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- 990-EZ

Department of the Treasury

Short Form Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-1150

2009

Open to Public Inspection

Internal Revenue Service				► The organization may have to t							اكتفع	
A For the 2009 calend		ar year,	or tax year beginning	10-1	, 2009, a	and ending		9-30	, 2	0 10		
B Check if applicable			Please	C Name of organization				D Emp!	oyer ider	ntification num	nber	
	ddress	change	use IRS label or	ASSOCIATION OF CONNEC	TICUT FAIRS, INC	; .		İ	06-	-0973371		
==	lame ch	-	print or	Number and street (or P O box, if	mail is not delivered	to street address)	Room/suite	E Telep	hone nun	nber		
_=	nitial retu erminati		type. See	PHILIP E. BERGQUIST, 348 I	NORTH SALEM R	D			203	-438-6431		
片			Specific	City or town, state or country, and				E Cro	up Exem			
≒	Vmendec	on pending	Instruc- tions.	RIDGEFIELD CT 06877-242					aber ▶	ption		
<u>''</u>												
	• Sec	tion 501(c)(3)	-	zations and 4947(a)(1) nonexe mpleted Schedule A (Form 99	•	usts must attach		inting Me (specify)	Method ⁻ ☐ Cash ☑ Accrual			
										ganization is	not	
ı V	Vebsi	to > WWV	V.CTFA	IRS.ORG					ttach Schedule B (Form 990,			
				nly one) — ✓ 501(c) (5) ◀	(insert no.) 1 49	47(a)(1) or 52		Z, or 990	-			
	heck			ization is not a section 509(a)(3)	·	_ ` ` ` `				then \$25.00		
											JU. A	
				eturn is not required, but if the c					iete retu	111		
-				e 9 to determine gross receipts; if					· \$	for Dord IV	61,942	
	art I	·		penses, and Changes in				iristru	$\overline{}$	ior Part I.)		
	1		_	ts, grants, and similar amou					1		1,990	
	2	Program s	ervice i	revenue including governme	int fees and conf	tracts			2		17.304	
	3	Membersh	ip due:	s and assessments					3		36,156	
	4	Investmen	t incom	ne					4		70	
	5a	Gross amo	ount fro	om sale of assets other than	inventory .	5a			j			
	b	Less: cost	or othe	er basis and sales expenses		5b						
	С			n sale of assets other than i			ne 5a)		5c			
e	6	•		tivities (complete applicable parts o	- 1		•					
Revenue	a	-		ot including \$		ributions		_				
Ş	"		-	l)		1 1						
Œ				•								
	b		-	nses other than fundraising			i O - \					
	_c		•	ss) from special events and	•		ine 6a)		6c			
	7a			ventory, less returns and allo	wances		_		1			
	b		_						1 1			
	С			oss) from sales of inventory (from line 7a) .			7c			
	8	Other reve	nue (de	escribe ADVERTISING 5,	982 MISC 440)	8		6,422	
	9	Total reve	<u>nue. A</u>	dd lines 1, 2, 3, 4, 5c, 6c, 7d), and 8 ☐	و معام معام دو ۱ و دو ا		ւ. ▶	9		61,942	
	10	Grants and	d sımila	ar amounts paid (attach sche	dule)	7 \	AWD]	10		3,028	
	11	Benefits pa	aid to c	or for members] !	11			
S	12	Salaries, o	ther co	empensation, and employee	benefits	. FEB 0 9	2011 8		12			
nses	13	Profession	al fees	and other payments to inde			2011	!	13			
<u>P</u>	14			utilities, and maintenance	' '		&		14			
Exper	15	-	-	ions, postage, and shipping		OGDEN	. UT		15		25,748	
	16	• • •		describe ► SCHEDULE AT					16		23,347	
	17			Add lines 10 through 16 .				′	17		52,123	
	18	Evenes	(deficit) for the year (Subtract line 1	7 from line (1)				18		9,819	
şts	19		•	nd balances at beginning of	,				10		9,019	
Net Assets	13			e reported on prior year's re					1		05 050	
		•	_		•				19		25,358	
	20		_	net assets or fund balances	•	•			20			
	21			d balances at end of year. C					21		35,177	
Ρ	art II	Balance	e Shee	ets. If Total assets on line 2		\$1,250,000 or i						
				(See the instructions for I	Part II.)		(A) Beg	ginning of	year	(B) End of	year	
22	: C	ash, savings	, and ir	nvestments				2	5,358 2	2	35,177	
23		Land and buildings						2	23			
24		ther assets (_					_		24		
25								2	5,358 2		35,177	
26	_						,			26		
27	N	et assets o	fund i	cribe ► halances (line 27 of column	(B) must agree	with line 21)	-' 		25358 2		35 177	

Part	Statement of Program 5	Service Accom	plishments (See the instr	uctions for Part II	l.)		Expenses
	is the organization's primary exer	b . b E	PROMOTE AGRICULTURAL				ured for section
	ribe what was achieved in carry					501(c)(3) and 501(c)(4) nizations and section
	ner, describe the services provide	ed, the number o	f persons benefited, and o	other relevant info	rmation for	4947	(a)(1) trusts, optional
each	program title.						hers)
28	2 MEETINGS EACH YEAR - SPRING	G MEETING AND A	NNUAL FALL MEETING WIT	H TRADE SHOW F	OR		
	MEMBER FAIRS						
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □	28a	N/A
29	PRINTING AND DISTRIBUTING 90,	000 AGRICULTUR	AL FAIR PROGRAM BOOKLI	ETS AND FAIR DIR	ECTORIES		
	FOR MEMBER FAIRS						
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □	29a	N/A
30							
			includes foreign grants, ch			30a	
	Other program services (attach se						
	(Grants \$) If this amount	includes foreign grants, ch	eck here	<u> </u>	31a	
	Total program service expense	s (add lines 28a t	hrough 31a)	<u> </u>	•	32	
Part	List of Unicers, Directors,	rustees, and Key	Employees. List each one e	ven it not compensation			
	(a) Name and address		(b) Title and average hours per week	(If not paid,	(d) Contributio employee benefit	plans &	
	LIOT ATTAQUED		devoted to position	enter -0)	deferred comper	nsation	other allowances
2EE	LIST ATTACHED	·	PART-TIME VOLUNTEERS				
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	0-EZ (2009)		Р	age 3
Part	Other Information (Note the statement requirements in the instructions for Part V.)			
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	Yes	No ✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	✓	
ь 36	If "Yes," has it filed a tax return on Form 990-T for this year?	35b 36	✓	√
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
ь 38а	Did the organization file Form 1120-POL for this year?	37b 38a		-√ √
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			<u> </u>
39	Section 501(c)(7) organizations. Enter:			i
a b	Initiation fees and capital contributions included on line 9	1	:	
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
	section 4911 ▶; section 4912 ▶; section 4955 ▶	1		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	~	
41	List the states with which a copy of this return is filed. ▶ NONE			
42a		203-43		1
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	U00//	-2422	
_	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		✓
	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.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country:	42c		_✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	• •	.	▶ □
			Voc	NI-
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	Yes	NO V
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	-	• • • • • • • • • • • • • • • • • • •
		000		<u> </u>

► ☐ Yes ☐ No
Form 990-EZ (2009)

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 an	section 4947(a)(1) nonexel (7(a)(1) nonexempt charita d 51.	empt charitable trusts m	able trusts only. Aust answer question	ll sec ons 4	tion 6–49	b
46	Did the organization engage in direct or indirect					Yes	No
	candidates for public office? If "Yes," complete S	•			46		
47	Did the organization engage in lobbying activities				47	<u> </u>	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E					<u> </u>	<u> </u>
49a	Did the organization make any transfers to an ex		-		49a	<u> </u>	.
	If "Yes," was the related organization a section 5				49b		
50	Complete this table for the organization's five hig employees) who each received more than \$100,0	000 of compensation from the	ne organizatio	n. If there is none, en			
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	on (d) Contributions to employee benefit plans & deferred compensation	ac	Experi count a r allowa	and
			·				
	(a) Name and address of each independent contractor	paid more than \$100,000	(b)	Type of service	(c) Co	mpens	ation
					-		
d	Total number of other independent contractors e	each receiving over \$100 000	·····				
u	Total humber of other independent contractors e	Jacin receiving over \$100,000	, -				
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete Declaration						
Sign Here	Signature of officer Signature of officer	5		1/28/2011 Date	·		
	PHILIP E. BERGQUIST, TREASURER Type or print name and title						
Paid	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying nui	mber (Se	— ⊛ instru	ctions)
Prepar							
Use Or	nly yours if self-employed), address, and ZIP + 4			Phone no. ▶			

May the IRS discuss this return with the preparer shown above? See instructions

ASSOCIATION OF CONNECTICUT FAIRS 06-0973371 f/y/e 9/30/10

Grants and Similar Amounts Paid (Line 10)

Scholarships			
Rene Boardman		\$	1,000.00
Jane Baker		\$	1,000.00
Baking Contests	17 winners	\$	238 00
Photo Contest	21 winners	\$	210 00
Premium Book Contest	10 winners	\$	210.00
Apple Pie Contest	10 winners	\$	185 00
Quilt Contest	5 winners	\$	185 00
Total		\$	3,028.00
Other Expenses (Line 16)			
Meetings		\$	18,609.00
Insurance		\$	2,720.00
Contest ribbons & expense		\$	914.00
Dues		\$	500.00
Website		\$	240.00
CT AGR Day		\$ \$ \$	75.00
Supplies & Misc		\$	289 00
Total		\$	23,347 00

The Association of Connecticut Fairs 2009 - 2010 Officers and Directors

•	Officers
President .	Tom Zargurskı, 860-583-4861 Terryville Fair
1st Vice President	Mike Stevens, 860-267-8171 Haddam Neck Fair
2nd Vice President	Bruce Richard, 860-489-3026 Harwinton Fair
Recording Secretary	Bonnie Leroux, 860-283-5919 Terryville Fair
Corresponding Secretary	. Lisa Lamoureux, 203-238-1510 Southington Grange Fair
Assistant Corresponding S	_
Treasurer	Philip Bergquist, 203-438-6431 Norfield Grange Fair
Assistant Treasurer	Joan Buvarsky, 860-779-0508
	Directors - At Large
James Lamoureux	203-238-1510 Southington Grange Fair
Jody Whipple .	860-599-8498 North Stonington Fair
Timothy Comstock .	
Annette Hamilton	
Sandy Eggers	860-774-0404 Brooklyn Faır
Tom Dennis	860-828-4317 Berlin Fair
	Directors - Major Fair
Rosemarie Naples	. 860-349-3016 Durham Fair
Len Bagınskı	860-349-3305 Durham Fair
Len Johnson	. 860-589-8554 Terryville Fair
Nancy Maturo	203-421-3110 Guilford Fair
Janice Steinmetz	860-749-3340 Four Town Fair
Richard LaTaille	860-423-1733 Lebanon Country Fair
D	irectors - District Fairs
Gloria Gableman	. 860-379-5254 Riverton Fair
Ted Powell .	860-537-3949 Hamburg Fair
Gordon Gibson	. 860-871-7757 Wapping Fair
1	Directors - Local Fairs
Jean Meehan	203-758-5653 Prospect Grange Fair
Charles Dimmick	. 203-272-6072
	Cheshire Grange Community Fair Directors - 4-H Fairs
Matt Pohl	203-710-6885
Kathy Naples	Middlesex/New Haven County 4-H Fair 860-828-7446
Sue Pettengill	Middlesex/New Haven County 4-H Fair . 860-345-2890
	Middlesex/New Haven County 4-H Fair
Laura Bartlett • Nancy Hii	Directors - Honorary nes-Krampitz • Eugene Speck • M. Eugene Bromley

Laura Bartlett • Nancy Hines-Krampitz • Eugene Speck • M Eugene Bromley Harrison DeMars • Marion Thierry • Marge Madden • Frank Kohanski