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Form **990**

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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

	For t	he 2009 calen	dar year,	or tax year beginning	, 200	9, and ending	g		,		
В	Check	ıf applicable		С	<u> </u>			D Employ	er Identifi	cation Number	Τ
	Па	ddress change	Please use IRS label	WILSON COUNTY PROMO	OTIONS, INC.			62-3	10885	35	
	\vdash	ame change	or print or type	P.O. BOX 1203	,			E Telepho	ne numbe	ır	_
	\vdash	itial return	See specific	LEBANON, TN 37087			į				
	\vdash		Instruc-]			ŀ				_
	H	ermination	tions					C •		1,464,623	
	\vdash	mended return		IIAT	E MOCC		H(a) is this a	G Gross re			_
	∐ Ar	pplication pending			LE MOSS		H(b) Are all a				No No
				As C Above				ittach a list			10
<u> </u>		-exempt statu		(c) (4) (Insert no)	4947(a)(1) or	527			_		
<u>J</u>		bsite: ► N/			,		H(c) Group e	xemption nu	mber -		_
K		of organization	X Corpora	ation Trust Association	Other ►	L Year of Formati	on	M s	tate of leg	gal domicile	_
Pa	rt I	Summa									
	1	Briefly descri	be the org	ganızatıon's mıssıon or most sı	gnificant activities	OPERATION	N_OF_TH	<u>ie wil</u>	SON C	O_FAIR	_
ø											_
Activities & Governance											_
err											_
30,				if the organization discontinue		sposed of mo	re than 25	of its a			Ω
8				bers of the governing body (P		ne 1b) REC	EIVED	_	3	 	9
es				nt voting members of the gover byees (Part V, line 2a)	, ,	lie ID)	TVED		5		6
ķ				eers (estimate if necessary)	48,	AUG .		- . /	6	30	
Act				ousiness revenue from Part VII	L column (C) line 1	AUG 1	0 2012	181	7a).
		_		s taxable income from Form 99	· · · · · · · · · · · · · · · · · · ·	Oc	2010	[0]	7b	Ö	
			. 545655	s tanable mount want and ye	<u> </u>	YGUEN	, D.	ior year		Current Year	
	8	Contributions	and gran	its (Part VIII, line 1h)		17/	2 U7 ***	182,1	<u>A</u> 1	132,363	·
ne			_	iue (Part VIII, line 2g)				$\frac{102,1}{1}$	<u> </u>	1,314,218	
Revenue		_		art VIII, column (A), lines 3, 4,	and 7d)			13,9	31	9,272	
E E			-	III, column (A), lines 5, 6d, 8c,				853,8		2,753	
				nes 8 through 11 (must equal f		line 12)	1.	,049,9		1,458,606	
-				ounts paid (Part IX, column (A		,	1 - '	227,9		337,969	
				members (Part IX, column (A)			22,73		33.7503	·	
				nsation, employee benefits (Pa	67,278.			88,543	<u> </u>		
မေ				· •		es 5-10)		01,2	-/0.	00,543	' ·
Expenses				ng fees (Part IX, column (A), lii			3 2008.4 . 27				
Š	b	Total fundrais	sing exper	nses (Part IX, column (D), line	25) •						<u> </u>
	17	Other expens	es (Part I	IX, column (A), lines 11a-11d,	11f-24f)			477,6	876,995	<u>.</u>	
	18	Total expense	es Add lir	nes 13-17 (must equal Part IX,	column (A), line 25)			772,8	1,303,507		
	19	Revenue less	expenses	s Subtract line 18 from line 12	2			277,0	18.	155,099) <u>.</u>
8							Beginn	ning of Y	ear	End of Year	
Net Assets or Fund Balancor	20	Total assets	(Part X, III	ne 16)			-	997,3		1,095,561	_
\$ 5	21	Total liabilitie	s (Part X,	, line 26)				64,1	87.	7,303	<u>; </u>
象	22	Net assets or	fund bala	ances Subtract line 21 from lir	ne 20			933,1	58.	1,088,258	3.
Pa			ure Bloc		<u> </u>						_
					ncluding accompanying s	chedules and state	ements, and to	o the best of	f my know	riedge and belief, it is	_
		true, correct) a	ind complete	declare that I have examined this return Declaration of prepara (ather than office	er) is based on all information	on of which prepai	rer has any kr	nowledge			
Sig	ın	► %C	MA	au Clim	Ma Ne	rsun	1	8-1) -/		
He	re	Signatule	of officer		-		Date	•			_
		→ 3									
		Type or pr	int name and	d title			_				_
						Date	Che	eck if	Prep	parer's identifying number instructions)	_
Pai	d		(self			: instructions)	
Pre	:-	Preparer's signature	► Don	RAHEROELS Dent	reiso	7/29/10		,	PO	0421542	
	er's	Firm's name (d		lette, Henderson &	Co PLLC	1 1/20/10				<u></u>	
Us		yours if self-		1 Lebanon Road, Ste		<u> </u>	EIN		2-118	32006	
On	ıy	employed), address, and			. 200				(615		-
Ž	the "	ZIP + 4		mitage, TN 37076	2 (000 (001)		Pho	one no	(013	X Yes No	_
				with the preparer shown above	<u>`-</u>			TEE 401131	10/00/0		_

	n 990 (2009) WILSON COUNTY PROMOTIONS, INC.	62-108	8535		Page 2
Pai	t III Statement of Program Service Accomplishments				
1	ODDA TANK OF THE LITT GOV OF TAIR				
	OPERATION OF THE WILSON CO FAIR				
	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
3	If 'Yes,' describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program serv	ices?	Yes	X	No
J	If 'Yes,' describe these changes on Schedule O			_	
4	Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported	by expenses allocations t	Section 5 o others,	501(c) the tota	(3) al
42	(Code				
					
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		. 	- -	- -	
		_			
4 t	(Code (Expenses \$ including grants of \$) (F	Revenue \$_)
		-			
		. -			
					-
		_			
					
40	: (Code) (Expenses \$ including grants of \$) (F	Revenue \$_)
		. 	 -		
		. 			
		. 			
1.	Other program services (Describe in Schedule O)				
→((Expenses \$ including grants of \$) (Revenue \$)	
4 6	Total program service expenses ► 1,213,093.		_		

			res	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	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4_		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any 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 I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>X</u>
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	10		X
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		_	, 4
•	• 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	1,78	, , , , , , , , , , , , , , , , , , , ,	*
•	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	, í		
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X	· 4	* * *	
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12	AWas the organization included in consolidated, independent audited financial statement for the tax Yes No	1		*
4 ~	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A	13		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
				_ <u></u> -
	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	-	X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

Part IV Checklist of Required Schedules (continued) Yes No 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 X 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part 22 X IX. column (A), line 27 If 'Yes,' complete Schedule I, Parts I and III 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 X 23 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 Х 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х 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 25b Х Schedule L. Part I 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 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III Χ 27 28 Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Х 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Х Schedule L. Part IV c 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 Х 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes.' complete Schedule M X 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х contributions? If 'Yes,' complete Schedule M Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3⁷ If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 34 X line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, 35 35 X Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 37 Х treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 38 38 Note. All Form 990 filers are required to complete Schedule O

BAA

Form 990 (2009)

Part V Statements Regarding Other IRS Filings and Tax Compliance Ves No	Form 990 (2009) WILSON COUNTY PROMOTIONS, INC. 62-108853	5	F	age!		
1a Enter the number reported in Box 3 of form 1996, Annual Summary and Transmittal of U S	Part V Statements Regarding Other IRS Filings and Tax Compliance					
Information Returns Enter -0- if not applicable Enter the number of Forms V-20 included in line 1a Enter -0- if not applicable C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to price winners? 2a Ents the number of enployee reported on form W 3, Transmital of Wige and Tax Statements, filed for the cellenty reven ending with or within the year owners by this return 2b If at least one is reported on line 2a, did the organization file all required tederal employment tax returns? 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 income of \$1,000 or more during the year covered by this return? 3b If Yes' has it filed a Form 990-T for this year? If No, 'provide an explanation in Schedule Q 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) bil Yes', enter the name of the foreign country is continuously and interest in the state of the state o			Yes	No		
C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 a late the number of emplores reported or form W.3, Transmital of Wage and Tax Stalements, filed for the calendary pare ending with or within the year covered by this return. 3 bit of a least one is reported on in the 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 this return. 3 bit Mere organization have unrelated business gross income of \$1,000 or more during the year covered by the file is return? 5 bit Yes' has it filed a Form 990-T for this year? If 'No', provide an explanation in Schedule O 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country service of the file of the foreign country. 5 see the instructions for exceptions and filing requirements for Form TDF 90-22 1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 bit Yes, to line 5 a or 50, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization of deductible? 5 a Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization of the value of the goods or services provided? 5 bit Yes, indicate the number of the value of the goods or services provided? 5 by 1 Yes, indicate the number of Forms 8282 filed during the year or the provided to the payor? 5 bit Yes, indicate the number of Forms 8282 filed during the year or all contributions of qualified intellectual property, did the organization file Form 1998. Cas required? 5 ponsoring	Information Returns Enter -0- if not applicable 1a 165			-		
Agambing) winnings to prize winners? 2 a Einst the murber of emploses reported on form W3, Transmital of Wage and Tax Statements, filed for the calendar year enting with or within the year covered by this return 2 bit of a teas on one is reported on hime 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-rife 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. 5 if I Yes' has it filed a Form 990-T for this year? If No, prowde an explanation in Schedule O 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5 if Yes' has it filed a Form 990-T for this year? If No, prowde an explanation in Schedule O 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account). 5 a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5 b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization of the vice of the organization of the vice of the deductible? 5 c C A Oses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization of the vice of the vice of the property for which it was required to file of the organization have annual gross receipts that are normally greater than \$100,000, and	b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1				
calendar year ending with or within the year covered by this return 2b 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 a 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? bil "Yes' has if filed a Form 990-T for this year? If "No. 'provide an explanation in Schedule Q 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)? 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 Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5c If "Yes," to line Ba or 5b, did the organization file Form 8385-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization include with every solicitation an express statement that such contributions or giffs were not deductible? 7 bif "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization as expressed property, did the organization file a Form 1098-C as required? 7 bif "Yes," indicate the number of Forms 8282 filed during the year organization file a Form 1098-C as required? 7 before the	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	-	_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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return, bit 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q 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)? See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Francial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6a Does the organization are annual gross receipts that are normally greater than \$100,000, and did the organization solicit any continuutions that were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? bit 'Yes,' did the organization of the tonic of the value of the goods or services provided? c) Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file of 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, on a personal benefit contract? f) Did the organization of qualified intellectual property, did the organization hie a Form 1098-C as required? h For contributions of qualified intellectual property, did the organization hie a Form 1098-C as required? f) Form all contributions of qualified intellectual property, did the organization hie a Fo	2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 6					
3a Du the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q 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 a orther financial account)? 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 5a Was the organization a party to a prohibited tax shelter transaction? 5 a Was the organization a party to a prohibited tax shelter transaction? 5 a Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5 a Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? 5 a Did she organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 a Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization deductible? 7 organizations that may receive deductible contributions under section 170(c). a Did the organization have a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization of qualified intellectual property, did the organization file a Form 1098-C as required? 7 b Port outributions of qualified intellectual property, did the o	2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X			
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b Did the organization make any distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter 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 a Gross income from other 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?		9a	*-			
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 10b 11 Section 501(c)(12) organizations. Enter a Gross income from other 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? 12a						
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b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from other 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? 12a		1 3 3	3 3	' -		
11 Section 501(c)(12) organizations. Enter a Gross income from other 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? 12a			131	٠,		
a Gross income from other 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? 12a		* * * * * * * * * * * * * * * * * * *	3	-		
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?		j	× .	/ <i>~ ,</i>		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	b Gross income from other sources (Do not net amounts due or paid to other sources against	,	- *,	,		
	,	12a				
				J.		

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> </u>	tion A. Governing Body and Management		- 7	—т			
		اما		Yes	No		
	a Enter the number of voting members of the governing body	1a 9	-				
ı	Enter the number of voting members that are independent	1b					
2	Did any officer, director, trustee, or key employee have a family relationship or a business r officer, director, trustee or key employee?	elationship with any other	2	X			
3	Did the organization delegate control over management duties customarily performed by or of officers, directors or trustees, or key employees to a management company or other personal company or other personal company.	under the direct supervision son?	3		Χ_		
4	Did the organization make any significant changes to its organizational documents		4		X		
	since the prior Form 990 was filed?						
5	Did the organization become aware during the year of a material diversion of the organization	on's assets?	5		<u>X</u> _		
6							
7 a	7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?						
ŧ	Are any decisions of the governing body subject to approval by members, stockholders, or or	other persons?	7b		X		
8	Did the organization contemporaneously document the meetings held or written actions und the following	lertaken during the year by		,	- 1		
á	a The governing body?		8a	X			
ŀ	Each committee with authority to act on behalf of the governing body?		8b	X			
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who conganization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	annot be reached at the	9		Х		
Sec	tion B. Policies (This Section B requests information about policies not	required by the Internal					
	enue Code)	,					
				Yes	No		
10 a	Does the organization have local chapters, branches, or affiliates?		10a		X		
t	o If 'Yes,' does the organization have written policies and procedures governing the activities and branches to ensure their operations are consistent with those of the organization?	of such chapters, affiliates,	10b				
	Has the organization provided a copy of this Form 990 to all members of its governing body		11	X			
11 /	ADescribe in Schedule O the process, if any, used by the organization to review this Form 99	O See Schedule O	3,623	, ,			
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a		X		
t	 Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts? 	s that could give rise	12b				
C	Does the organization regularly and consistently monitor and enforce compliance with the p	olicy? If 'Yes,' describe in	12c				
13	Does the organization have a written whistleblower policy?	l	13		X		
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 persons, comparability data, and contemporaneous substantiation of the deliberation and de	d approval by independent ecision?	A CONTRACTOR	مرسعة عدما			
a	The organization's CEO, Executive Director, or top management official		15 a		<u>X</u>		
t	Other officers of key employees of the organization		15 b		X		
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)						
16 <i>a</i>	a Did the organization invest in, contribute assets to, or participate in a joint venture or simila entity during the year?	r arrangement with a taxable	16a	. هستهد	X		
ŀ	olf 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguar status with respect to such arrangements?	on to evaluate its participation d the organization's exempt	16b				
Sec	tion C. Disclosures						
17	List the states with which a copy of this Form 990 is required to be filed None						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, inspection. Indicate how you make these available. Check all that apply	and 990-T (501(c)(3)s only) a	/aılabl	e for p	oublic		
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docustatements available to the public See Schedule O	iments, conflict of interest pol	ıcy, ar	nd fina	incial		
	State the name, physical address, and telephone number of the person who possesses the JOY BARBER P.O. BOX 1203 LEBANON, TN 37087 (615) 443-2		anızatı 	on 			

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees'
- 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

|X| Check this box if the organization did not compensate any current officer, director, or trustee

(A)	(B) (c)							(D)	(E)	(F)		
Name and Title	Average hours	Posi	tion (k all f	that app		Reportable	Reportable	Estimated amount of other		
	per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable Reportable compensation from the organization (W-2/1099-MISC) Reportable compensation from related organizations (W-2/1099-MISC)			
DONNIE STEED	8							0.	0.	0.		
JOE HOLBROOK												
TOURING TOUGHT DO	8	_						0.	0.	0.		
JOHNNY KNOWLES	8							0.	0.	0.		
TERRY MCPEAK	8							0.	0.	0.		
HALE MOSS	<u></u>											
PRESIDENT	8			Х				0.	0.	0.		
NELSON STEED												
VICE PRESIDENT	8			X				0.	0.	0.		
RANDALL CLEMMONS												
TREASURER	8			X	ļ			0.	0.	0.		
JAMES SPEARS								_				
SECRETARY	8			Х				0.	0.	0.		
ANDY BRUMMETT										•		
	8	_		X				0.	0.	0.		
	···				_							
	<u> </u>											
DAA	<u> </u>					L	L	<u></u>		Form 000 (2000)		

Part VII Section A. Officers, Directors, Trus		ley	EII		_	c s,	and			1
, (A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average hours per week			Officer	_		Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation fror related organization (W-2/1099-MISC)	ns compensation
	_							<u>-</u>		
								-		
	ļ									
	-									
			_					-		
					_					
							•	0.		0. 0
1 b Total2 Total number of individuals (including but not limite	- مالم مارا <i>ه</i>		<u></u>	d a b						
from the organization 0			Siec	ט מט			J 16			Yes No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such it	ndıvıdua	al.								3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t individual	portable han \$15	e cor 50,00	mpe	nsa If 'Y	tion ′es′	and com _i	oth <i>plet</i>	er compensation e Schedule J for	trom such	4 X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc.	ompens hedule .	satio <i>J for</i>	n fr	om a ch pe	any erso	unre n	late	d organization fo	r services	5 X
Complete this table for your five highest compensation from the organization	ted inde	pen	dent	t cor	ntra	ctors	tha	t received more	than \$100,000 of	
(A) Name and business addres	ss							(E Description	of Services	(C) Compensation
										* ***
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		limi	ted	to t	1056	ııst	ed a	above) who receiv	vea more than	

Pai	rt VIII Statement of Revenue				
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns la-1f. h Total. Add lines 1a-1f	132,363.			
ΠE	Business Code			-	_
PROGRAM SERVICE REVENUE	2a ANNUAL COUNTY FAIR b c	1,314,218.	1,314,218.		
Σ	Δ				
3RA	f All other program service revenue				
ĕ	g Total. Add lines 2a-2f	1,314,218.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds 	9,272.	9,272.		
	5 Royalties				
	6a Gross Rents b Less rental expenses c Rental income or (loss)	ζ .		٠ ١	< %
	d Net rental income or (loss)				- promount traditional description of the second section of the second section (
	7 a Gross amount from sales of assets other than inventory (i) Securities (ii) Other	,	. *		
	b Less cost or other basis and sales expenses c Gain or (loss)	* .	\$. *		
	d Net gain or (loss)		na —electrisme miniscritics —		
NUE	8a Gross income from fundraising events (not including \$	_		să.	.,
OTHER REVENU	of contributions reported on line 1c) See Part IV, line 18	,* -		,	* *
OTH	b Less direct expenses b	- ·			
	c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19				<
	b Less direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances a 1,963.				
ı	b Less cost of goods sold b 6,017.	4 054	4 054		
-	c Net income or (loss) from sales of inventory	-4,054.	-4,054.		
	Miscellaneous Revenue Business Code	6 007	6,807.		
	11a <u>MISC</u>	6,807.	0,007.		
	d All other revenue				
	e Total. Add lines 11a-11d	6,807.			
	12 Total revenue. See instructions	1,458,606.		0.	0.

Form 990 (2009)

Statement of Functional Expenses

campaign and fundraising solicitation

BAA

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). **(D)** Fundraising (A) Management and Do not include amounts reported on lines Program service Total expenses 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, 337,969 337,969 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 0 0 0 0. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B) 0 0. 0 88,543 88,543 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees) a Management **b** Legal 8,661 8,661 c Accounting **d** Lobbying e Prof fundraising svcs See Part IV, In 17 f Investment management fees 4,703 4,703. 15,074 15,074. 12 Advertising and promotion 41,197 41,197 13 Office expenses 14 Information technology 15 Royalties 16 Occupancy 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 30,689 30,689 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 12,475. 12,475. 22 Depreciation, depletion, and amortization 47,147. 47,147. 23 Insurance 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 ~ v , below). 229,860 229,860 a MAINTENANCE & IMPROVEMENTS 202,386. **b** SHOWS AND EVENTS 202,386. 148,019 148,019. c FAIR ENTERTAINMENT d UTILITIES 43,406. 43,406. 40,320. e FOOD AND REFRESHMENTS 40,320 5,164 53,058. 47,894. f All other expenses 303,507 1,213,093. 90,414. 0. 25 Total functional expenses Add lines 1 through 24f 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

Form 990 (2009)

BAA

Part X **Balance Sheet** (A) Beginning of year (B) End of year 100. 1 100. Cash - non-interest-bearing 2 971,507. 896,486. Savings and temporary cash investments 3 3 Pledges and grants receivable, net 23,537. 13,231 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, 5 and highest compensated employees. Complete Part II of Schedule L. 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 6,017 8 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 169,053. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 81,511 100,417. 10b 68,636 10 c **b** Less accumulated depreciation 11 11 Investments - publicly-traded securities 12 12 Investments - other securities See Part IV, line 11 13 13 Investments - program-related See Part IV, line 11 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 1,095,561 997,345. Total assets Add lines 1 through 15 (must equal line 34) 16 16 34,187. 7,303. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 30,000 23 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 7,303. 64,187. 26 26 Total liabilities. Add lines 17 through 25 X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 27 933,158. 1,088,258. 27 Unrestricted net assets 28 Temporarily restricted net assets 29 29 Permanently restricted net assets R Organizations that do not follow SFAS 117, check here and complete FUND lines 30 through 34. 30 30 Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 933,158. 1,088,258. 33 33 Total net assets or fund balances 997,345. 1,095,561. 34 34 Total liabilities and net assets/fund balances

TEEA0111L 01/30/10

Form 990 (2009) WILSON COUNTY PROMOTIONS, INC.	52-1088535	Pa	ige 12
Part XI Financial Statements and Reporting			
•		Yes	No
1 Accounting method used to prepare the Form 990			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	<u>2a</u>		<u>X</u>
b Were the organization's financial statements audited by an independent accountant?	2 b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit, 2c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were consolidated basis, separate basis, or both	issued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single 3a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit 3b		

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Form 990 (2009)

SCHEDULE D (Form 990) ·

Department of the Treasury Internal Revenue Service Name of the organization

WILSON COUNTY PROMOTIONS, INC.

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public Inspection Employer Identification number

			62-1088535
Part I		r Advised Funds or Other Similar Fu	inds or Accounts Complete if
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.	
_		(a) Donor advised funds	(b) Funds and other accounts
4 T	1.1		I .

Pa	the organizations Maintaining Dono the organization answered 'Yes' t	r Advised Funds or Other Similar Fund to Form 990, Part IV, line 6.	ls or A	ccounts Complete if			
		(a) Donor advised funds					
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in dor to the organization's exclusive legal control?	nor advis	ed Yes No			
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit? Yes No						
Pai	t II Conservation Easements Comple	ete if the organization answered 'Yes' to	Form	990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by	y the organization (check all that apply).					
	Preservation of land for public use (e g , r	recreation or pleasure) Preservation of	an histo	rically important land area			
	Protection of natural habitat	Preservation of	certified	historic structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organizati last day of the tax year	on held a qualified conservation contribution in t	he form	of a conservation easement on the			
				Held at the End of the Year			
ā	Total number of conservation easements		2a				
t	Total acreage restricted by conservation ease	ments	2b				
C	Number of conservation easements on a certi	fied historic structure included in (a)	2c				
C	Number of conservation easements included i	n (c) acquired after 8/17/06	2d				
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax						

,	d Number of conservation easements included in (c) acquired after 8/17/06	2d		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated	by the	e organization during t	he tax
	year ▶			
4	Number of states where property subject to conservation easement is located ▶			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling and enforcement of the conservation easement it holds?	ng of	violations, Yes	

Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Partill 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

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► \$	

No

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

Schedule **D** (Form 990) 2009

			OMTONO T				60 100	0505		
Schedule D (Form 990) 2009 WILSO Part III Organizations Mainta	ON COUNTY	PROM	OTIONS, I	NC.	Troosures o	r Othor	62-108		ontinu	Page 2
	•									
3 Using the organization's acquisiti items (check all that apply)	on accession	and othe	er records, che	eck ar	ny of the following	that are	a significant us	e of its	collecti	on
a Public exhibition			d Loan	or ex	change programs					
b Scholarly research			e 💹 Other							
c Preservation for future gener										
4 Provide a description of the orga Part XIV	nızatıon's col	lections a	and explain ho	w the	y further the orgar	nization's	exempt purpo	se in		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or ather than to	receive of be main	donations of a tained as part	rt, his	torical treasures, or e organization's co	or other s llection?	sımılar ——————	Yes		No
Part IV Escrow and Custodia	Arrangen	nents C	omplete if o	orga	nization answe	red 'Ye	s' to Form 9	90, Pa	rt IV,	lıne
9, or reported an amo	unt on Fori	m 990,	Part X, line	21.						
1a Is the organization an agent, trus	tee, custodia	n, or oth	er intermediar	y for	contributions or otl	her asset	s not	□ν.	Г	٦.,,
included on Form 990, Part X?	5							Yes	L	No
b If 'Yes,' explain the arrangement	in Part XIV a	and comp	lete the follow	ring ta	able		· 1	A		
5							 	Amoun	I	
c Beginning balance						10	 			
d Additions during the year						10	 -			
e Distributions during the year						1e	 			
f Ending balance		000 5		_		1 f				No
2a Did the organization include an a		rm 990, F	Part X, line 21	′				Yes	L	_] NO
b If 'Yes,' explain the arrangement		raani70	tion once	od "	Vac' to Form O	On Pari	t IV. Juno 10			
Part V Endowment Funds Co								(0)	Four woor	o hook
1 - December of the below of	(a) Current	year	(b) Prior yea	1[(c) Two years bac	<u> </u>	Three years back	(e)	Four year:	S Dack
1 a Beginning of year balance						*	× ×	, ,		
b Contributions					* * * * * * * * * * * * * * * * * * * *	9 14.5		+		, ,
c Net Investment earnings, gains, and losses					, , , , , , ,			*	,	
d Grants or scholarships					, 3	* 4	* , * * * · ·	*	4 4 5 5 6	. <* \ _ !
 Other expenditures for facilities and programs 								1		.** <u>.</u>
f Administrative expenses					· · · · · · · · · · · · · · · · · · ·	* ,	, , , , , , , , ,	3 - 37	※.	
g End of year balance					25, 33 +	કે	<u>, , , , , , , , , , , , , , , , , , , </u>	<u>] < </u>	. ,	
2 Provide the estimated percentage	e of the year	end bala	nce held as							
a Board designated or quasi-endow	/ment ►		%							
b Permanent endowment ►	8									
c Term endowment ►										
3a Are there endowment funds not a organization by	n the posses	sion of th	ne organization	that	are held and adm	ınıstered	for the	[Yes	No
(i) unrelated organizations								3a(i)		
(ii) related organizations								3a(ii)		
b If 'Yes' to 3a(II), are the related of	rganizations	listed as	required on S	ched	ıle R [?]			3b		
4 Describe in Part XIV the intended	•		•							
Part VI Investments—Land, B					 	. line 1	0.			
Description of investment	_	(a) Cost	or other basis	1	Cost or other basis (other)	(c) A	ccumulated preciation	(d)	Book Va	alue
1a Land		\ <u>\</u>				¥ ,,,,				
b Ruidings				-	86 614		29.351		57	. 263

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Schedule **D** (Form 990) 2009

Part VII Investments-Other Securities See	Form 990, Part X, line	12. N/A
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other	_	
Total (Column (b) must equal Form 990 Part X, col (B) line 12)		
Part VIII Investments-Program Related (Se	e Form 990, Part X, line	e 13) N/A
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)	>	» (n ½
Part IX Other Assets (See Form 990, Part)	X, line 15) N/A	
	Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B)) line 15)	>
Part X Other Liabilities (See Form 990, Part X)		
(a) Description of Liability	(b) Amount	-
Federal Income Taxes		_
		_
		_
		4
		_
		4
		4
		_
Total (Column (b) must equal Form 990, Part X, col (B) line 25)		
	ootnote to the organization's	financial statements that reports the organization's liability
for uncertain tax positions under FIN 48		

Schedule D (Form 990) 2009 WILSON COUNTY PROMOTIONS, INC.

62-1088535

Page 3

	Sche	dule D (Form 990) 2009 WILSON COUNTY PROMOTIONS, INC.	62-1088535	Page 4
1 Total revenue (Form 990, Part VIII, Column (A), Inne 12)				
2 Total expenses (Form 990, Part IX, column (A), Inic 25) 3 Excess or (deletin) for the year Subtract line 2 from line 1 4 Net unrealized gains (losses) on investments 5 Donated services and use of facilities 6 Investment expenses 7 Prior period adjustments 8 Other (Describe in Part XIV) 9 Total adjustments (ret) Add lines 4 through 8 10 Excess or defench for the year per audited financial statements Combine lines 3 and 9 11 Total revenue, gains, and other support per audited financial Statements With Revenue per Return 11 Total revenue, gains, and other support per audited financial Statements With Revenue per Return 12 Announts included in line 1 but not on Form 990, Part VIII, line 12 2 Announts included on line 1 but not on Form 990, Part VIII, line 12 2 Announts included on Form 990, Part VIII, line 12 3 Subtract line 26 from line 1 4 Announts included on Form 990, Part VIII, line 70 b Other (Describe in Part XIV) c Add lines 2 through 24 3 Subtract line 26 from line 1 4 Announts included on Form 990, Part VIII, line 70 b Other (Describe in Part XIV) c Add lines 2 through 25 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part III, line 12) 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part II, line 12) 6 Total revenues and uses of facilities b Prior year adjustments 1 Total expenses and losses per audited financial Statements With Expenses per Return 1 Total expenses and losses per audited financial Statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated Services and use of facilities b Prior year adjustments 1 Total expenses and losses per audited financial Statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated Services and use of facilities b Prior year adjustments 1 Total expenses and lines 1 but not on Form 990, Part IX, line 25 a Donated Services and use of facilities b Prior year adjustments 1 Total expenses and lines 1 but not on Form 990, Part IX, line 25 1 Total expenses and lines 1 but not on Form 99				,458,606.
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line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.				
BAA TEEA3304 02/02/10 Schedule D (Form 990) 2009	line 4	$oldsymbol{I},$ Part X, line 2, Part XI, line $oldsymbol{III},$ lines 2d and 4b. Also complete this	s part to provide a	2b, Part V, ny additional
BAA TEFA3304 02/02/10 Schedule D (Form 990) 2009				
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Schedule D	(Form 990) 2009 WILSON COUNTI PROMOTIONS, INC.	02-1000333	Page 5
Part XIV	Supplemental Information (continued)	-	
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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part 12 General Information on Grants and Assistance

OMB No 1545-0047 2009

Open to Public Inspection

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ► Attatch to Form 990.

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Employer identification number

62-1088535

INC. WILSON COUNTY PROMOTIONS,

X Yes No	s' to Form 0. Use		(h) Purpose of grant or assistance		MAINTAIN FAIR	GROUNDS				:		
deligibility for the grants or assistance, and	ion answered 'Ye more than \$5.00		(g) Description of non-cash assistance	IMPROVEMENTS TO FAIR GROUNDS	OWNED BY THE	COUNTY						
	te if the organizat		(f) Method of valuation (book, FMV, appraisal, other)			337,969. PURCHASE PRICE						
	d States. Complet		(e) Amount of non-cash assistance			337, 969.						
	zations in the Unite	ieeded	(d) Amount of cash grant			0.			-	;		
e amount of the grarce?	eceived more the	itional space is r	(c) IRC section if applicable									
Is to substantiate the arregrants or assistance? procedures for monitoring	ce to Governme	Form 990) if add	(b) EIN									
 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 	Part III Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990. Part IV, line 21 for any recipient that received more than \$5,000. Use	Part IV and Schedule I-1 (Form 990) if additional space is needed	1 (a) Name and address of organization or government	MILSON COUNTY, TN		LEBANON, IN						

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations

1

TEEA3901L 02/10/10

Schedule I (Form 990) 2009

Schedule I (Form 990) 2009 WILSON COUNTY PROMOTIONS, INC.

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

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

(f) Description of non-cash assistance				idditional information.							
(e) Method of valuation (book, FMV, appraisal, other)											
(d) Amount of non-cash assistance				ation required in Pa							
(c) Amount of cash grant				 provide the inform			:	 		i ! I ! I !	
(b) Number of recipients				plete this part to p				1 	 		
(a) Type of grant or assistance				IV. Supplemental Information. Co		!		 	 		

Schedule I (Form 990) 2009

BAA

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered

'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047 2009

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 organization 62-1088535 WILSON COUNTY PROMOTIONS, INC Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (b) Description of transaction (a) Name of disqualified person 1 No Enter the amount of tax imposed on the organization managers or disqualified persons during the year under \$ section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Ś Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (f) Approved by board or committee? (g) Written agreement? (c) Original principal amount (e) In default? (d) Balance due (a) Name of interested person and purpose (b) Loan to or from the organization? From Yes No Yes No Yes No **▶** \$ **Total** Grants or Assistance Benefitting Interested Persons. Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (c) Amount and type of assistance (a) Name of interested person Business Transactions Involving Interested Persons. Complete if the organization answered'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of organization's revenues? (c) Amount of transaction \$ (d) Description of transaction (a) Name of interested person (b) Relationship between interested person and the organization Yes No 5,323. FLORAL AND LANDSCAPING Х MOSS'S FLORIST BOARD MEMBER STEED BROTHERS CONTRACTORS 89,268. OFFICE ADDITION BOARD MEMBER

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

BOARD MEMBER

Schedule L (Form 990 or 990-EZ) 2009

X

47,880. CONTRACT FOR STORAGE BLDG

or 990-EZ.

STEED BROTHERS CONTRACTORS

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

WILSON COUNTY PROMOTIONS, INC.	62-1088535
Form 990, Part VI, Line 11 - Form 990 Review Process	
990 IS REVIEWED BY THE EXECUTIVE TREASURER BEFORE FILING	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
AUDITED FINANCIAL STATEMENTS ARE MAINTAINED AT THE FAIR OFFICE	AND ARE AVAILABLE
UPON REQUEST.	
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	O (Form 990	0) 2009			 		Page 2
Name of the o						Employer identification	on number
WILSON	COUNTY	PROMOTIONS,	INC.			62-1088535	
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