

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



Form **990-EZ** 

Department of the Treasury Internal Revenue Service

Short Form
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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

OMB No 1545-1150

2009

Open to Public Inspection

Α	For the	2009 calend	ar year,	or tax year beg	nning	, and	ending	<u> </u>			_		
В		applicable	Piease use IRS	C Name of orga	anization						D	Emplo	oyer identification number
	Address Name ch	-	label or	Cabarru	s County A	gricul	tura	al Fa:	ir.		1	56-	-6063960
H	Initial ret	-	print or type.		et (or PO box, if mail is				/	Room/suite	E		hone number
Н	Termina		See		d Salisbur			,			-		-933-1677
	Amende		Specific Instruc-		or country, and ZIP + 4						T <sub>F</sub>		o Exemption
П	Applicati	ion pending	tions.	Concord	•		NC 2	8025				Numb	•
			) organi		7(a)(1) nonexempt c	haritable tr	usts m	ust attach		G Accoun	ting met	hod	X Cash Accrual
					e A (Form 990 or 99					Other (speci	fy) 🕨		
ī	Websit	e: <b>N</b> /	'A							H Check	▼ X	ıf the	organization is not
J	Tax-exe	mpt status (ch	neck only on	e) — <b>X</b> 501(0	c) ( 5 ) <b>∢</b> (insert	no) 4	1947(a)	(1) or	527	required 990-EZ	to atta or 990	ch Sche PF)	organization is <b>not</b> edule B (Form 990,
Κ	Check	<b>▶</b> □	if the or	ganization is not	a section 509(a)(3) s	upporting o	rganıza	tion and its	s gross re				more than \$25,000 A
	Form 9	90-EZ or For	m 990 re	turn is not requir	ed, but if the organiz	ation choos	es to file	e a return,	be sure t	o file a com	plete re	eturn	
<u>L</u>	Add line:	s 5b, 6b, and 7	b, to line 9	to determine gross	receipts, if \$500,000 or	more, file Fo	m 990 <u>ır</u>	nstead of For	<u>m 990-EZ</u>			▶ \$	386,525
F	art !	Rever	<u>iue, Ex</u>	penses, and	Changes in Net	Assets (	or Fur	<u>nd Balan</u>	nces (S	ee the in:	struct	<u>ions</u> 1	for Part I.)
	1	Contributions,	gıfts, grai	nts, and similar amo	unts received						L	1	
	2	Program se	rvice rev	enue including go	overnment fees and o	contracts					Ĺ	2	
	3	Membership	dues ar	nd assessments								3	
	4	Investment	income									4	73,433
	5a	Gross amou	int from :	sale of assets oth	er than inventory			5a		312,0	669		
	b	Less cost o	r other b	asis and sales ex	rpenses			5b		321,:	L27		
	c	Gain or (loss)	from sale	of assets other than	n inventory (Subtract line	5b from line	5a)		See	Stmt 1		5c	-8,458
e	6	Special events	s and activ	rities (complete app	licable parts of Schedule	eG) If any ar	nount is t	from gamin	ı <b>g</b> , check h	ere 🕨 🛚	7 [		
Revenue	а	Gross reven	nue (not i	ncluding \$		of contril	outions		-		_		
ě		reported on	line 1)	<u> </u>		-		6a	1				
	Ь	•	•	s other than fund	Iraising expenses			6b					
	С		-		nts and activities (Su	ibtract line 6	Sb from					6c	
	7a			tory, less returns	·			7a			ľ		<del></del>
	Ь	Less cost o		•				7b				1	
	-		•		rentory (Subtract line	7h from line	e 7a)	_ <u>:</u> _	L		$\neg$	7c	
	8	•	• •		Statement		c raj				\ L	8	423
	9			lines 1, 2, 3, 4, 5		<u> </u>		•			╌┪┞	9	65,398
	10			mounts paid (atta			S	Stmt 3	<b>\</b>		-	10	10,000
	11	Benefits par			ion sonedule)		_	, can C 3	•		-	11	10,000
	12	•		ensation, and en	anlovee henefits						F	12	
ses	13				s to independent con	tractors		RECE	-IV/ET	7	F	13	1,250
Banges	14			ities, and mainte	*	liaciois	ì	KEU	_   V L_ L		┢	14	1,230
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9	4.6	· ·			Statement	. 1	88	NOV 0	8 201	S-OS(	\		4,338
જ	16			lines 10 through		· 3	101				/	16 17	15,588
$\gtrsim$	17				act line 17 from line 9	)\	<del>\                                    </del>	OCIVI	- NI II			18	49,810
$\approx$	17 18 19 20 21	•	-	•	ning of year (from line	•		OGDE			-	10	49,610
C.	13			ported on prior ye		z z i , colulii	ii ( <del>/\</del> /) (i	nust agree	s with		ł	10	258,604
黡	20	•	•		palances (attach expl	anation)					├	19 20	230,004
Z	20	_					20					21	308,414
<b></b>	ont ft				year Combine lines			00	Slo For	- 000			
CIE (V)	वस म	Dalaii	ce Sile		ets on line 25, colum	n (B) are \$	1,∠50,∪0	or more			_	orm 99	
	<b>.</b>			•	tions for Part II)			ł	(A) E	Seginning of ye		1	(B) End of year
		savings, and	iiivestme	ms				}		258,6	JU4	22	308,414
		nd buildings								······································		23	
		assets (descri	ibe 🟲			<del></del>		)		250 4	504	24	300 44 4
	Total a							. }		258,6		25	308,414
		abilities (des		<del></del>				)		050	0	26	0
					mn (B) <b>mus</b> t agree w				L	258,6	04	27	308,414
For	Privacy	y Act and Pa	perwork	Reduction Act I	Notice, see the sepa	rate instru	ctions.						Form <b>990-EZ</b> (2009)

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Form 990-EZ (2009) Cabarrus County Agricultural		5-6063 <u>960</u>				Page :
Part III Statement of Program Service Accomplishments (	See the instruc	tions for Part I	II.)		Ex	penses
What is the organization's primary exempt purpose?				(Red	quired	for section
See Statement 5				501	(c)(3) a	and 501(c)(4)
Describe what was achieved in carrying out the organization's exempt purposes. In						ons and section
manner, describe the services provided, the number of persons benefited, or other	relevant information	n for				trusts, optional
each program title	<del></del>			for c	thers	)
28 THE ORGANIZATION AWARDS AGRICULTURAL						
SCHOLARSHIPS TO QUALIFIED RESIDENTS OF CABARRUS COUNTY,						
AND SUPPORTS THE COUNTY FAIR.			۲	_		14 226
(Grants \$ 10,000) If this amount includes foreign grants, ch	neck here	<u> </u>		28a		14,338
29						
(Counts ©		_		00-		
(Grants \$ ) If this amount includes foreign grants, ch	теск пеге			29a		
30						
(Grants \$ ) If this amount includes foreign grants, ch	ook boro		$\overline{}$	30a		
31 Other program services (attach schedule)	ieck fiere			30a		
(Grants \$) If this amount includes foreign grants, ch	neck here		П	31a		
32 Total program service expenses (add lines 28a through 31a)	ieck liefe	<u>K</u>		32		14,338
Part IV List of Officers, Directors, Trustees, and Key Employees. List ea	ch one even if not	compensated (Sec	e the		ions fr	
Elect of Officero, Directors, Tradeces, and Trey Employees. Elect of	(b) Title and average	(c) Compensation	(d)	Contribution	ons to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0)		yee benefit rred compe		account and other allowances
See Statement 6	CONTROL TO POSITION	5,13, <b>7</b> ,7	00.0	rod compo	locatori	outer anovarious
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Page 3

Form 990-EZ (2009) Cabarrus County Agricultural Fair, 56-6063960

Par	<b>t Vi</b> Section 501(c)(3	<b>501(c)(3)</b> 3) organiza	organizati ations and	ons and sec section 4947 lines 50 and	tion 4947(a) 7(a)(1) none:	(1) nor	nexemp	t chari	table tr					)b
46	Did the organization	<del></del>				behalf c	of or in one	nosition t					Yes	No
	candidates for public					i benan e	or or in op,	503111011	· ·			46	103	140
47	Did the organization		-			C Part	: 11					47		
	Is the organization o				-			Schedul	e F			48		
49a	Did the organization	-					-	00000	0 _			49a		
	If "Yes," was the rela	-				. g <b>_</b>						49b		ļ
	Complete this table t					s (other t	than office	rs. direct	ors, truste	es and	d kev		<del></del>	1
	employees) who ead				· ·						=			
			s of each employ			(b) Title	and average		pensation	(d) C	contributions to		Expen	
	(-)		\$100,000	, ,			per week to position	ļ			e benefit plans & d compensation		count a	
									-					
								)		}				
			-											
f 51	Total number of other Complete this table to \$100,000 of compen	for the organ	zation's five h	nighest compens	•		actors who	each re	ceived mo	ore than	n			
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51	Complete this table said said said said said said said said	for the organ isation from ress of each in	ization's five h	nighest compens on if there is no ractor paid more th	ne, enter "None nan \$100,000	7	actors who			ore than	T	Comper	nsation	
f 51 d	Complete this table \$100,000 of compen	for the organ isation from ress of each in	ization's five h	nighest compens on if there is no ractor paid more th	ne, enter "None nan \$100,000		actors who			ore than	T	Comper	nsation	
51	Complete this table \$100,000 of compens  (a) Name and add  Total number of other and belief, if	for the organ isation from ress of each in	ization's five hithe organization dependent contractors	nighest compens on if there is no ractor paid more th	over \$100,000 s return, including	accompan	actors who	Type of s	service	and to the	he best of my	knowle	edge	
d Sign	Complete this table \$100,000 of compens  (a) Name and add  Total number of other and belief, it signatures.	for the organ isation from ress of each in ress of each in ress of each in ress of each in ress of perjury, it is true, correct responsible to the correct r	nt contractors I declare that I ht, and complete	each receiving	over \$100,000 s return, including	accompan	actors who	Type of s	tatements, on of which	and to the prepare	he best of my	knowle	edge	
d Sign	Complete this table sales \$100,000 of compens (a) Name and add  Total number of other under penal and belief, response to the sales of	for the organ isation from ress of each in er independe	nt contractors I declare that I ht, and complete	each receiving	over \$100,000  s return, including eparer (other than of	accompanifficer) is b	actors who	Type of s	tatements, on of which ate	and to the prepare	he best of my	knowle	edge	See inst
d Sigr Here	Complete this table \$100,000 of compens  (a) Name and add  Total number of other and belief, if Type of Preparer's signature	er independe	nt contractors  I declare that I it, and complete and title	each receiving	over \$100,000  s return, including eparer (other than of	accompanifficer) is b	(b)	Type of s	tatements, on of which	and to the prepared	he best of my er has any kno	knowle	edge	See inst
d Sign Here	Complete this table said said said said said said said said	for the organ isation from ress of each in	nt contractors I declare that I it, and complete ad title	each receiving	over \$100,000  s return, including eparer (other than of	accompanifficer) is b	actors who	Type of s	tatements, on of which ate	and to the prepared of the pre	he best of my ber has any known	knowle	edge	Siee insti
d Sign Here	Complete this table \$100,000 of compens  (a) Name and add  Total number of other and belief, if Type of Preparer's signature	er independe lities of perjury, t is true, correct r print name ar e (or yours e)	nt contractors I declare that I it, and complete ad title	each receiving have examined this Declaration of pre	over \$100,000  s return, including eparer (other than of	accompanifficer) is b	actors who	Type of s	tatements, on of which ate	and to the prepared of the pre	he best of my er has any kno	knowle owledge	edge	-

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Charter All Long Term Gared from Wachound	n (1) uc toovac Hee	Acquired/ Opened	Sold/ (かん) Closed べん Total Proceeds	Cost Basis	Realized Gain or (Loss)
ΙZ	3,806.9640	09/04/09	09/15/09 24,677,10 26,180.03	N/A	A/N
EVERGREEN STRATEGIC GROWTH INSTL: ESGIX	1,462.1090	09/04/09	09/15/09 35,36-29 35,830.20	N/A	N/A
HARBOR INTERNATIONAL FUND INST CL: HAINX	414.7950	09/04/09	09/15/09 20,534.50 21,710.20	N/A	N/A
JPMORGAN HIGH YIELD FD SELECT CL: OHYFX	2,605.0000	09/04/09	09/15/09 18,677 SS 19,120.70	<b>V/N</b>	N/A
LAZARD EMERGING MARKETS PORTFOLIO INST SHARE: LZEMX	472.8130	09/04/09	09/15/09 7 <i>206</i> . <sup>9</sup> S 7,955.45	N/A	N/N
PIMCO EMRG MKTS BD FD INSTL CL : PEBIX	0660'066	09/04/09	09/15/09 GT S 3. 18 9,950.05	A/N	Α/Z
PIMCO FOREIGN BOND FUND INSTITUTIONAL CLASS: PFORX	1,020.8320	09/04/09	09/15/09 Kg 259.99 10,301.29	N/A	Y.
PIMCO TOTAL RETURN II FUND INSTL CL: PMBIX	5,316.1190	09/04/09	09/15/09 55,447.1 <sup>2</sup> 55,556.65	N/A	N/A
T ROWE PRICE EQUITY INCOME FUND: PRFDX	1,855.7890	09/04/09	09/15/09 35, 94/ <b>6</b> -16/37,455.55	N/A ,	Y.
TOUCHSTONE MID CAP FD INST: TMCPX	2,571.5270	09/04/09	09/15/09 27,155.5328,725.44	N/A	Ψ/N
VANGUARD INFLATION PROTECTED SECURITIES FD: VIPSX	800.3680	09/04/09	09/15/09 984.54 9,906.63	<b>V/N</b> .	Y/N
WESTPORT SELECT CAP FUND CLASS I: WPSCX	715.5190	09/04/09	09/15/09 13, W 23, 184, 124.48	N/A	A/N

Schwab has provided accurate realized gain and loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your holdings. If all data for a given Option Customers: Realized gain/loss of underlying securities is adjusted to reflect the premiums of assigned or exercised options. Please consult IRS publication 550, Investment Income and investment is not available, the Investment will not be listed here. Expenses, for additional information on Options.

Page 7 of 1

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## Wachovia Trust Statement

**Statement Period:** 01/01/2009 - 11/09/2009 **Account Number:** 1025896913 **IP Number:** 1016179 . 202 00376

Account Title: CABARRUS COUNTY AGRICULTURAL WACHOVIA BANK, N.A FAIR INVESTMENT AGENT UNDER AGREEMENT DTD 3/6/02

### Transaction Detail continued

Dale	Transaction Description	Principal	Income	Total Tax Cost
03/08/09	SOLD 249 168 UNITS PIMCO FOREIGN BOND FD U S DOLLAR - HEDGED INST CL ON 03/06/09 AT 9 01 CUSIP 693390882	2,245.00	0.00	2,534.04 -
03/09/09	SOLD 1,327 608 UNITS PIMCO TOTAL RETURN FD II INSTL CL ON 03/06/09 AT 9 43 CUSIP. 693390551	12,519.34	00 0	13,554 88 -
03/09/09	SOLD 215 623 UNITS VANGUARD INFLATION-PROTECTED SECURITIES FD IV CL ON 03/06/09 AT 11 47 CUSIP, 922031869	2,473.20	0.00	2,742.72 -
TOTAL FIXED INCOME	01	\$17,237.54	\$0.00	\$18,831.64 -
SALES				
07/06/09	SOLD 540 375 UNITS EVERGREEN INTERNATIONAL EQUITY FD CL I (FD #252) ON 07/02/09 AT 5 76 CUSIP. 299924704	3,112 56	00 0	6,033 37 -
07/06/09	SOLD 160.788 UNITS T ROWE PRICE EQUITY INCOME FD ON 07/02/09 AT 16 62 CUSIP. 779547 108	2,672 28	0.00	3,900 72 -
60/110/08	SOLD 2,500 72262 UNITS AMERICAN CENTURY SMALL COMPANY FD INS CL ON 07/15/09 AT 5 13 CUSIP 02507M832	12,628.70	0.00	21,396.80 -
TOTAL EQUITIES		\$18,613.54	\$0.00	\$31,330.97 -
FIXED INCOME				

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## Federal Statements

56-6063960 FYE: 12/31/2009

30407 Cabarrus County Agricultural Fair,

Statement 6 - Form	statement 6 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key Employees (continued)	of Officers, I (continued)	Directors, Trustees a	nd Key	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
HAROLD MCEACHERN	BOARD MEMBER		0	0	0
DORIS ROGERS	BOARD MEMBER		0	0	0
ESTUS B. WHITE	BOARD MEMBER		0	0	0

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30407 Cabarrus County Agricultural Fair, 56-6063960

Federal Statements

FYE: 12/31/2009

Statement 6 - Form 990EZ, Part IV - List of Officers, Directors, Trustees and Key

Expenses Benefits Compensation Average Hours Employees VICE PRESIDE BOARD MEMBER PRESIDENT TREASURER SECRETARY Title Name and Address CAROLYN CARPENTER DR. JOE N. FRIES MARY ANN COOPER NEWTON FOWLER MILDRED WATTS SCOTT PADGETT DORIS ROGERS TRENT PROPST DEBBIE BAKER MATT BARRIER JAMES LENTZ E.E. BISHOP JOHN CLINE KAY SCOTT JO COBLE

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BOARD MEMBER

BOARD MEMBER

BOARD MEMBER

ROBERT MCGEE

CAROL HOVEY

TINA BOONE

30407 Cabarrus County Agricultural Fair,
56-6063960 Federal Statements

11/2/2010 12:25 PM <sup>3</sup>

FYE: 12/31/2009

### Statement 5 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

SUPPORT OF AGRICULTURAL FAIR AND SCHOLARSHIPS TO STUDENTS IN CABARRUS COUNTY

30407 Cabarrus County Agricultural Fair, 56-6063960 Federal Statements 11/2/2010 12:25 PM<sup>2</sup>

FYE: 12/31/2009

### Statement 4 - Form 990-EZ, Part I, Line 16 - Other Expenses

 Amount
\$
467
3,521
 350
\$ 4,338
\$ \$

					<u> </u>
11/2/2010 12:25 PM			FMV Explanation		m
11/2/2	<u>d to</u>		Book Value Explanation		
	ar Amounts Pai		Book Value		
ements	Part I, Line 10 - Grants and Similar Amounts Paid to Individuals		Noncash Contribution		
Federal Statements			Cash Contribution	10,000	
tural Fair,	Statement 3 - Form 990-EZ,	Class of Activity	Description of Property	arships	
Cabarrus County Agricultural Fair, 3960 2/31/2009	Sta		Date of Gift	Scholarships 6/26/09	
30407 Cabarrus C 56-6063960 FYE: 12/31/2009		Relationship to Organization		Total	

30407 Cabarrus County Agricultural Fair,
56-6063960 Federal Statements

11/2/2010 12:25 PM:

FYE: 12/31/2009

### Statement 2 - Form 990-EZ, Part I, Line 8 - Other Revenue

	Description	Ar	nount
Miscellaneous	Income	\$	423
Total		\$	423

# 30407 Cabarrus County Agricultural Fair,

### Federal Statements

56-6063960 FYE: 12/31/2009

Statement 1 - Form 990-EZ, Part I, Line 5c - Sale of Assets Other than Inventory - Securities

	Gain / Loss		-1,594		-12,717		5,853	-8,458
	Depreciation		<b>⟨</b> ⟩-					\$ 0
			Ś				l	ۍ ا
	Cost & Expense		18,832		31,331		270,964	321,127
			ς> ~				_	ا چ د
	Sale Price		17,238		18,614		276,817	312,669
			ጭ					လ ျ
i	Date Sold		Various		Various		Various	
Description	Date Acquired		Various		Various		Various	
	Whom Sold							
	How Received	Sale of Securities	Purchase	Sale of Securities	Purchase	Sale of Securities	Purchase	Total