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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)

OMB No 1545-0047

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

and ending

Open to Public Inspection

AI	For th	e 2009 ca	alendar year, or tax year beginning and ending	<u></u>	
В	Check if	Please use IR		D Employer ident	ification number
	Addr chan	ess label o	DEDVETEV COINTY VOITH EXTO INC		
	Name	ge 1	Doing Business As		7179678
	Initia returi	n See	Number and street (or P.O. box if mail is not delivered to street address) Room/s		
	Term ated	Instruc		304	<u>-263-5869</u>
<u>_</u>	Amer	1	City or town, state or country, and ZIP + 4	G Gross receipts \$	332,506.
	Appli tion pend		MARTINSBURG, WV 25402	H(a) Is this a group	
	pend	FNa	me and address of principal officer:CAROLYN BOHRER	for affiliates?	Yes X No
			ME AS C ABOVE	H(b) Are all affiliates	
			tus X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527		a list. (see instructions)
			WW.BERKELEYCOUNTYYOUTHFAIR.ORG	H(c) Group exemp	
				Year of formation: 1976	M State of legal domicile: WV
P	art I			CONTROL MOUNTS	DEODI ELG
ě	1		escribe the organization's mission or most significant activities: TO STREN		
1 3 2010 Activities & Governance			CITIES THROUGH EDUCATION, TRAINING, SHOW		
ern	2		if the organization discontinued its operations or disposed of r		
Š	3		of voting members of the governing body (Part VI, line 1a)	·	3 /
⇔ ⇔	4		of independent voting members of the governing body (Part VI, line 1b)	<u> </u>	4 7
20 je s	5		mber of employees (Part V, line 2a)	·	1000
ക≣	6		mber of volunteers (estimate if necessary)	<u></u>	1000
¥اچ	7a		ss unrelated business revenue from Part VIII, column (C), line 12		<u>0.</u>
	b	Net unre	lated business taxable income from Form 990 T, line 34 CCEIVED	Ti	<u>b</u> 0.
3				Prior Year	Current Year
a)	8		tions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g) MAY 1 9 2010	11,073	
NE NE D	9	•		287,441	
氢氰	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)	,	
Z	11	Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 14e)	8,316	
SCANNED Revenu	12		enue - add lines 8 through 11 (must equal Part VIII, column (2) Tine 12)	348,790	329,186.
Ø	13		nd similar amounts paid (Part IX, column (A), lines 1-3)		
	14		paid to or for members (Part IX, column (A), line 4)	0.660	0 226
ë	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)	8,660	8,326.
Expenses	16a		onal fundraising fees (Part IX, column (A), line 11e)	<u> </u>	
X	t		draising expenses (Part IX, column (D), line 25)	205 520	220 151
	17		penses (Part IX, column (A), lines 11a-11d, 11f-24f)	295,529	
			penses Add lines 13-17 (must equal Part IX, column (A), line 25)	304,189	
	19	Revenue	less expenses Subtract line 18 from line 12	44,601	
Assets or Ralances				Beginning of Current Yes	
SSE	20		sets (Part X, line 16)	1,753,537	
et	2 2 1		pilities (Part X, line 26)	2,242	
	22		ets or fund balances Subtract line 21 from line 20	1,751,295	1,752,004.
<u> </u>	art II		áture Block	ents, and to the best of my know	ledge and helief it is true, correct
		and comp	alties of perjury, I declare that I have examined this return including accompanying schedules and statemi lete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowl	ledge	isage and belief, it is true, comoct,
				1 M 4.	115, 2010
Sig	•	97	gnature of officer	Date	13, 2011
He	re	1	$\boldsymbol{\sigma}$	oute V	
			AROLYN BOHRER, TREASURER De or print name and title		
		+	Design Al Protection	Check if Pre	parer's identifying number
Pai	d	Preparei		self- (sec	instructions)
Pre	parer'	Signatur Firm's næ		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Use	Only	yours if	RUZHERFORD & DOHMSON, F.C.	EIN ►	
	-	self-emple address,	and Doubli Cimilitati Dilitati	Db	/EAO\ 660 7070
		ZIP + 4	WINCHESTER, VIRGINIA 22601	Phone no.	
ма	y the	IHS discu	ss this return with the preparer shown above? (see instructions)		X Yes No

932002 02-04-10

Pai	t IV Checklist of Required Schedules	<u> </u>	<u> </u>	ugo o				
	· · · · · · · · · · · · · · · · · · ·		Yes	No				
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		103	140				
•	If "Yes," complete Schedule A	1	x					
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			$\overline{}$				
Ŭ	public office? If "Yes," complete Schedule C, Part I	3		х				
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X				
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and		Ī					
•	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5						
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to							
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part	/ 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," 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 X; or provide							
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X				
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?							
	 If "Yes," complete Schedule D, Part V Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, IX, or X as applicable 							
11		10		X				
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		X					
	Part VI.							
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total							
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.							
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total							
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.							
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in							
	Part X, line 16? If "Yes," complete Schedule D, Part IX	İ	İ	İ				
=	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		1					
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		1					
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.							
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	ļ	1					
	Schedule D, Parts XI, XII, and XIII.	12	<u> </u>	X				
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?							
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional							
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X				
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X				
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,							
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>				
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							
	located outside the United States? If "Yes," complete Schedule F, Part III	16	-	X				
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,							
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	-	<u> </u>				
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			37				
	1c and 8a? If "Yes," complete Schedule G, Part II	18	+	X				
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	- 1	1	1				

complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u> </u>	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	_22	ļ	<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? 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 lines 24b through 24d and complete			
	Schedule K. If "No", go to line 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		
	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	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	ŀ		
	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		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
·	an officer, director, trustee, or direct or indirect owner? 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			
30	contributions? If "Yes," complete Schedule M	30	l	х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
31	If "Yes," complete Schedule N, Part I	31		x
20	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		-	
32	Schedule N, Part II	32		x
00	·	32	-	-41-
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_	-	A
34	Was the organization related to any tax-exempt or taxable entity?			х
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	-	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			v
	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?			3.5
	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	<u> </u>	X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Form	990 ((2009)

•	S 000 /=			<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>		
	Part V	Statements	Regarding O	ther IRS	Filings an	d Tax Con	pliance

			162	140
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b (٦.		
	Enter the flamber of 7 office 17 Earlies and 12 Enter a miner approach	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1		
	filed for the calendar year ending with or within the year covered by this return	١	· •	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		1	.
_	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	-	X
b	If "Yes," enter the name of the foreign country:	1		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
_	Financial Accounts.			v
		<u>5a</u>		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5b</u>		^
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
•	Tax Shelter Transaction? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	5c		-
ьа	any contributions that were not tax deductible?	6a		x
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa	-	1
ь	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services			Ì
_	provided to the payor?	7a		X
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X_
d	If "Yes," indicate the number of Forms 8282 filed during the year]		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		ļ <u> </u>
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	<u> </u>	ļ
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			İ
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8_	ļ	ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			ŀ
а	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	4		ļ
11	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders . 11a	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	<u> </u>	000	(0000)
		Form	990	(2009)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

<u>sec</u>	tion A. Governing Body and Management			
			Yes	<u>No</u>
_	Enter the number of voting members of the governing body Enter the number of voting members that are independent.			
ь	Little 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	2		X
2	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3		3		X
4	of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
4	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
5	Does the organization have members or stockholders?	6		X
6 7a		_		
1 a	governing body?	7a	x	
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
٠	by the following.			
а	The governing body?	8a	x	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, 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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	_X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		_X_
Þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		<u> </u>
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?			
а	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		<u> </u>
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
	taxable entity during the year?	16a		X
þ	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	406		
S00	exempt status with respect to such arrangements? tion C. Disclosure	16b		L
	List the states with which a copy of this Form 990 is required to be filed NONE			
17	· · · · · · · · · · · · · · · · · · ·	for		
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 public inspection. Indicate how you make these available. Check all that apply.	.0.		
	Own website 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, ar	nd fina	incial	
13	statements available to the public.		ioidi	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion 🖿	•	
20	CAROLYN BOHRER - 304-263-5869			
	P.O. BOX 1302, MARTINSBURG, WV 25402			
		Form	990 ((2009)

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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee"
- 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	(cl	Position (check all that apply)				lv)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
DEAN MCDONALD										
PRESIDENT	2.00			X	<u> </u>		_	0.	0.	0
RUTH HADEN									•	•
1ST VICE PRESIDENT	2.00		_	X	-	⊢		0.	0.	0
CHARLOTTE M. VICKERS					l				•	_
2ND VICE PRESIDENT	2.00	<u> </u>	_	X		<u> </u>		0.	0.	0
CHRIS SMALLWOOD	2 00				İ				0	_
3RD VICE PRESIDENT	2.00			X	\vdash			0.	0.	0
DAWN PINGLEY	2 00			₹.				0.	0.	0
RECORDING SECRETARY BARBARA KENDIG	2.00		-	X	\vdash	\vdash		0.	0.	<u> </u>
CORRESPONDING SECRETARY	2.00			x			ĺ	0.	0.	0
CAROLYN BOHRER	2.00	 	-	^		 	\vdash	•		
TREASURER	2.00			x				0.	0.	0

Form **990** (2009)

(A) Name and business address	(B) Description of services	(C) Compensation
Total number of independent contractors (including but not limited to the		

Form **990** (2009)

Part IX | Statement of Functional Expenses

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

	All other organizations must comple	and 501(c)(4) organizati ete column (A) but are ı			(D).
	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				
	organizations in the U.S. See Part IV, line 21				<u> </u>
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	7,200.	5,040.	2,160.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	1,126.	788.	338.	
11	Fees for services (non-employees):				
а	Management				.
b	Legal				
С	Accounting	2,855.		2,855.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	_			
f	Investment management fees				
g	Other				
12	Advertising and promotion	15,547.	15,547.		
13	Office expenses	3,652.	2,557.	1,095.	
14	Information technology				
15	Royalties				
16	Occupancy	50,096.	35,067.	15,029.	
17	Travel	284.		284.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		·		
19	Conferences, conventions, and meetings		<u>-</u>		·
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	71,837.	50,286.	21,551.	<u> </u>
23	Insurance	6,626.	4,638.	1,988.	
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.) FAIR EXPENSES - OTHER	59,594.	59,594.	0.	0.
a		51,769.	51,769.		0.
b	CONCESSIONS COST	39,985.	39,985.		
C	ENTERTAINMENT MISCELLANEOUS	14,906.		4,472.	
d	MISCELLANEOUS	3,000.	10,434. 2,100.	900.	
e	EQUIPMENT RENTAL	3,000.	4,100.	300.	
f	All other expenses Add lines 1 through 24f	328,477.	277,805.	50,672.	0.
<u>25</u>	Total functional expenses. Add lines 1 through 24f Joint costs. Check here ☐ if following	340,411.	411,003.	30,012.	
26					
	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	educational campaign and junitralsing Suitstation			<u> </u>	5. 000 (0000)

932010 02-04-10

Form **990** (2009)

	990 (2009) BERKELEY COUNTY YOUTH FAIR, INC Balance Sheet	<u> </u>	23-7	7179678 Page 1
	•	Data not ones.	(A)		(B)
_			Beginning of year		End of year
	1	Cash · non-interest-bearing	418,974.	1	99,797
	2	Savings and temporary cash investments		2	357,860
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	 	4	
	5	Receivables from current and former officers, directors, trustees, key		1	
		employees, and highest compensated employees. 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		li	
		Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
₹	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment, cost or other			
		basis. Complete Part VI of Schedule D 10a 1,843,605.			
	ь	Less. accumulated depreciation 10b 551,059.	1,326,789.	10c	1,292,546
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	7,774.	15	3,053
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,753,537.	16	1,753,256
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue .		19	
	20	Tax-exempt bond liabilities		20	
တ္	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
ā		highest compensated employees, and disqualified persons. Complete Part II			
5		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D	2,242.	25	1,252
	26_	Total liabilities. Add lines 17 through 25	2,242.	26	1,252
		Organizations that follow SFAS 117, check here			
ç		lines 27 through 29, and lines 33 and 34.			
ဋ	27	Unrestricted net assets	1,751,295.	27	1,752,004
<u> </u>	28	Temporarily restricted net assets		28	
D D	29	Permanently restricted net assets		29	
5	_	Organizations that do not follow SFAS 117, check here and			
Net Assets or Fund Balances		complete lines 30 through 34.			
Ş	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32	
Š	33	Total net assets or fund balances	1,751,295.	33	1,752,004
		, started about of futio balance	1 752 527	1	1 752 256

1,752,004. 1,753,256. Form **990** (2009)

Total liabilities and net assets/fund balances

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

2009

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Open to Public

Department of the Treasury Internal Revenue Service

◆ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection Employer identification number

Name of	the organizati	on		·				E	mployer i	dentification number
		BERKELE	Y COUNTY YOU	TH FA	IR, I	NC			23	3-7179678
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this part	t.) See inst	tructions		
The organ	ization is not a	private foundation	because it is. (For lines	1 through	11, check	only one b	ox)			
1	A church, co	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 170	(b)(1)(A)(i)).		
2 🗀	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
з 🔲	A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).			
4 🔲	A medical res	search organization o	operated in conjunction	with a hos	pıtal desci	ribed in se	ction 170	(b)(1)(A)(ii	ii). Enter th	ne hospital's name,
	city, and stat	e:								
5 🔲	An organizat	on operated for the	benefit of a college or u	niversity ov	wned or op	erated by	a governi	mental uni	t describe	d in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6 🔲	A federal, sta	ite, or local governm	ent or governmental uni	t described	d in sectio	n 170(b)(1	I)(A)(v).			
7 🔲	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general p	ublic described in
	section 170	b)(1)(A)(vi). (Comple	te Part II.)							
8 🗔	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)					
9 X	An organizat	on that normally rec	eives [,] (1) more than 33	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, an	d gross receipts from
	activities rela	ted to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2	2) no more	than 33 1	1/3% of its	support f	rom gross investment
	income and i	unrelated business ta	axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anızatıon a	fter June 30, 1975.
	See section	509(a)(2). (Complete	Part III.)							
10 🖳	_	-	perated exclusively to te							
11 📖	An organizat	on organized and or	perated exclusively for the	ne benefit (of, to perfo	orm the fur	nctions of,	or to carr	y out the p	ourposes of one or
	-		itions described in secti				2) See se o	ction 509(a)(3). Che	ck the box that
			organization and compl	_					. —	
	a Type			Тур			_			Type III - Other
e	-		t the organization is not							
		=	han one or more publicly						9(a)(1) or s	section 509(a)(2).
f	=		ten determination from t	the IRS tha	atitisa ly	pe I, Type	II, or Type	€ III		
	•	rganization, check th					-645 - 6-11			
g			organization accepted ar			•		•		V N-
	••	•	irectly controls, either al	one or tog	etner with	persons c	iescribea	ın (ii) and ((III) Delow,	Yes No
	-		upported organization?	,			•			
		•	n described in (i) above? person described in (i) (n2					11g(ii) 11g(iii)
h	• •	•	about the supported or			•				<u> </u>
h	Flovide tile i	ollowing information	about the supported of	gariizatiorii	(5).					
		(1) FIN	(iii) Type of	(iv) Is the c	organization	(v) Did voi	notify the	(vi) Is	s the	full) Amount of
	e of supported anization	(ii) EIN	organization	in col. (i) lis	sted in your	organizat	ion in col.	organization (i) organiz	on in col.	(vii) Amount of support
OI G	amzanom		(described on lines 1-9 above or IRC section		document?			U.S	5.7	заррогі
			(see instructions))	Yes	No	Yes	No	Yes	No	
			<u> </u>							
								}		
								Ī		
				į						
										<u></u>
					<u> </u>		<u> </u>			
<u> </u>									<u> </u>	
									T	
Total		1	l		1	I	I]	1	

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

Schedule A (Form 990 or 990-EZ) 2009

932021 02-08-10

Support Schedule for C	•			(D)(T)(A)(IV) an	a 170(b)(1)(A)(/I)
Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not					1	
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
zation's benefit and either paid to						
or expended on its behalf						<u></u>
3 The value of services or facilities]	- '	
furnished by a governmental unit to						
the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions				-		
by each person (other than a			1	ļ		
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)		1	1	1		}
6 Public support. Subtract line 5 from line 4						
Section B. Total Support			1			Γ
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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		 			 	<u></u>
9 Net income from unrelated business		}	}	i		}
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)		-		_	 	<u> </u>
11 Total support. Add lines 7 through 10				l —	140	L
12 Gross receipts from related activities,	•				12	
13 First five years. If the Form 990 is for		s tirst, secona, tni	ra, tourth, or titth t	ax year as a section	on 501(c)(3)	. □
organization, check this box and stop Section C. Computation of Publi		rcentage			<u> </u>	
14 Public support percentage for 2009 (III			column (fl)		14	
15 Public support percentage from 2008				-	15	
16a 33 1/3% support test - 2009.If the or			n line 13. and line	14 is 33 1/3% or n		x and
stop here. The organization qualifies a					,	▶[
b 33 1/3% support test - 2008. If the or		•		line 15 is 33 1/3%	or more, check th	us box
and stop here. The organization qualif	=				,	▶[
17a 10% -facts-and-circumstances test				e 13, 16a, or 16b, a	and line 14 is 10%	or more.
and if the organization meets the "fact	_					
meets the "facts-and-circumstances" t			=	•		▶
b 10% -facts-and-circumstances test	=				17a, and line 15 ie :	10% or
more, and if the organization meets the	•					
organization meets the "facts-and-circ				-		.
18 Private foundation, If the organization		_				ıs 🔓
iveto reginaduoji, ii tile olyaintattoi	. Jiu iiuk ui leun a					

Schedule D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization BERKELEY COUNTY YOUTH FAIR, 23-7179678 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 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | 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 a certified historic structure Complete lines 2a through 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 Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c C Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 3 Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 」Yes and section 170(h)(4)(B)(ii)? 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

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

Sche	dule D (Form 990) 2009 BERKELE	Y COUNTY	YOUTH	FAIR,	INC		23	<u>-7179</u>	9678	3 Pa	ge 2			
Par						or Other	Similar	Assets	(conti	nued)				
3	Using the organization's acquisition, accession										 }			
	(check all that apply).													
а	Public exhibition		d 🔲 L	oan or excl	hange progra	ams								
ь	Scholarly research		e 🔲 (Other	·									
С	Preservation for future generations								_					
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.													
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets													
_	to be sold to raise funds rather than to be maintained as part of the organization's collection?													
Par	t IV Escrow and Custodial Arrang					s" to Form 9	990, Part I	V, line 9,	or					
	reported an amount on Form 990, Par	_												
	is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included													
	on Form 990, Part X?								No					
ь	If "Yes," explain the arrangement in Part XIV	and complete the	e following t	able.										
_		•	Ū					Α	mount					
С	Beginning balance						1c							
d	Additions during the year						1d							
e	Distributions during the year			•	•		1e							
f	Ending balance				• •		1f							
-	Did the organization include an amount on Fo	orm 990. Part X. I	ine 21?						res		No			
	If "Yes," explain the arrangement in Part XIV.				•									
Par			answered	"Yes" to Fo	rm 990, Part	IV, line 10.								
		(a) Current yea		nor year	(c) Two year		Three year	s back (e) Four	years	back			
1a	Beginning of year balance	(-)	1-7-											
h	Contributions						-							
-	Net investment earnings, gains, and losses													
d	Grants or scholarships													
	Other expenditures for facilities					-								
Ū	and programs													
f	Administrative expenses													
g g	End of year balance													
2	Provide the estimated percentage of the year	r end balance he	ld as:											
a	Board designated or quasi-endowment		%											
b	Permanent endowment ▶	%												
c		<u></u> %												
	Are there endowment funds not in the posse	ession of the orga	ınızatıon tha	t are held a	ind administe	ered for the	organizati	ion						
04	by:	oolon or and orga					J			Yes	No			
	(i) unrelated organizations							[3a(i)					
	(ii) related organizations	•							3a(ii)	$\neg \neg$				
h	If "Yes" to 3a(ii), are the related organizations	s listed as require	ed on Sched	lule R?					3b					
4	Describe in Part XIV the intended uses of the							,						
	rt VI Investments - Land, Building), Part X, line	10.								
	Description of investment				t or other		umulated	10	i) Bool	k value				
Description of investment			(a) Cost or other basis (investment)				depreciation		(4) 20011 14140					
	Land		3,255.		·				33	8,2	55.			
_			1,365.			2.0	5,15	7.		$\frac{5}{6}, \frac{2}{1}$				
b	Buildings Leasehold improvements		_,					-		<u>- , - </u>	 •			
ى ت		23,	2,587.			15	51,963	1.	8	0,6	26.			
d	Equipment Other		1.398.		<u> </u>	19	3.94	ī .		7,4				

Schedule D (Form 990) 2009

1,292,546.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c))

BERKELEY COUNTY YOUTH FAIR, INC

23-7179678 Page 3

Schedule D (Form 990) 2009

	dule D (Form 990) 2009 BERKELEY COUNTY YOUTH FAIR	INC		<u>23-7179</u>	<u>9678 </u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Fina	ncial State	ements		
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 through 8		9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 an	id 9	10			
	t XII Reconciliation of Revenue per Audited Financial Stateme			Return		
1	Total revenue, gains, and other support per audited financial statements			1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
	Net unrealized gains on investments	2a				
a	Donated services and use of facilities	2b		7		
b		2c	<u> </u>	⊣		
C	Recoveries of prior year grants	2d		-		
d	Other (Describe in Part XIV.)	20		⊢ •		
e	Add lines 2a through 2d			2e		
3	Subtract line 2e from line 1			3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1.4-1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
þ	Other (Describe in Part XIV.)	4b		١		
C	Add lines 4a and 4b			4c 5		
<u>5</u>	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) † XIII Reconciliation of Expenses per Audited Financial Statem	ente With Evr	oncoc no			
		GIILS WILLI LA	elises pe		-	
1	Total expenses and losses per audited financial statements	•		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.					
а	Donated services and use of facilities	2a		<u> </u>		
b	Prior year adjustments	2b		-		
C	Other losses .	2c		-		
d	Other (Describe in Part XIV)	2d		-		
е	Add lines 2a through 2d	•		2e		
3	Subtract line 2e from line 1		•	3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		-		
b	Other (Describe in Part XIV)	4b		-		
С	Add lines 4a and 4b			4c		
5_	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5		
	t XIV Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I	II, lines 1a and 4, i	Part IV, lines	1b and 2b; Pa	ırt V, line 4	4; Part
X, lın	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	plete this part to p	rovide any ad	dditional inforr	nation.	
				<u> </u>		
				Schedule D	/Earm 9	201 2000

SCHEDULE O

, . .

(Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Attach to Form 990. Internal Revenue Service Name of the organization Employer identification number BERKELEY COUNTY YOUTH FAIR INC 23-7179678 FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PRODUCTIVE AND CONTRIBUTING CITIZENS OF BERKELEY COUNTY. FORM 990, PART VI, SECTION A, LINE 7A: ANY ADULT, AGE 18 AND OLDER IS ELIGIBLE TO VOTE ON BOARD BUSINESS WHEN ATTENDING THEIR FOURTH CONSECUTIVE YOUTH FAIR BOARD MEETING. EVERY MEMBER, IN GOOD STANDING, SHALL HAVE THE RIGHT TO VOTE IN PERSON ON ALL QUESTIONS, WHICH MAY PROPERLY COME BEFORE A MEETING. THIS INCLUDES VOTING ON THE BOARD MEMBERS. ORGANIZATIONAL PERSONS MISSING THREE CONSECUTIVE MEETINGS WITHOUT ACCEPTABLE EXCUSES SHALL NO LONGER BE A VOTING MEMBER. FORM 990, PART VI, SECTION A, LINE 7B: ANY ADULT, AGE 18 AND OLDER IS ELIGIBLE TO VOTE ON BOARD BUSINESS WHEN ATTENDING THEIR FOURTH CONSECUTIVE YOUTH FAIR BOARD MEETING. EVERY MEMBER, IN GOOD STANDING, SHALL HAVE THE RIGHT TO VOTE IN PERSON ON ALL QUESTIONS, WHICH MAY PROPERLY COME BEFORE A MEETING. ORGANIZATIONAL PERSONS MISSING THREE CONSECUTIVE MEETINGS WITHOUT ACCEPTABLE EXCUSES SHALL NO LONGER BE A VOTING MEMBER. FORM 990, PART VI, SECTION B, LINE 11: THE TREASURER PRESENTS THE FORM 990 TO THE BOARD OF DIRECTORS FOR APPROVAL BEFORE FILING. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES IS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.