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Department of the Treasury

Return of Organization Exempt From Income Tax

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

2009

OMB No 1545-0047

▶The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service Inspection calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 A For the 2009 D Employer identification number B Check if applicable York County Convention and Visitors Bureau Inc use IRS Address change 23-1604176 label or Doing Business As E Telephone number print or Name change type. See Specific (717) 852-9675 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite Instruc-G Gross receipts \$ 1,788,834 Terminated tions. City or town, state or country, and ZIP + 4 York, PA 17401 Amended return Application pending Name and address of principal officer Is this a group return for ANNE R DRUCK affiliates? 155 W Market Street York, PA 17401 Γ Yes Γ No H(b) Are all affiliates included? If "No," attach a list (see instructions) **✓** 501(c) (6) **◄** (insert no) Tax-exempt status ☐ 4947(a)(1) or ☐ 527 Group exemption number 🕨 **Website:** ► www.yorkpa.org K Form of organization 🔽 Corporation Trust 🗆 Association 🗀 Other 🕨 M State of legal domicile PA L Year of formation 1965 Summary Briefly describe the organization's mission or most significant activities TOURISM PROMOTION Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) \cdot . Number of independent voting members of the governing body (Part VI, line 1b) $\,$. $\,$. Total number of employees (Part V. line 2a) . . . 22 0 Total number of volunteers (estimate if necessary) . 0 Total gross unrelated business revenue from Part VIII, column (C), line 12 Net unrelated business taxable income from Form 990-T, line 34 $\,$. 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 1,721,356 1,470,504 Program service revenue (Part VIII, line 2g) . 217,280 273,262 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 2,780 1,080 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 80,389 43,988 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 2,021,805 1,788,834 269,279 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . 276.234 14 Benefits paid to or for members (Part IX, column (A), line 4) . . 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5 15 696.424 673.829 **Expenses** 16a Professional fundraising fees (Part IX, column (A), line 11e) . . 0 0 Ь Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright 0$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . 1,182,552 973,163 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,155,210 1,916,271 -127,437 19 Revenue less expenses Subtract line 18 from line 12 -133.405 t Assets or | nd Balances | **Beginning of Current End of Year** Year 20 Total assets (Part X, line 16) . 682,208 558,476 Total liabilities (Part X, line 26) . . 126,992 130,697 22 555,216 427,779 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign ***** 2011-02-16 Here Signature of officer ANNE R DRUCK President Type or print name and title Check if Preparer's identifying number Preparer's signature Date 2011-02-14 Eric Schmiedel CPA CSEF Paid empolyed 🕨 🛘 Preparer's Firm's name (or yours Stambaugh Ness PC EIN ▶ if self-employed), **Use Only** address, and ZIP + 4 2600 Eastern Blvd Ste 101 Phone no (717) 757-6999 York, PA 174022916 May the IRS discuss this return with the preparer shown above? (see instructions) .

Part III Statement of Program Service Accomplishments

	1	Briefly	describe	the	organization's	missior
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The York County Convention and Visitors Bureau, Inc. (the Bureau) plans and promotes programs designed to stimulate and increase the volume of tourist, visitor, vacation and convention business within York County, Pennsylvania

2		ion undertake any significant pr 90 or 990-EZ?	ogram services during the year wh	ich were not listed on	┌ Yes ┌ No
	If "Yes," describe	e these new services on Schedu	le O		
3		ion cease conducting, or make	significant changes in how it condu	ıcts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedule O			
4	Section 501(c)(3	3) and 501(c)(4) organizations a	each of the organization's three largind section 4947(a)(1) trusts are in the contract of the	required to report the am	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	•	, , , ,	ON OF 421,049PUBLISHED VISITORS' GUID	, ,	,
	-	· · · · · · · · · · · · · · · · · · ·			
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
				, , , ,	,
	Other program	services (Describe in Schedule	0.)		
4u	(Expenses \$) (Revenue \$)
		<u>_</u>	9,4,1,50,4	/ (Nevenue p	,
4e	i otal program s	ervice expenses►\$			

art TV	Chec	list of	Peguired	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
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		No
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	Yes	
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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		No
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, 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.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	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		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		Νο
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 U S? If "Yes," complete Schedule F, Part II	15		Νο
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 U S ? If "Yes," complete Schedule F, Part III	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		Νο
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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 Schedule L, Part I	25b		
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		Νo
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? <i>If "Yes," complete Schedule L, Part III </i>	27		Νo
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV 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			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> " <i>Yes,"</i> complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νο
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
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		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

	990 (2009)			Page
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance		.,	
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		Yes	No
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 1			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	4 -		
2a	gaming (gambling) winnings to prize winners?	1c		
	Statements filed for the calendar year ending with or within the year covered by this			
b	return			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b	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 financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
Ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
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?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a b	Did the organization make any taxable distributions under section 4966?	9a 9b		
10	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 120		I	I

155 W Market Street York, PA 17401 (717) 852-9675

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

Se	ction A. Governing Body and Management						
	ction A. Governing Body and Planagement				Yes	No	
1a	Enter the number of voting members of the governing body	1a	14				
ь	Enter the number of voting members that are independent	1b	14				
2	Did any officer, director, trustee, or key employee have a family relationship or a bus	iness	relationship with any				
	other officer, director, trustee, or key employee?			2		Νo	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management control over management control over management duties.			3		No	
4	Did the organization make any significant changes to its organizational documents sfiled?	ınce t	he prior Form 990 was	4		Νο	
5	Did the organization become aware during the year of a material diversion of the organization	anızatı	on's assets?	5		Νo	
6	Does the organization have members or stockholders?			6		Νo	
7a	Does the organization have members, stockholders, or other persons who may elect governing body?		r more members of the	7a		Νο	
ь	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b		Νο	
8	Did the organization contemporaneously document the meetings held or written action year by the following		·				
а	The governing body?			8a	Yes		
ь	Each committee with authority to act on behalf of the governing body?	-		8b	Yes		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A,				163		
9	organization's mailing address? If "Yes," provide the names and addresses in Sched			9		Νο	
Se	ction B. Policies (This Section B requests information about policies not	requi	red by the Internal				
	venue Code.)	•					
					Yes	No	
10a	Does the organization have local chapters, branches, or affiliates?			10a		Νo	
b	If "Yes," does the organization have written policies and procedures governing the adaffiliates, and branches to ensure their operations are consistent with those of the or			10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form						
11A	Describe in Schedule O the process, if any, used by the organization to review the Fo	orm 9	90				
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	Yes		
b	Are officers, directors or trustees, and key employees required to disclose annually to conflicts?		-	12b	Yes		
c	Does the organization regularly and consistently monitor and enforce compliance will describe in Schedule O how this is done			12c	Yes		
13	Does the organization have a written whistleblower policy?			13	Yes		
14	Does the organization have a written document retention and destruction policy? .			14	Yes		
15	Did the process for determining compensation of the following persons include a revi independent persons, comparability data, and contemporaneous substantiation of th		• • •				
а	The organization's CEO, Executive Director, or top management official			15a	Yes		
ь	Other officers or key employees of the organization			15b	Yes		
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?			16a		Νο	
b	If "Yes," has the organization adopted a written policy or procedure requiring the org participation in joint venture arrangements under applicable federal tax law, and take	en ste	ps to safeguard the				
	organization's exempt status with respect to such arrangements?			16b			
Se	ction C. Disclosure						
17	List the States with which a copy of this Form 990 is required to be filed▶						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable (3)s only) available for public inspection. Indicate how you make these available. Chapter's website. Volume Town request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing interest policy, and financial statements available to the public. See Additional Data						
20	State the name, physical address, and telephone number of the person who possess	es the	books and records of th	ne orga	ınızatıor	n 🕨	
	The Organization						

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, and current key employees 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, or 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

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee										
(A) Name and Title	(B) Average hours	Posi [†]	((tion (hat a	che (I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Highest compensated employee Key employee Officer Institutional Trustee		Former Highest compensated employee Key employee		from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations	
REBECCA COSTELLO VICE CHAIRMAN	2 00	х		х				0	0	0
COREY WAGNER SECRETARY	2 00	х		х				О	0	0
DAVID H HOGG DIRECTOR	2 00	х						0	0	0
DOUGLAS HOKE DIRECTOR	2 00	х						0	0	0
TERRY LEHR DIRECTOR	2 00	х						0	0	0
JOAN MUMMERT DIRECTOR	2 00	Х						0	0	0
MELANIE MYERS DIRECTOR	2 00	Х						0	0	0
MIKE SCHMID DIRECTOR	2 00	Х						0	0	0
DAVE VANARSDALE CHAIRMAN	2 00	Х		Х				0	0	0
RICK CUNNINGHAM DIRECTOR	2 00	Х						0	0	0
CARL HELRICH DIRECTOR	2 00	Х						0	0	0
KEVIN SCHREIBER DIRECTOR	2 00	Х						0	0	0
HUGH MCPHERSON DIRECTOR	2 00	Х						0	0	0
LIZ WINAND DIRECTOR	2 00	Х						0	0	0
ROB BERKEBILE TREASURER	2 00			х				0	0	0
ANNE R DRUCK PRESIDENT	40 00			х				93,844	0	0

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1b	Total	0		C
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization •0			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If</i> " <i>Yes,"</i> complete Schedule J for such person	5		No
S	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		(C Comper	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization > 0			
		F	orm 99 0) (2009

Form 99	•	•						Page 9
Part V	<u>/1111</u>	Statement of	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
nts ots	1a	Federated cam	paigns 1a					
E 전	ь	Membership du	es 1b	65,911				
ું.≝	c	Fundraising eve	ents 1c					
<u>≅</u> ,⊒	d		zations 1d					
ώE E	e	Government grants		1,404,593				
uatio E	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above					
き	g		butions included in					
Contributions, gifts, grants and other similar amounts	h			▶	1,470,504			
				Business Code				
Program Serwce Revenue	2a	CO-OP ADVERTISI	NG	541,800	171,313	171,313		
	ь	PRINT ADVERTISIN	IG	541,800	86,649	86,649		
	c	KEYSTONE GAMES	_	713,990	15,300	15,300		
Š.	d							
<u>အ</u>	e							
∑. <u>o</u>	f	All other progra	am service revenue					
ξ	g	Total. Add lines	s 2a-2f		273,262			
	3		ome (including dividen					
			ar amounts)	⊢	1,080			1,080
	4		stment of tax-exempt bond	proceeds 🕨				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross Rents	(I) Real	(II) F elsolial				
	ь	Less rental						
	c	expenses Rental income						
	d	or (loss) Net rental inco	Lme or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other						
	Ь	than inventory Less cost or						
	"	other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (los	s)					
÷	8a	Gross income f						
Other Revenue		\$of contributions See Part IV, lin	reported on line 1c)					
<u>.</u>			а					
Ě	Ь		penses b					
0	c 9a		(loss) from fundraising	events F				
		See Part IV, lin						
	b c		penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	ınventory, less					
	ь	less cost of -	a oodssold b					
	c		oods sold D (loss) from sales of inve	entory 📂				
		Miscellaneous		Business Code				
	11a	MISCELLANEC	ous	900,099	43,988			43,988
	ь							
	С							
	d	All other reven						ļI
	е	Total. Add lines			43,988			
	12	Total revenue.	See Instructions .	· · • [1,788,834	273,262	(45,068

Part IX Statement of Functional Expenses

	ot include amounts reported on lines 6b, o, 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	269,279	'		<u> </u>
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	203,273			
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				
i	Compensation of current officers, directors, trustees, and key employees	87,360			
5	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	509,424			
3	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
•	Other employee benefits	77,045			
0	Payroll taxes				
1	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	230,614			
2	Advertising and promotion	152,797			
;	Office expenses				
ļ	Information technology				
5	Royalties				
,	Occupancy	28,392			
,	Travel	29,635			
3	Payments of travel or entertainment expenses for any federal, state, or local public officials				
•	Conferences, conventions, and meetings	19,970			
)	Interest				
L	Payments to affiliates				
2	Depreciation, depletion, and amortization	29,217			
3	Insurance	8,781			
4	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)				
а	KEYSTONE GAMES	204,730			
b	PRINTING & PUBLICATIONS	76,123			
c	PREVENTURE EVENT UNDERW	69,384			
d	BID FEES	49,739			
e	DUES AND SUBSCRIPTIONS	14,911			
f	All other expenses	58,870			
5	Total functional expenses. Add lines 1 through 24f	1,916,271			
6	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				

Part X Balance Sheet (A) (B) End of year Beainning of vear 250 403 1 Cash—non-interest-bearing 1 164,083 103,379 2 2 115,000 103,603 3 3 4 29.137 33.921 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 277,568 250,217 9 9 570.875 10a Land, buildings, and equipment cost or other basis Complete Part 10a VI of Schedule D 10b 507.422 92.670 63.453 b Less accumulated depreciation 10c 11 11 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 3.500 3.500 15 15 16 682,208 16 558,476 Total assets. Add lines 1 through 15 (must equal line 34) . . . 69.954 64,143 17 17 Accounts payable and accrued expenses 18 18 57,038 66,554 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 126,992 26 130,697 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 555.216 427,779 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 📂 🥅 and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets Paid-in or capital surplus, or land, building or equipment fund 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 555,216 427,779 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 682,208 558,476 34

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Νο
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	3b		

Form **990** (2009)

DLN: 93493066002001

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

	me of the organization c County Convention and Visitors Burea	uu Inc			tification number
Par	J-A Complete if the or	ganization is exempt und	er section 501(23-1604176 c) or is a section 527	organization.
1	•			-	
2	Political expenditures	ganization's direct and indirect p	ontical campaign ac	LIVILIES III PAIL IV	*
3	Volunteer hours			•	>
	v olunteer nours				
Par	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excis-	e tax incurred by the organizatior	under section 495!	5 ▶	\$
2	Enter the amount of any excis-	e tax incurred by organization ma	nagers under sectio	n 4955 ►	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form	4720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt und	er section 501(c) except section 501	l(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organization	s for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter h	ere and on Form 112	20-POL, line 17b	\$
4	Did the filing organization file I	Form 1120-POL for this year?			□ Yes □ No
	contributions received that we	ion listed, enter the amount paid re promptly and directly delivere nittee (PAC) If additional space i	d to a separate polit	ıcal organızatıon, such as a	
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
					1

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c)(3) and file	d Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,		
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 18	b)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1	c and 1d)				
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000					
	Over \$500,000 but not over \$1,000,000	0				
	Over \$1,000,000 but not over \$1,500,000	000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000				
	Over \$1,500,000 but not over \$17,000,000	0,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000				
	Over \$17,000,000 \$1,000,000					
		•				
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)				
h	Subtract line 1g from line 1a If zero or less, enter	er -0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					

Sche	edule C (Form 990 or 990-EZ) 2009				age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and have (election under section 501(h)).	s NOT f	iled Fo		8
		(:	a)	(b)	
		Yes	No	A mou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(5), oı	r sectio	n
_	W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2 Yes	<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	Νo
Par	Tt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Paanswered "Yes".				n
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a	<u> </u>		
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
	omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5 so, complete this part for any additional information	, and Part	II-B, line	11	
		anation			

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As Filed Data -

DLN: 93493066002001

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

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.

Name of the organization
York County Convention and Visitors Bureau Inc

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

	organization answered "Yes" to Form 99	0, Part IV, line 6.				
		(a) Donor advised funds	(b) Funds and o	ther accou	nts
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 donor advi funds are the organization's property, subject to the		or advı	sed	☐ Yes	┌ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit				☐ Yes	┌ No
Pa	Conservation Easements. Complete	ıf the organization answered "Yes" t	o Form	າ 990, Part IV	/, lıne 7.	
1 2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	on or pleasure) Preservation of an Preservation of a c	ertified	d historic struc		a
	easement on the last day of the tax year					
				Held at the	End of the	Year
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified his	toric structure included in (a)	2c			
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d			
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	d by th	e organization	during	
	the taxable year 🛌					
4	Number of states where property subject to conserva	ation easement is located 🛌				
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of	violations, and	☐ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents du	uring the year 🖡	-	
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during	, the year ► \$ _		
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sec	tion		☐ Yes	┌ No
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer	the footnote to the organization's financial				
Par	t IIII Organizations Maintaining Collection		or Oth	ner Similar	Assets.	
	Complete if the organization answered '					
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	for public exhibition, education or research	h ın fui			e,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research i			•	
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		r finan	cıal gaın, provid	de the	
а	Revenues included in Form 990, Part VIII, line 1			▶ \$		

Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art	, His	tori	<u>cai ii</u>	easui	res, or O	ner	Similar Ass	ets (c	ontinued)
	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	ie fol	lowing	that are	a significa	nt us	e of its collection	n	
а	Public exhibition		d	Γ	Loan	orexch	ange progra	ms			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
	Provide a description of the organization's co Part XIV	ollections and expla	ın hov	v the	y furthe	er the o	rganızatıon'	s ex	empt purpose in		
	During the year, did the organization solicit cassets to be sold to raise funds rather than t			,						Yes	┌ No
Part	Part IV, line 9, or reported an an						answered	l "Y€	es" to Form 99	0,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for c	ontribu	itions o	r other asse	ts n		Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng t	able		Г		A mo	unt	
c	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year						-	1e			
f	Ending balance						<u> </u>	lf			
	Did the organization include an amount on Fo	orm 990 Part V lin	o 212				Ľ.			Yes	┌ No
			e ∠ 1 ′						,	1 65	1 140
Par	If "Yes," explain the arrangement in Part XIV t V Endowment Funds. Complete i		n ans	Wer	ad "Va	s" to F	orm gan	Dart	· IV line 10		
rai	Lindowinent i unus. Complete i	(a)Current Year		Prior			Years Back			e)Four Y	ears Back
1a	Beginning of year balance	, ,							,		
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held a	s								
а	Board designated or quasi-endowment	%									
ь	Permanent endowment - %										
c	Term endowment ► %										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and ac	dministered	for t	he		
	organization by									Yes	No
	(i) unrelated organizations			•				•	3a(i)	-	
	(ii) related organizations								3a(ii)	<u> </u>	
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•						•	3b	1	<u> </u>
- Part						90. Pa	rt X. line 1	10			
		, and Equipme) Cost o	•	(b)Cost or o		(c) Accumulated		
	Description of investment				sis (inve		basis (othe		depreciation	(d) E	Book value
	and		•	_							
	Buildings		•								
	easehold improvements		•					,374	273,27	_	5,101
	quipment		•				292	,501	234,14	9	58,352
	Other										
Total	. A dd lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990 Part X colui	nn (B)	line	10/-11					1	63,453

Part VII Investments—Other Securities. Sec	e Form 990, Part X, line 17	
(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) should equal Form 990, Part X, col (B) line 12)	*	
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
——————————————————————————————————————	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	▶ Inc. 1E	
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Descri	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	15.) X, line 25. (b) A mount	

Schedule D (Form 990) 2009

	Reconciliation of Change in Net Assets from Form 990 to Financial Stateme	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,788,834
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,916,271
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-127,437
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-127,437
Part		per R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,788,834
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,788,834
4	A mounts included on Form 990, Part VIII, line 12, but not on line $oldsymbol{1}$		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,788,834
art	XIII Reconciliation of Expenses per Audited Financial Statements With Expense	s per	
1	Total expenses and losses per audited financial statements	1	1,916,271
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,916,271
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,916,271

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, 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

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Part I General Information on Grants and Assistance

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

Schedule I (Form 990)

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

DLN: 93493066002001

Schedule I (Form 990) 2009

Department of the Treasury Internal Revenue Service

York County Convention and Visitors Bureau Inc

► Attach to Form 990 Name of the organization

Employer identification number

23-1604176

Form 990, Part IV	/, line 21 for any	Governments and recipient that received 0) if additional space i	more than \$5,000.	Check this box if n	o one recipient recei	ived more than \$5,0	00. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
YORK EXPO CENTER334 CARLISLE AVENUE YORK,PA 17404	231241290	501(C)(3)	100,000				TOURISM ASSET FUNDING
YORK COUNTY HERITAGE TRUST250 E MARKET STREET YORK,PA 17403	231352323	501(C)(3)	23,756				TOURISM ASSET FUNDING
YORK COUNTY RAIL TRAIL AUTHORITY45 CHERRY STREET SEVEN VALLEYS,PA 17360	232625950	York County	49,491				TOURISM ASSET FUNDING
HANOVER CHAMBER OF COMMERCE146 CARLISLE STREET HANOVER,PA 17331	232290798	501(C)(6)	2,000				TOURISM ASSET FUNDING
LANCASTER-YORK HERITAGE REGION1706 LONG LEVEL ROAD WRIGHTSVILLE,PA 17368	753087098	501(C)(3)	74,236				TOURISM ASSET FUNDING
MA & PA RAILROAD PRESERVATION SocietyPO BOX 5122 ORK,PA 174055122	232441623	501(C)(3)	19,796				TOURISM ASSET FUNDING

Cat No 50055P

Part III	Grants and Other Assist	ance to Individ	uals in the United	l States.	Complete if the or	ganızatıon	answered '	'Yes" to	Form 990,	Part IV,	line 22.
	Use Schedule I-1 (Form 99	0) if additional sp	ace is needed.								

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
1 					

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Other Information	Part IV	The Bureau selects organizations that help further its exempt purpose of promoting tourism in York County. It monitors the recipients stated projects to their conclusion to better evaluate the impact on local tourism and help determine future allocation of Bureau resources.
·		

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As Filed Data -

DLN: 93493066002001

OMB No 1545-0047

SCHEDULE 0

Department of the Treasury
Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

2009

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

► Attach to Form 990.

Open to Public
Inspection

Name of the organization York County Convention and Visitors Bureau Inc	Employer identification number
Tork County Convention and visitors bureau inc	23-1604176

ldentifier	Return Reference	Explanation		
Form 990, Part VI, Section B, line 11		The board will review and comment on the 990 at a regular scheduled meeting. Copies will be provided and minutes recorded.		
Form 990, Part VI, Section B, line 12c		The policy is enforced at all board meetings wherein a conflict may arise and a board member will abstain from a vote		
Form 990, Part VI, Section B, line 15		The review process for the President is conducted by the seated chair and vice-chair on an annual basis. A comparable set of compensation data is provided each year for all classifications of employment, along with a salary and bonus history spreadsheet for their review and use		
Form 990, Part VI, Section C, line 19		These documents are made available to the public upon their request		
PART XI LINE 2C		THE Executive Committee ASSUMES RESPONSIBILTY FOR THE FINANCIAL STATEMENTS AND SELECTION OF ACCOUNTANT		

Additional Data

Software ID:

Software Version:

EIN: 23-1604176

Name: York County Convention and Visitors Bureau Inc

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
KEYSTONE GAMES	204,730			
PRINTING & PUBLICATIONS	76,123			
PREVENTURE EVENT UNDERW	69,384			
BID FEES	49,739			
DUES AND SUBSCRIPTIONS	14,911			