAVER									_	
DIRECTOR	3.00	X	1	1	ļ	<del> </del>		0.	0.	0.
MICHAEL A FROEHLICH										
GENERAL MANAGER	40.00	ļ	1	X	<u> </u>			119,400.	0.	8,408.
	<del>                                     </del>				-	-				
					<u> </u>		<u> </u>			
						_				
			_	•	<u> </u>	-		•		F 000 (2000)

(A) Name and business address	(B) Description of services	(C) Compensation
RED WIRE BLUE WIRE, INC., C/O CREATIVE ARTISTS AGENCY, 2000 AVE OF THE STARS, LOS	GRANDSTAND PERFORMER	342,613.
JOHN VAN ALLEN, ESQ 111 EAST MARKET STREET, YORK, PA 17401	LEGAL SERVICES	196,679.
SHPANTS, INC., C/O CREATIVE ARTISTS AGENCY, 2000 AVE OF THE STARS, LOS ANGE	GRANDSTAND PERFORMER	175,000.
SAREPTA, INC., C/O CREATIVE ARTISTS AGENCY, 3310 WEST END AVENUE, NASHVILLE	GRANDSTAND PERFORMER	125,000.
SPONSOR SOURCE, 811 RUSSELL AVENUE, SUITE 300, GAITHERSUBRG, MD 20879	CONTRACT NEGOTIATIONS	114,188.
2 Total number of independent contractors (including those in 1) who received more from the organization ▶ 6	· · · · · · · · · · · · · · · · · · ·	

832009 02-02-09

#### Part IX | Statement of Functional Expenses

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

	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	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	,	•		
2	Grants and other assistance to individuals in				<del></del>
_	the US See Part IV, line 22	4,000.	4,000.		
3	Grants and other assistance to governments,	27000			
•	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	117,203.		117,203.	
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(1)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	479,005.	479,005.		
8	Pension plan contributions (include section 401(k)	2,370000			
•	and section 403(b) employer contributions)	14,997.		14,997.	
9	Other employee benefits	88,581.		88,581.	
10	Payroll taxes	118,901.	118,901.	<u> </u>	
11	Fees for services (non-employees)	220/3021			
	Management				
b	Legal	236,229.		236,229.	
c	Accounting	27,729.		27,729.	
d				= 1,1,== 1	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	,			
12	Advertising and promotion	214,591.	214,591.		
13	Office expenses	192,908.	61,868.	131,040.	
14	Information technology				
15	Royalties				
16	Occupancy	867,232.	822,514.	44,718.	
17	Travel	19,991.	15,815.	4,176.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	15,545.	15,545.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	304,595.	296,561.	8,034.	
23	Insurance	86,944.	86,944.		
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total		·		
	expenses shown on line 25 below.)		4 4 6 7 7 6 7		
а	GRANDSTAND ATTRACTIONS	1,165,793.	1,165,793.		
b	COST OF FREE ATTRACTION	151,635.	151,635.		
С	SPONSORSHIP COMMISSIONS	114,188.		114,188.	
d	HARNESS RACE PURSE	110,421.	110,421.		
е	BEVERAGE EXPENSE	89,252.	89,252.		
f	All other expenses	277,174.	214,519.	62,655.	<del></del> -
25	Total functional expenses. Add lines 1 through 24f	4,696,914.	3,847,364.	849,550.	(
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	i			

Fai	LA	balance Sheet .								
			(A) Beginning of year	(B) End of year						
	1	Cash · non-interest-bearing	2,000. 1	2,000.						
	2	Savings and temporary cash investments	132,701. 2	713,970.						
	3	Pledges and grants receivable, net	3							
	4	Accounts receivable, net	693,759. 4	637,277.						
	5	Receivables from current and former officers, directors, trustees, key								
		employees, or other related parties. Complete Part II of Schedule L.	5							
	6	Receivables from other disqualified persons (as defined under section								
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete								
		Part II of Schedule L	6							
ts	7	Notes and loans receivable, net	7							
Assets	8	Inventories for sale or use	8							
Ř	9	Prepaid expenses and deferred charges	26,896. 9	119,696.						
	10a	1 1 00 400 550								
		Less: accumulated depreciation. Complete								
		Part VI of Schedule D 10b 12,590,131.	16,121,057. 10c	15,540,428.						
	11	Investments - publicly traded securities	11							
	12	Investments - other securities. See Part IV, line 11	12							
	13	Investments - program-related See Part IV, line 11	13							
	14	Intangible assets	14	96,240.						
	15	Other assets. See Part IV, line 11	15							
	16	Total assets. Add lines 1 through 15 (must equal line 34)	16,976,413. 16	17,109,611.						
	17	Accounts payable and accrued expenses	1,781,347. 17	213,780.						
	18	Grants payable	18							
	19	Deferred revenue	881,901. 19	653,380.						
	20	Tax-exempt bond liabilities	20							
တ္	21	Escrow account liability Complete Part IV of Schedule D	21							
litie	22	Payables to current and former officers, directors, trustees, key employees,								
Liabilities		highest compensated employees, and disqualified persons. Complete Part II of Schedule L	22							
-	23	Secured mortgages and notes payable to unrelated third parties	9,117,412. 23							
	24	Unsecured notes and loans payable	24	11,669,167.						
	25	Other liabilities Complete Part X of Schedule D	25							
	26	Total liabilities. Add lines 17 through 25	11,780,660. 26	12,536,327.						
		Organizations that follow SFAS 117, check here								
S		lines 27 through 29, and lines 33 and 34.								
ĕ	27	Unrestricted net assets	5,195,753. 27	4,573,284.						
Sala	28	Temporarily restricted net assets	28							
Ď.	29	Permanently restricted net assets	29							
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here   and								
ō		complete lines 30 through 34.								
ets	30	Capital stock or trust principal, or current funds	30							
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund	31							
et/	32	Retained earnings, endowment, accumulated income, or other funds	32							
Z	33	Total net assets or fund balances	5,195,753. 33	4,573,284.						
لـــــا	34	Total liabilities and net assets/fund balances	16,976,413. 34	17,109,611.						
Par	t XI	Financial Statements and Reporting								
			_	Yes No						
1	Acco	ounting method used to prepare the Form 990 🔲 Cash 🛛 🗓 Accrual	_l Other							
2a	Were	the organization's financial statements compiled or reviewed by an independent	accountant?	2a X						
b		the organization's financial statements audited by an independent accountant?		2b X						
С	If "Ye	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,								
		w, or compilation of its financial statements and selection of an independent acco		2c X						
3a		result of a federal award, was the organization required to undergo an audit or au	dits as set forth in the Single Audr	t						
		and OMB Circular A-133?		3a X						
<u>b</u>	lf "Ye	es," did the organization undergo the required audit or audits?		3b						

832011 12-18-08

#### **SCHEDULE A**

Department of the Treasury

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

OMB No 1545-0047

Open to Public

Internal Revenue Service Inspection **Employer identification number** Name of the organization YORK COUNTY AGRICULTURAL SOCIETY 23-1241290 Reason for Public Charity Status (All organizations must complete this part ) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives. (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III ) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a \_\_\_\_ Type I b \_\_\_\_ Type II c \_\_\_ Type III - Functionally integrated d \_\_\_\_ Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the organizations the organization supports. (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization organization in col. in col. (i) listed in your organization in col. organization support (i) organized in the U.S.? (described on lines 1-9 governing document? (i) of your support? above or IRC section Yes Yes (see instructions)) Yes No No

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

Schedule A (Form 990 or 990-EZ) 2008

	edule A (Form 990 or 990 EZ) 2008	Oiti	Describedia	Castiana 470	Vb.V4\/A\/;\	-1 470/L\(4\)/A\(-)	Page 2			
Ра	rt II Support Schedule for,	~			λ(D)(1)(A)(IV) an	ia 170(b)(1)(A)(\	/1)			
800	(Complete only if you checke	d the box on line 5	, 7, 01 8 01 Part 1.)	<del></del>						
		4 1 2004	#10005	1 1 2000	( I) 0007	4 3 0000	(n T ) 1			
	Calendar 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 organ-				-					
2	ization'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)				ļ					
	Public Support. Subtract line 5 from line 4									
Sec	tion B. Total Support			<del></del>	1					
Cale	endar 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									
40	business is regularly carried on	·	· · · · · · · · · · · · · · · · · · ·							
10	Other income. Do not include gain									
	or loss from the sale of capital									
44	assets (Explain in Part IV.)  Total support. Add lines 7 through 10									
	Gross receipts from related activities,	etc /see instructi	one)		. I <u></u>	12				
	First five years. If the Form 990 is fo			rd fourth or fifth t	tax vear as a sectu					
	organization, check this box and stop	•	3 mot, 5555ma, tm	14, 104111, 01 11111		o., 00 ((0)(0)	ightharpoonup			
Sec	ction C. Computation of Publ		rcentage		-					
14	Public support percentage for 2008 (	line 6, column (f) d	ivided by line 11,	column (f))		14	%			
15	Public support percentage from 2007	7 Schedule A, Part	IV-A, line 26f			15	%			
16a	33 1/3% support test - 2008. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or	more, check this bo	ox and			
	stop here. The organization qualifies as a publicly supported organization									
b	b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box									
	and stop here. The organization qualifies as a publicly supported organization									
17a	10% -facts-and-circumstances tes	-								
	and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization									
	meets the "facts-and-circumstances"	•	•		•		▶∟			
b	10% -facts-and-circumstances tes	_								
	more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the									
40	organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.									
<u>18</u>	18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions  Schedule A (Form 990 or 990-EZ) 2008									
					SCI	euule A (FORM 99L	01 990-EL) 2008			

Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar 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 300,220 663,721 23,833 48,040 46,682 include any "unusual grants.") 1.082.496. 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 898 952 3,376,551 16,867,848. 3,787,315 3,447,038 2,357,992 3 Gross receipts from activities that are not an unrelated trade or business under section 513 014 126 1,014,126. 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 - 5 4,451,036 3,470,871 4,199,172 3,424,591 3,418,800 18,964,470. 7a Amounts included on lines 1, 2, and 620,473 199,792 33,020 3 received from disqualified persons 853,285. b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 8,016. 8.016. 10c, 11, and 12 for the year or \$5,000 620,473 207,808. 33,020 861,301. c Add lines 7a and 7b 8 Public support (Subtract line 7c from line 6) 18,103,169. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total 9 Amounts from line 6 3,418,800 4,451,036 3,470,871 4,199,172 3,424,591 18,964,470. 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 1,887,331 1,881,633 2,163,898 1,859,774 1 114 256 8,906,892, b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 1,859,774 1,881,633 1,114,256 1,887,331 2,163,898 8,906,892, 11 Net income from unrelated business activities not included in line 10b, whether or not the business is 35,000. 36,750. 40,337 40,516 152,603. regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 625,521 487,037 513,256 444,406 2 070 220 assets (Explain in Part IV) 13 Total support (Add lines 9, 10c, 11, and 12) 30,094,185. 14 First five years, If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization. check this box and stop here Section C. Computation of Public Support Percentage 60.16 15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g 55.21 16 % Section D. Computation of Investment Income Percentage 29,60 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 32.63 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h % 19a 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  $\triangleright [X]$ 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 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2008

#### 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.

2008
Open to Public Inspection

Name of the organization

Employer identification number

Schedule D (Form 990) 2008

	YORK COUNTY AGRICU		23-1241290
Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
	Aggregate value at end of year		<del>.</del>
4		writing that the appote hold in depar advise	d funds
5	Did the organization inform all donors and donor advisors in		
_	are the organization's property, subject to the organization's	•	L Yes
6	Did the organization inform all grantees, donors, and donor a	• •	
Par	for charitable purposes and not for the benefit of the donor of		
			art IV, line /
1	Purpose(s) of conservation easements held by the organization	,	
	Preservation of land for public use (e g , recreation or p		orically important land area
	Protection of natural habitat	Preservation of certified	d historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a conse	ervation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06	2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the taxable
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, violations, and	d
	enforcement of the conservation easements it holds?	<b>3</b> , , , , , , , , , , , , , , , , , , ,	Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, a	and enforcing easements during the year	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	-	)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense :	
	include, if applicable, the text of the footnote to the organiza	•	·
	conservation easements		3
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Ot	her 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, no	ot to report in its revenue statement and bal	lance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	•	·
	the footnote to its financial statements that describes these	·	,
b	If the organization elected, as permitted under SFAS 116, to		e sheet works of art, historical treasures
	or other similar assets held for public exhibition, education, c	·	· · · · · · · · · · · · · · · · · · ·
	and the second of the second o	or research in furtherance of public service,	provide the following amounts relating to
	these items:		<b>*</b>
	(i) Revenues included in Form 990, Part VIII, line 1		➤ \$ ➤ \$
	(ii) Assets included in Form 990, Part X	annuan ay athar amulan annut- for for	
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under SFAS 1	To relating to these items	<b>.</b>
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

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Saha	dulo D (Form 000) 2009 VODV COI	NIMV ACDIC	TTT MTT	י דגם	COCTEMV		•	22 11	241200	D 2
	t III Organizations Maintaining Co	NTY AGRIC				r Othe			241290 ets (control	
3	Using the organization's accession and other									
	that apply).	•		J	ū				(	
а	Public exhibition	d		Loan or e	exchange progra	ıms				
b	Scholarly research	e			oxonango progra					
c	Preservation for future generations	•	· L	Oo					<del></del>	
4	Provide a description of the organization's col	lections and explai	n how th	oov furthe	or the organization	nn's avan	nt nurne	sea in Da	rt XIV	
5	During the year, did the organization solicit or	•		-	_			JSC III F A	II AIV	
J	to be sold to raise funds rather than to be mai				•	si Sirinar	assets		Yes	□ No
Pai	t IV Trust, Escrow and Custodial					rod "Voc	to Form	000 Pa		
	reported an amount on Form 990, Part		· Comp	iete ii org	jailization answe	ieu res	to Futti	1 990, Fa	iit iv, iiile 5,	OI .
12	Is the organization an agent, trustee, custodia		tiany for	contribut	tions or other as	coto not i	naludad			
Ia	on Form 990, Part X?	in or other intermet	Jiary IUI	Continua	dons of other as	5612 1101 1	nciuaea	_	7 v	
_	, , , , , , , , , , , , , , , , , , ,			A b. 1				<u> </u>	Yes	∟ No
b	If "Yes," explain the arrangement in Part XIV a	ina complete the ic	liowing	table					A	<del></del>
	Danisa halaasa						<del>     </del>		Amount	
C	Beginning balance					-	1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance			•		-	1f		<del></del>	
2a	Did the organization include an amount on Fo	rm 990, Part X, line	217			•			Yes	∟ No
	If "Yes," explain the arrangement in Part XIV		1 113.4							
Par	t V Endowment Funds. Complete if								<del></del>	
		(a) Current year	(b) P	rior year	(c) Two year	s back (	d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions								<u> </u>	
С	Investment earnings or losses									
d	Grants or scholarships									
ę	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 a	as							
а	Board designated or quasi-endowment > _		_%							
b	Permanent endowment >	%								
С	Term endowment ▶%	6								
3a	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization									
	by								Y	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as required of	n Sched	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Buildings	s, and Equipm	ent. Se	ee Form 9	990, Part X, line	10.				
_	Description of investment	(a) Cost or o	ther	(b) C	ost or other	(c) De	preciatio	n T	(d) Book	/alue
		basis (investr	nent)	ba	sis (other)					
1a	Land				109,787.				109	,787.
	Buildings				742,377.	9.7	87,9	01.	14,954	
С	Leasehold improvements				-	- <b>.</b>				•_ <del></del>
d	Equipment			1.	869,416.	1.7	03,6	50.	165	,766.
-	Other				408,979.		98,5			,399.
	. Add lines 1a-1e (Column (d) should equal For	m 990 Part X colu	ımn (B)			, _	<u></u>		15.540	

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 YORK COUNT	Y AGRICULTURAL	SOCIETY	23-1241290 Page <b>3</b>
Part VII Investments - Other Securities.	ee Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value	Со	(c) Method of valuation: st or end-of-year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
		·	
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	Roo Form 990 Part V June 11	2	
		J	(c) Method of valuation
(a) Description of investment type	(b) Book value	Co	st or end-of-year market value
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, lin	- 15		
	) Description		(b) Book value
	, 2000		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Total. (Column (b) should equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part X	line 15 )		<u>.                                    </u>
(a) Description of liability	A, IIIIe 25	(b) Amount	
Federal income taxes		<b>(-7</b> :	+
receiai income taxes			†
			†
			7
			1
Total. (Column (b) should equal Form 990, Part X, col (B)	line 25)		
In Part XIV, provide the text of the footnote to the organic	zation's financial statements	that reports the org	ganization's liability for uncertain tax positions
under FIN 48			
832053 12-23-08			Schedule D (Form 990) 2008

•

Sche	dule D (Form 990) 2008 YORK COUNTY AGRICULTURAL S			23-	<u>1241290</u>	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 t	o Financial Stat	ements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	<del>-</del>	1		4,074	,445.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		4,696	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			,469.
4	Net unrealized gains (losses) on investments		4			, 105
5	Donated services and use of facilities		5			
	Investment expenses		6			
6	·		7			
7	Prior period adjustments		8		<u>-</u>	
8	Other (Describe in Part XIV)		9		·	0.
9	Total adjustments (net) Add lines 4-8				622	,469.
10 Date	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 t XII   Reconciliation of Revenue per Audited Financial Statem	onte With Paya	10	Oturn	-044	,409.
·		ients with neve	ilde bei i		5,721	004
1	Total revenue, gains, and other support per audited financial statements	•	•	1	3,741	,004.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
a	Net unrealized gains on investments	2a		-{		
b	Donated services and use of facilities .	2b		-{		
С	Recoveries of prior year grants	2c		-{		
d	Other (Describe in Part XIV)	2d 1,69	9,659.	4	1 600	650
е	Add lines 2a through 2d			2e	1,699	,659.
3	Subtract line 2e from line 1			3	4,021	,345.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		1 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		4		
b	Other (Describe in Part XIV)	4b 5	3,100.	4		
С	Add lines 4a and 4b			4c		<u>,100.</u>
_5_	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	4,074	<u>,445.</u>
Pa	t XIII Reconciliation of Expenses per Audited Financial Stater	nents With Expe	enses per	Retu		
1	Total expenses and losses per audited financial statements			1	6,343	<u>,473.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1				
а	Donated services and use of facilities	2a		. I		
b	Prior year adjustments	2b		.		
С	Losses reported on Form 990, Part IX, line 25	2c		1 1		
d	Other (Describe in Part XIV)	2d 1,69	9,659.	<u>.</u> ]		
е	Add lines 2a through 2d			2e	1,699	
3	Subtract line 2e from line 1			3	4,643	<u>,814.</u>
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		] [		
b	Other (Describe in Part XIV)	4b 5	3,100.	.] [		
С	Add lines 4a and 4b			4c	53	,100.
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	4,696	,914.
Pa	t XIV Supplemental Information					
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	III, lines 1a and 4, Pa	art IV, lines 1	b and a	2b, Part V, line	4, Part
X, Pa	rt XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b					
PAI	RT XII, LINE 2D - OTHER ADJUSTMENTS:					
REI	TAL EXPENSES: 1699659.					
PAI	RT XII, LINE 4B - OTHER ADJUSTMENTS:					
MT	SCELLANEOUS INCOME DIRECT EXPENSES: 53100					
MIT	CEPTHAMEORO INCOME DIVECT EVERAPES: 22100	•				
		·	<del></del>			
<u>PAI</u>	RT XIII, LINE 2D - OTHER ADJUSTMENTS:					

832054 12-23-08 Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 YORK COUNTY Supplemental Information (continue	NTY AGRICULTURAL	SOCIETY	23-1241290 Page 5
RENTAL EXPENSES: 1699659.			
	·		·
PART XIII, LINE 4B - OTHER AI	DJUSTMENTS:		
MISCELLANEOUS INCOME DIRECT I	EXPENSES: 53100.		
			· · · · · · · · · · · · · · · · · · ·

# SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

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

2008
Open to Public Inspection

Name of the organization
YORK COUNTY AGRICULTURAL SOCIETY

Employer identification number 23-1241290

FORM 990, PART VI, SECTION A, LINE 6: THE YORK COUNTY AGRICULTURAL
SOCIETY HAS MEMBERS AND LIFE MEMBERS. ONCE A PERSON BECOMES A LIFE MEMBER
THEY RECEIVED AN ANNUAL LIFE MEMBER PASS FOR ADMISSION TO THE YORK FAIR AND
A MEAL AT THE YCAS ANNUAL MEETING.
FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF THE ORGANIZATION
ELECT 1) ADDITIONAL LIFE MEMBERS ACCORDING TO THE TERMS OF THE BYLAWS.
SUCH ELECTIONS REQUIRE A MAJORITY VOTE. 2) THE DIRECTORS OF THE SOCIETY AT
THE ANNUAL MEETING
FORM 990, PART VI, SECTION A, LINE 7B: THE FOLLOWING ACTIONS ARE REQUIRED
TO BE APPROVED BY THE MEMBERS: 1) SALE OF THE GROUNDS OR ANY PART THEREOF
ARE SUBJECT TO THE CONSENT OF TWO-THIRDS OF THE MEMBERS IN ATTENDANCE AT A
SPECIAL MEETING CALLED FOR THAT PURPOSE. 2) ALTERATIONS AND AMENDMENTS TO
THE BYLAWS REQUIRE A VOTE BY THE MEMBERS AT THE ANNUAL MEETING.
CONCURRENCE OF TWO-THIRDS OF THE MEMBERS PRESENT ARE REQUIRED FOR ADOPTION.
FORM 990, PART VI, SECTION A, LINE 8B: EACH COMMITTEES REQUEST AND
RECOMMENDATIONS ARE TAKEN BACK TO FULL BOARD FOR THEIR APPROVAL AND ACTION.
FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 IS REVIEWED AND
APPROVED BY THE FINANCE COMMITTEE WITH A COPY PROVIDED TO EACH MEMBER OF
THE GOVERNING BODY PRIOR TO BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY IS

REVIEWED ANNUALLY BY THE ORGANIZATION'S DIRECTORS AND OFFICERS. THEY ARE

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

Schedule O (Form 990) 2008

#### **SCHEDULE O** (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Information to Form 990**

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

YORK COUNTY AGRICULTURAL SOCIETY

Employer identification number 23-1241290

THEN REQUIRED TO SIGN A STATEMENT IDENTIFYING ANY POTENTIAL CONFLICTS. IF
A CONFLICT EXISTS, THE BOARD MEMBERS WILL BE REQUIRED TO REMOVE THEMSELVES
PRIOR TO THE VOTING ON THE ISSUE.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE THE
GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE FOR PUBLIC
INSPECTION AS THIS IS NOT REQUIRED BY FEDERAL OR STATE LAW. THE ANNUAL
FINANCIAL STATEMENTS ARE MAILED TO LIFE MEMBERS BEFORE THE ANNUAL MEETING
AND THEN REVIEWED BY THE TREASURER AT THE ANNUAL MEETING FOR OTHER MEMBERS.
THE ORGANIZATION INCLUDES A COPY OF ITS FINANCIAL STATEMENTS WITH THE STATE
REGISTRATION FILED WITH THE PENNSYLVANIA DEPARTMENT OF STATE, BUREAU OF
CHARITABLE ORGANIZATIONS. THESE DOCUMENTS ARE A MATTER OF PUBLIC RECORD
AND CAN BE VIEWED AT THE BUREAU OFFICE.
PART XI, LINE 2C
THE TREASURER AND BUDGET COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT
OF SELECTION OF AN INDEPENDENT AUDITOR, AUDIT PROCESS AND COMPLETION OF
FINANCIAL STATEMENTS. TREASURER/BUDGET COMMITTEE RECOMMENDS AND
SUBMITS TO BOARD FOR APPROVAL. THIS PROCESS HAS NOT BEEN CHANGED FROM
PRIOR FORM 990.