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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2011 Open to Public Inspection

-	eck if applicable	alendar year, or tax year b C Name of organization	egining 11/01/.	II, and e	nding 10/31	./ 12	0	Emplo	yer identific	ation number
Ac	dress change	G	ratiot County F	air for	Youth					
	ame change	Doing Business As						38-	-61 <u>09</u>	129
=	•	Number and street (or P O box if	mail is not delivered to street ad	idress)		Room/s	uite E	Teleph	one number	
	itial return	214 East Center	: Street			_L_		989	9-87 <u>5</u>	-5292
Te	erminated	City or town, state or country, and	3 ZIP + 4			•				
□ Ar	mended return	Ithaca	MI	48847			G	Gross rece	eipts \$	813,8
_		F Name and address of principal of								
^_	pplication pending					H(a)	Is this a grou	p return for a	affiliates?	Yes X
						Н(b)	Are all affilia	tes include	d?	Yes
							If "No,"	attach a list	(see instruc	ctions)
т	ax-exempt status	X 501(c)(3) 501(c)) () ((insert no.)	4947(a)((1) or 527					
		ww.qcffy.org			, , , , , , , , , , , , , , , , , , , ,	H(c)	Group ехел	ption numb	oer >	
	orm of organization	X Corporation Trust	Association Other	,		L Year of form				f legal domicile
		ımmary	71000000011			100.07		<u></u>	•	
Ť		scribe the organization's miss	eign or most significant ac	ctivities						
-		TY FAIR FOR YOUTH		Cuvilles.						
Activities & Governance	COON	II FAIR FOR TOUT	1							
<u>a</u>										
ē		بمنع								
<u>ģ</u>	2 Check the	is box ▶ 📗 if the organizati	on discontinued its opera	ations or dispo	osed of more than 2	:5% of its n	et assets	1 1		
∞	3 Number of	of voting members of the gove	erning body (Part VI, line	1a)				3	14	
<u>8</u>	4 Number of	of independent voting membe	rs of the governing body	(Part VI, line	1b)			4	14	
Ĭ	5 Total nun	nber of individuals employed	ın calendar year 2011 (Pa	art V, line 2a)				5	1	
5	6 Total nun	nber of volunteers (estimate i	f necessary)					6	0	
`	7a Total unre	elated business revenue from	n Part VIII, column (C), lin	ne 12				7a		
-	b Net unrei	ated business taxable income	e from Form 990-T, line 3	34	こったいを	\mathbf{C}		7b		
\neg					(the contract of 11	()	Prior Year		C	urrent Year
اه	8 Contribut	ions and grants (Part VIII, line	e 1h)	21				,810		142,7
Revenue	9 Program	service revenue (Part VIII, lin	ie 2g)	4032	APR 16 1 1	أراما	563	,938		606,0
<u> </u>	10 Investme	nt income (Part VIII, column ((A), lines 3, 4, and 7d)	181	PER TRACTOR			254		7
ř		venue (Part VIII, column (A), I		nd 11 e) - {	DODEN, U	7 1	67	,458		59,3
		enue – add lines 8 through 11		T T			840	,460		808,8
T		nd similar amounts paid (Part						0		
		paid to or for members (Part		•			-	0		
,,		other compensation, employ		mn (A) lines !	5–10)		37	,722		47,3
penses		onal fundraising fees (Part IX,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			0		
듥		draising expenses (Part IX, c			23,168					
<u>~</u>		_			23,100		657	,135		707,9
		penses (Part IX, column (A),		(A) line (15)		-		,857		755,3
	•	enses. Add lines 13–17 (mus		A), line 25)				,603		53,5
_ &	19 Revenue	less expenses Subtract line	18 from line 12			Beging	ning of Curre			nd of Year
Net Assets or Fund Balances	20 Total acc	ets (Part X, line 16)						,576	_	577,7
Bai								,338		46,9
		ilities (Part X, line 26)	line 24 from line 20					, 238		530,8
		ts or fund balances Subtract	iiile 2 i Iroiti line 20				<u> </u>	, 230		220,0
		gnature Block							daa • •	aliad id :-
Un	der penalties of p	perjury, I declare that I have examplete Declaration of preparer	nined this return, including a	on all information	icnedules and stateme	ants, and to i	ure pest of n wledge	ny knowie	uge and be	ener, it is
uut	-, wheth, and the	mpiete of arauon of preparer	on one of is yased	Cit dis initofffiaut	or millor preparet is			1		
		<u> </u>	your -						1 /	
Sig	'' '	Signature of officer		1	A			Date	10/-	1/2
der	1 -	BRIAN GARONS	K, FAIL C	<u>IOKULNI A</u>	TOK				17/11	7/3
		Type or print name and title					T		· ·	
		pe preparer's name	Preparer's	signature			Date	Check		PTIN
aid		am C. Hirschman, CPA		n C Hirsch			03/12/1	3 self-en		P00283318
	er Firm's na				ny, P.C.		Fim	n's EIN	38	<u>-246258</u>
, ret	Only		arwick Dr St	e A			1			
rep Jse	• I						Ph	one no	989	-463-61
rep Jse	Firm's ad	ddress 🕨 Alma, M	II 48801				1 1 1 1 1	3116 110		
Jse	Firm's ac	ddress Alma, M ss this return with the prepare		tructions)) III III		Yes

4d Other program services. (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses > 710,612

Form 990 (2011) Gratiot County Fair for Youth 38-6109129 Page 3 Part IV **Checklist of Required Schedules** Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х complete Schedule A 2 X Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х candidates for public office? If "Yes," complete Schedule C, Part I 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) X election in effect during the tax year? If "Yes." complete Schedule C. Part II 4 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, 5 Х Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 6 have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Х 6 "Yes," complete Schedule D, Part I 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 Х the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 Х complete Schedule D, Part III 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," Х complete Schedule D. Part IV 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D. Part V X 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 11a Х complete Schedule D, Part VI b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more X 11b of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more X of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets X reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 11d Х e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a Х Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if 12b the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 14a 14a Did the organization maintain an office, employees, or agents outside of the United States? **b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate X 14b foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 Х organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 Х 16 to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 Х Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

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

If "Yes." complete Schedule G, Part III

18

19

20a

20b

Х

18

19

Form 990 (2011) Gratiot County Fair for Youth Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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 Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	·		
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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 IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		<u>X</u>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u>X</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1		
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u>X</u>
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		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	1		
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
þ	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	l		.,,
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>X</u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable			***
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	\vdash	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		v
••	Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

12.5	Check if Schedule O contains a response to any question in this Part V						\Box
	Check it Schedule O contains a response to any question in this Part V					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	0				
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and						Ė
	reportable gaming (gambling) winnings to prize winners?				1c		Х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	1				Ė
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	,		-	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						É
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a_		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	nority					
	over, a financial account in a foreign country (such as a bank account, secunties account, or other financial	cial					ĺ
	account)?				4a		X
b	If "Yes," enter the name of the foreign country						ĺ
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Acc	counts.					ĺ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?			5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				5c		
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		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions of	or			۱.,		
_	gifts were not tax deductible?				6b		ļ
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 good	as			7a	1	ĺ
L	and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				7.5		
·	required to file Form 8282?				7c	'	
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1		1.0		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit control				7e	•	ĺ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8		s requ	ured?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization				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		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?				9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?				9b		<u> </u>
10	Section 501(c)(7) organizations.Enter						
а	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	10b	L				
11	Section 501(c)(12) organizations.Enter		1				
а	Gross income from members or shareholders	11a	-				l
b	Gross income from other sources (Do not net amounts due or paid to other sources	1					I
	against amounts due or received from them.)	[11b]	L	<u> </u>	 	1	ŧ
12a	Section 4947(a)(1) non-exempt charitable trusts.ls the organization filing Form 990 in lieu of Form 10		1		12a	-	▙
_ b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	L		\dashv		1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				42-	 	
а	Is the organization licensed to issue qualified health plans in more than one state?				13a	 	-
L	Note. See the instructions for additional information the organization must report on Schedule O.						İ
b	Enter the amount of reserves the organization is required to maintain by the states in which	13b	l				I
_	the organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13b			\dashv		1
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?				14a	 	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	+			14b	†	T
	, and the second						

Form 990 (2011) Gratiot County Fair for Youth 38-6109129 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule X O See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 14 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 14 1b b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Х one or more members of the governing body? b Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Х b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Χ 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Х 13 13 Did the organization have a written whistleblower policy? 14 Did 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 approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure ΜI 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ▶ BRIAN GARDNER 214 EAST CENTER STREET MI 48847 989-875-5292

ITHACA

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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.
- 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, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees; and former such persons

X Check this box if neither the organical (A) Name and Title	(B) Average hours per week (describe hours for	(de bo	o not x, unl	Pos check ess pe nd a c	ition more rson i	than o	ne an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	nsututional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) DARCY MARTYN										
DIRECTOR	1.00	<u> </u>						0	0	0
(2) JOE BUTCHER										
DIRECTOR	1.00					Ш		0	0	0
(3) BECKY HIRSCHMAN										
PRESIDENT	1.00							0	0	0
(4) NICOLE WHITMORE										_
SECRETARY	1.00					\sqcup		0	0	0
(5) JASON O'BOYLE				1		1				_
DIRECTOR	1.00							0	0	0
(6) KRIS DUFLO	İ								_	
TREASURER	1.00		ļ					0	0	0
(7) LANCE FOWLER		ļ						_		
TEEN REPRESENTATIVE	1.00	_				L		0	0	0
(8) BEN PRITCHARD									_	
DIRECTOR	1.00	ـــــ				ļ		<u> </u>	0	0
(9) MARK STORY]	ŀ					_	_	_
VICE PRESIDENT	1.00	1		<u> </u>	<u> </u>	Щ		0	0	0
(10)ARGIL WILLMAN								_	_	
DIRECTOR	1.00	<u> </u>	<u> </u>	<u> </u>	<u> </u>	 		0	0	0
(11) SARA STACK		1			l	1				
TEEN REPRESENTATIVE	1.00	↓	<u> </u>	├		<u> </u>		0	0	0
(12) JOSH SHAFFER	l									
DIRECTOR	1.00	₩	_	ــــ	<u> </u>	1		0	0	0
(13) MARTHA STELLOW								_	_	_
DIRECTOR	1.00	1	_	 	<u> </u>			0	0	0
(14) JAKE CARY								1		
DIRECTOR	1.00	1					<u> </u>	0	0	0

(A) Name and title		(B) Average hours per week (describe hours for	(d bo	lo not ox, uni	Pos check ess po	C) ition more	than one both	one n an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estima amoun othe compens	ited it of ir sation	
		related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(** 2 1000 111100)		organiza and rela organiza	ation ated	
(15)							ļ							
(16)								-						
(17)											 			
(18)								-						
(19)							ļ							
(20)														
(21)						-		-						
(22)														
(23)														
(24)				-			ļ							
(25)				_			<u> </u>	-						
1b	Sub-total				<u>. </u>	<u> </u>		>			<u> </u>			
с <u>d</u>	Total from continuation she Total (add lines 1b and 1c)	ets to Part VII,	secti	ion /	٩			>						
2	Total number of individuals (increportable compensation from	-		to th	ose	liste	d abo	ve)	who received more than \$1	00,000 in				
3	Did the organization list any for	rmer officer, dire	ctor.	or tr	uste	e. ke	v em	vola	ree, or highest compensated	1			Yes	No
4	employee on line 1a? If "Yes," For any individual listed on line	complete Schedue 1a, is the sum o	ıle J f rep	for s ortab	uch :	ndiv ompe	idual ensat	ion	and other compensation from			3		Х
	organization and related organ individual	izations greater t	han S	\$150	,000	? If "	Yes,	" co	mplete Schedule J for such			4		х
5	Did any person listed on line 1a for services rendered to the org									dividual		5		Χ_
Sec 1	ction B. Independent Contract Complete this table for your five			nd in	dono	ndo	at co	otra	rtore that recoved more tha	n \$100 000 of				
	compensation from the organiz								r year ending with or within				(C)	
	Name and	l búsíness address						\vdash	Descrip	tion of services		Co	mpensat	tion
						-								
								-						
								-						-
	Total number of independent of	ontractors (include	ding !	hut n	ot lir	nited	to th	1056	listed above) who					
	received more than \$100,000		-							0		<u> </u>	<u>99</u> 1	<u> </u>

Pa	rt V		nt of Reve		rall		<u>ouen</u>			
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इइ	1a	Federated camp	aigns	1a					77.	
퉏딁		Membership due	•	1b						‡
S, E	С	Fundraising ever	nts	1c						I I
業원	d	Related organiza	itions	1d						1
S,E	е	Government grants (co	ntnbutions)	1e			I			
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, and similar amounts no		1f		142,767				
	g	Noncash contributions	included in lines 1a-	1f :	\$		Ī			1
	<u>h</u>	Total. Add lines	1a1f			.	142,767			
e l						Busn. Code	-			1
Ye.	2a	LIVESTOCK	SALE				485,959	485,959	· · · · · · · · · · · · · · · · · · ·	
훏	b	EXHIBIT S.	ALE			ļ	73,169	73,169		
. <u>Ş</u>	Ç	RODEO					34,382	34,382		
Ser	d	OTHER					6,131	6,131		
틽	е	LIVESTOCK	INCOME				5,269	5,269		
Program Service Revenue		All other progran		nue			1,105	1,105	, ,	<u> </u>
<u>-</u>	g	Total. Add lines				<u> </u>	606,015			
	3	Investment incor	ne (ıncludıng d	lividend	is, interes	it,	ľ			
		and other similar	amounts)			▶	723	723		
	4	Income from inve	estment of tax-	exemp	t bond pro	oceeds 🕨				
	5	Royalties				>				
		L	(ı) Real		(u)	Personal	İ			•
	6a	Gross rents				12,593	İ			
	b	Less rental exps								1
	C	Rental inc or (loss)				12,593				1
		Net rental incom	e or (loss)		,	>	12,593	12,593		
	/a	Gross amount from sales of assets	(i) Securities	3	(11) Other	Į.			
	other than inventory						1			
l	þ	Less cost or other					Į.			‡
[basis & sales exps					1			
İ	C	Gain or (loss)	<u> </u>		<u> </u>		Į.	I		•
	d	Net gain or (loss)			▶.				
اما	8a	Gross income from	fundraising ever	nts						
Other Revenue		(not including \$					1			1
ě		of contributions rep	orted on line 1c)				I			•
تر حد ا		See Part IV, line 18	3	а		12,470	I			
. 美	b	Less: direct expe	enses	b		4,969	1			•
٥	C	Net income or (lo	oss) from fundi	raising	events	•	7,501			7,501
	9a	Gross income from	gaming activities	s.			!			
		See Part IV, line 19)	а			I			
	b	Less direct expe	enses	b			I			1
	C	Net income or (lo	oss) from gami	ing acti	vities	•				
	10a	Gross sales of in	ventory, less				Ī			
		returns and allow	vances	а			‡			
	ь	Less cost of goo	ods sold	b			1			
Į.	С	Net income or (le	oss) from sales	s of inv	entory	▶				
[Misce	llaneous Revenue			Busn. Code				
	11a	PARKING FE	SS				16,905	16,905		
	b	CAMPING					15,225	15,225		
	С	CARNIVAL					6,509	6,509		
l	d	All other revenue	e				643	643		
	е	Total. Add lines	11a-11d			•	39,282			
	12	Total revenue	See instruction	ns		•	808,881	658,613		0 7,501

Part IX Statement of Functional Expenses

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).

	Check if Schedule O contains a response	to any question in this Part	IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		-		
•	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
-	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees		<u> </u>		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	47,328	41,194	6,134	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				·
b	•		-		
	Accounting				
ď	Lobbying Professional fundraising services See Part IV, line 17				
e f	Investment management fees				
g	Other				
12	Advertising and promotion	7,885	7,885		
13	Office expenses	. / 555	.,,,,,,,		
14	Information technology				
15	Royalties				
16	Occupancy	16,544	16,544		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				·
22	Depreciation, depletion, and amortization	54,619	54,619		<u> </u>
23	Insurance				
24	•				
	above. (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)	160 905	460,805		
a		460,805 69,982			
b		17,688		<u> </u>	17,688
C	RODEO AWARDS	11,894		<u> </u>	17,000
d		68,569			5,480
e 25	All other expenses Total functional expenses Add lines 1 through 24e	755,314		21,534	23,168
26		, , , , , , , , , ,	, 50,012		
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ if				
	following SOP 98-2 (ASC 958-720)	I			

Part >	Balance Sheet						
				(A) Beginning of year		(B) End of year	
1	Cash—non-interest bearing	•		116,087	1	52,988	
2	Savings and temporary cash investments			 	2		
3	Pledges and grants receivable, net				3		
4	Accounts receivable, net			73,129	4	57,279	
5	Receivables from current and former officers, directors,	trustees,	key				
	employees, and highest compensated employees. Com	plete Par	t II of				
	Schedule L				5		
6	Receivables from other disqualified persons (as defined	l under se	ection				
	4958(f)(1)), persons described in section 4958(c)(3)(B),	and cont	ributing				
	employers and sponsoring organizations of section 501	(c)(9) volu	untary				
ফ	employees' beneficiary organizations (see instructions)				6		
Assets 6 7	Notes and loans receivable, net				7		
₹ 8	Inventories for sale or use				8		
9	Prepaid expenses and deferred charges			663	9	5	
10a	Land, buildings, and equipment: cost or						
	other basis Complete Part VI of Schedule D	10a	925,069				
Ь	Less accumulated depreciation	10b	457,623	372,697	10c	467,446	
11	Investments—publicly traded securities				11		
12	Investments—other secunties. See Part IV, line 11				12		
13	Investments—program-related See Part IV, line 11				13		
14	Intangible assets				14		
15	Other assets. See Part IV, line 11				15		
16	Total assets. Add lines 1 through 15 (must equal line 3	34)		562,576	16	577,718	
17	Accounts payable and accrued expenses			1,267	17	705	
18	Grants payable			·	18		
19	Deferred revenue		14,400	19	12,800		
20	Tax-exempt bond liabilities				20		
21	Escrow or custodial account liability Complete Part IV of	of Schedu	le D		21		
22 مِي	Payables to current and former officers, directors, truste	ees, key					
Liabilities	employees, highest compensated employees, and disq	ualified pe	ersons				
abi	Complete Part II of Schedule L				22		
□ ₂₃	Secured mortgages and notes payable to unrelated thir	d parties			23		
24	Unsecured notes and loans payable to unrelated third p	arties		69,044	24	33,097	
25	Other liabilities (including federal income tax, payables	to related	third				
	parties, and other liabilities not included on lines 17-24)	. Complet	e Part X				
	of Schedule D			627	25	311	
26	Total liabilities. Add lines 17 through 25			85,338	26	46,913	
	Organizations that follow SFAS 117, check here	X and	complete				
S	lines 27 through 29, and lines 33 and 34.						
등 27	Unrestricted net assets			477,238	27	530,805	
<u>R</u> 28	Temporanly restricted net assets				28		
일 29					29		
교	Organizations that do not follow SFAS 117, check	here 🕨	and				
Net Assets or Fund Balances 22 30 31 32	complete lines 30 through 34.				‡		
30 30	Capital stock or trust principal, or current funds				30		
8 31	Paid-in or capital surplus, or land, building, or equipmen	d-in or capital surplus, or land, building, or equipment fund					
<u>5</u> 32	Retained earnings, endowment, accumulated income, of	or other fu	ınds	<u>-</u>	32		
2 33	Total net assets or fund balances			477,238		530,805	
34	Total liabilities and net assets/fund balances			562,576	34	577,718	

Form 990 (2011)

orm	990 (2011) Gratiot County Fair for Youth 38-6109129			Pag	<u>je 12</u>				
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response to any question in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	8	<u>08,8</u>	<u> 381</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2	7!	55,3	314				
3	Revenue less expenses Subtract line 2 from line 1								
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))								
5	Other changes in net assets or fund balances (explain in Schedule O)	5							
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,								
	column (B))	6	5	30,8	<u> 305</u>				
Pa	rt XII Financial Statements and Reporting				_				
	Check if Schedule O contains a response to any question in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_	I					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			I					
	Schedule O			1					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>				
b	Were the organization's financial statements audited by an independent accountant?		2b		X				
С	If "Yes" to line 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?		2c						
	If the organization changed either its oversight process or selection process during the tax year, explain in			Ī					
	Schedule O.			I					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			I					
	issued on a separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis			ı					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			l					
	the Single Audit Act and OMB Circular A-133?		3a						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						
			For	ա 99 0	(2011)				

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section

Reason for Public Charity Status (All organizations must complete this part) See instructions

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

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Part I

Gratiot County Fair for Youth

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

Employer identification number 38-6109129

2		A school desc	cribed in section 170(b)(1)(A	()(ii).(Attach Schedule E)									
3		A hospital or a	a cooperative hospital service	e organization described in secti	on 170(b)	(1)(A)(iii)).						
4		A medical res	earch organization operated	in conjunction with a hospital des	scribed in	section 1	170(b)(1)(A)(iii).	Enter th	ne hospi	tal's name,		
		city, and state	•										
5		An organizati	on operated for the benefit of	a college or university owned or	operated	by a gove	emmenta	al unit de	scribed	ın			
		section 170(b)(1)(A)(iv).(Complete Part I	l)									
6		A federal, sta	te, or local government or gov	vernmental unit described in sec	tion 170(b)(1)(A)(\	/).						
7	ı	An organizati	on that normally receives a si	ubstantial part of its support from	a govern	mental un	it or fron	n the ge	neral pu	iblic			
		described in s	section 170(b)(1)(A)(vi).(Co	mplete Part II)									
8		A community	trust described in section 17	70(b)(1)(A)(vi) .(Complete Part II)								
9	Χ	An organizati	on that normally receives. (1)	more than 33 1/3% of its support	rt from cor	ntributions	, membe	ership fe	es, and	gross			
		receipts from	activities related to its exemp	t functions—subject to certain ex	xceptions,	and (2) n	o more t	han 33	1/3% of	ıts			
		support from	gross investment income and	l unrelated business taxable inco	me (less	section 51	1 tax) fr	om busi	nesses				
		acquired by the	he organization after June 30	, 1975. See section 509(a)(2). (Complete	Part III)							
10		An organizati	on organized and operated ex	xclusively to test for public safety	See sec	tion 509(a)(4).						
11			•	clusively for the benefit of, to pe				•					
				d organizations described in sec						tion			
				e type of supporting organization			1						
	_	а Туре	□ "	c Type III–Functiona			d		e III–Oti				
е	L	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons											
			-	than one or more publicly suppo	rted organ	nizations o	describe	d in sect	ion 509	(a)(1)			
		or section 509	` ' '										
f		-		mination from the IRS that it is a	Type I, Ty	pe II, or I	ype III s	upportin	g				\Box
		-	check this box			6 41							
g		_		on accepted any gift or contributi	on from a	ny or the							
		following per			4b =====		ما درار جورات				[-	Yes	No
				ntrols, either alone or together wi	ui person	s describe	:u III (II) i	alio			11g(i)	105	-110
			 w, the governing body of the s member of a person describe 	• • •							11g(ii)		
		•	ontrolled entity of a person de	**							11g(iii)		
			following information about the								[119(11)]		
h		me of supported	(ii) EIN	(iii) Type of organization	(iv) is the	organization	(v) Did v	ou notify	(vi)	Is the	(vii) Amour	nt of	
		rganization	(11, 2.11	(described on lines 1-9	1 ' '	sted in your	the organ	nization in	organizat	tion in col	support		
				above or IRC section	governing	document?		of your port?		zed in the			
				(see instructions)	Yes	No	Yes	No	Yes	No			
(A)					1	-							
٠٠,										1			
(B)				-									
• •								1					
(C)													
							,			<u> </u>			
(D)													
					<u> </u>								
(E)													
					1			<u> </u>	ļ				
			<u> </u>	‡	ŧ	1	1	1	1	1 1	1		

For Paperwork Reduction Act Notice, see the Instructions for

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support	· ·						
Caler	ndar year (or fiscal year beginning in)▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
	tion B. Total Support			•				
Caler	ndar year (or fiscal year beginning in)▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1	(f) Total
7	Amounts from line 4			ļ				
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	·····						
11	Total support. Add lines 7 through 10		L		<u> </u>	<u> </u>		
12	Gross receipts from related activities, etc. (12	
13	First five years. If the Form 990 is for the	-	second, third, four	th, or fifth tax year	as a section 501(c)	(3)		
	organization, check this box and stop here			··				>
	tion C. Computation of Public Su	•					Τ	
14	Public support percentage for 2011 (line 6,			(f))			14	
15	Public support percentage from 2010 Sche				4/00/	al. Maia	15	%_
16a	33 1/3% support test—2011.If the organi				1/3% or more, che	CK UNS		▶ 🗌
L	box and stop here. The organization qualif 33 1/3% support test—2010. If the organi	•	• • •		10 22 1/29/ or more			
b	check this box and stop here. The organiz				15 33 1/3 /6 01 111016	7,		▶ □
172		•		=	or 16h and line 1	∆ is		•
17a	10% or more, and if the organization meets	-						
	Part IV how the organization meets the "fac							
	organization	is-and-circumstan	ces test The orga	riizatiori quaiiics a	s a pablicly support			▶ □
b	10%-facts-and-circumstances test—20°	IO. If the organizati	on did not check a	box on line 13, 16a	a, 16b, or 17a, and	line		ت -
	15 is 10% or more, and if the organization is							
	Explain in Part IV how the organization med					cly		
	supported organization					•		▶ 🗌
18	Private foundation. If the organization did	not check a box o	n line 13, 16a, 16b,	, 17a, or 17b, chec	k this box and see			
-	instructions							▶ [

Support Schedule for Organizations Described in Section 509(a)(2)

nization failed to qualify under Part II

	If the organization fails to						
	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	23,867	34,883	174,370	178,779	122,787	534,686
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	504,858	500,896	515,364	666,714	677,889	2,865,721
3	Gross receipts from activities that are not an unrelated trade or business under section 513				15,925	12,470	28,395
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge	1					
6	Total. Add lines 1 through 5	528,725	535,779	689,734	861,418	813,146	3,428,802
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						3,428,802
	tion B. Total Support	 					
Caler	ndar year (or fiscal year beginning in)▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	528,725	535,779	689,734	861,418	813,146	3,428,802
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	567	549	984	254	723	3,077
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	567	549	984	254	723	3,077
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					_	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)	529,292	536,328	690,718	861,672	813,869	3,431,879
14	First five years. If the Form 990 is for the	-	econd, third, fourth	, or fifth tax year as	a section 501(c)(3	5)	. □
900	organization, check this box and stop here		7.0				
		1_1		<u> </u>		15	99 91 %
15 16	Public support percentage for 2011 (line 8, Public support percentage from 2010 Sche	* *	-	"		16	99.91 %
	etion D. Computation of Investmen				<u> </u>		33.31 %
17	Investment income percentage for 2011 (li			olumn (f))		17	%
18	Investment income percentage from 2010			() /		18	%
19a	33 1/3% support tests—2011. If the orga	nization did not chec	k the box on line 14				
	17 is not more than 33 1/3%, check this bo						▶ X
b	33 1/3% support tests—2010. If the orga line 18 is not more than 33 1/3%, check thi						>

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Page 4

Schedule A (Form 990 or 990-EZ) 2011 Gratiot County Fair for Youth 38-6109129

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

2011
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Employer identification number Name of the organization Gratiot County Fair for Youth 38-6109129 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958), 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 2 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 (ASC 958) relating to these items. \$ a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	edule D (Form 990) 2011 Gratiot Co	ounty Fai	r for	Youth		_38-610	9129			Page 2
P	art III Organizations Maintaining	ollections of Art, Historical Treasures, or Other Sir								
3	Using the organization's acquisition, accession collection items (check all that apply):	, and other records	, check a	ny of the follow	ving that are a	a significant us	se of its			-
a	Public exhibition	d 🗍	Loan or	exchange prog	grams					
b	Scholarly research	е 🗍	Other		•					
С	Preservation for future generations									
4	Provide a description of the organization's colle	ctions and explain	how they	further the org	janization's ex	xempt purpos	e in Part			
	XIV		·	_						
5	During the year, did the organization solicit or re	eceive donations o	f art, histo	orical treasures	s, or other sim	ular				
	assets to be sold to raise funds rather than to b	e maintained as pa	art of the o	organization's	collection?				Yes	☐ No
Pa	art IV Escrow and Custodial Arra	ngements. Co	mplete	ıf the organ	ization ans	wered "Yes	s" to Form 99	0, Part	ĪV,	
	line 9, or reported an amount	on Form 990, I	Part X, I	ine 21.						
1a	Is the organization an agent, trustee, custodian	or other intermedia	ary for co	ntributions or o	ther assets n	ot	•			
	included on Form 990, Part X?								Yes	No
b	If "Yes," explain the arrangement in Part XIV ar	d complete the foll	lowing tab	le:						
								Amo	unt	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Form	n 990, Part X, line	21?						Yes	No
b	If "Yes," explain the arrangement in Part XIV									_
P	art V Endowment Funds. Comple	te if the organi	zation a	nswered "Y	es" to Forn	n 990, Part	IV, line 10.			
		(a) Current year	(b) Prior year	(c) Two yea	ars back	(d) Three years back	(e)	Four year	ars back
1a	Beginning of year balance									
b	Contributions						-		•	
С	Net investment earnings, gains, and									
	losses									
d	Grants or scholarships									
е	Other expenditures for facilities and					, "			***************************************	
	programs		}		ł					
f	Administrative expenses									
g	End of year balance							—	***********	
2	Provide the estimated percentage of the curren	t vear end balance	(line 1g.	column (a)) he	ld as					
а	Board designated or quasi-endowment ▶	%	(
ь	Permanent endowment ▶ %									
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c should	egual 100%								
3a	Are there endowment funds not in the possessi	•	on that a	re held and ad	ministered for	r the				
	organization by	o oo o.gaza.							Ye	s No
	(i) unrelated organizations							3a		3 110
	(ii) related organizations							3a(+
b	If "Yes" to 3a(ii), are the related organizations list	sted as required or	Schedul	o R2				31	$\neg \tau$	
4	Describe in Part XIV the intended uses of the or	•							<u>, </u>	
	ert VI Land, Buildings, and Equip				10	•	-			
	Description of property	(a) Cost or other		(b) Cost or o		(c) Accur	nulated	(d) B	ook value	
		(investment		(ath	1	depred		(0,0		-
12	Land	, , , , , , , , , , , , , , , , , , , ,	-	,	-					
	Buildings			-	74,327		20,637		3 5 2	690
	Leasehold improvements			0	17,341	<u> </u>	20,03/		<u> </u>	<u>,690</u>
	•			2	50 743	ר	36 996		112	756
	Equipment				50,742	Т	36,986		<u> 113</u>	<u>,756</u>
	Other I. Add lines 1a through 1e (Column (d) must equ	al Form 990 Post	Y column	(R) line 10(e)		-			167	110
		u. i oiiii əəu, Fall.	A, QUIUIIII	10(C)	' /		Sahaa	lula D (E		,446

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	Other Liabilities	311
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total	I. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	311

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Sche	edule D (Form 990) 2011 Gratiot County Fair for Youth	38-6109129	Page 4				
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Fin	ancial Statements					
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1					
2	Total expenses (Form 990, Part IX, column (A), line 25)	2					
3	Excess or (deficit) for the year Subtract line 2 from line 1	3					
4	Net unrealized gains (losses) on investments	4					
5	Donated services and use of facilities	5_					
6	Investment expenses	6					
7	Prior period adjustments	7					
8	Other (Describe in Part XIV)	8					
9	Total adjustments (net) Add lines 4 through 8	9					
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10					
₽a	art XII Reconciliation of Revenue per Audited Financial Statements With Rev	enue per Return					
1	Total revenue, gains, and other support per audited financial statements	1					
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12						
а	Net unrealized gains on investments						
b	Donated services and use of facilities 2b						
C	Recoveries of pnor year grants 2c						
d	Other (Describe in Part XIV)						
е	Add lines 2a through 2d	2e					
3	Subtract line 2e from line 1	3					
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b						
b	Other (Describe in Part XIV)						
C	Add lines 4a and 4b	4c					
5		5					
Pa	art XIII Reconciliation of Expenses per Audited Financial Statements With Ex	penses per Return					
1	Total expenses and losses per audited financial statements	1					
2	Amounts included on line 1 but not on Form 990, Part IX, line 25						
а							
þ	Pnor year adjustments 2b						
C	Other losses 2c						
d	Other (Describe in Part XIV)						
е	Add lines 2a through 2d	_2e					
3	Subtract line 2e from line 1	3					
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b						
þ	Other (Describe in Part XIV)						
	Add lines 4a and 4b	4c					
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5					
Pa	Part XIV Supplemental Information						

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, 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.

Schedule D (Form 990) 2011 Gratiot County Fair for Youth
Part XIV Supplemental Information (continued)

38-6109129

Page 5

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Internal Revenue Service

Gratiot County Fair for Youth

Employer identification number 38-6109129

Form 990, Part III, Line 4d - All Other Accomplishment PROVIDE AN ANNUAL LOCAL FAIR FOR THE YOUTH OF THE COUNTY TO PROMOTE EDUCATION IN AREAS SUCH AS RAISING LIVESTOCK, HOME EC., GARDENING, FARM SAFETY, ETC.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 Reviewed by Fair Director and various members of the board.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Board Review of Policies as needed.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Board reviews and approves all wage adjustments.

Form 990, Part VI, Line 15b - Compensation Process for Officers N/A

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are made available to the public upon written request.

Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service

(99)

► See separate instructions.

► Attach to your tax return.

179

Name(ying number - 6109129			
	Gratiot	County Fa	ir for Yo	outh_				<u> </u>	610	9129	
	ss or activity to which this form relates										
	<u>ndirect Depreciati</u>			.: 4=0							
Pa	rt! Election To Expens						- D-41				
	Note: If you have ar		, complete Part	t v before	you cor	mpiet	е Рап і.		1.1	F00 000	
1	Maximum amount (see instructions)								1	500,000	
2	Total cost of section 179 property p		•	-1					3	2,000,000	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)						4	2,000,000			
4	Reduction in limitation. Subtract line			wind films name	aratalı aaa		tions		5		
5	Dollar limitation for tax year Subtract line		less, enter -0- il man		arately, see			lected cost	13		
6	(a) Description	t of property		(b) Cost (bus	11033 030 011	"	(0)	100.00 0031			
						\dashv			\dashv		
	Listed assessed. Enter the amount for	rom line 20			——Т	7					
7 8	Listed property Enter the amount frozal elected cost of section 179 pro		in column (c) lines	6 and 7	ι				8		
9	Tentative deduction. Enter the sma	• •	• • •	o and r					9		
10	Carryover of disallowed deduction f								10	· · · · · · · · · · · · · · · · · · ·	
11	Business income limitation Enter th	•		than zero) r	or line 5 (ea	aa inet	nuctions)		11		
12	Section 179 expense deduction Ad		•	-	-	ee ii ist	i delions)		12		
13	Carryover of disallowed deduction t	•			` ▶ [13		·	''-		
	: Do not use Part II or Part III below										
	rt II Special Depreciation			eciation	(Do not	inclu	ide liste	proper	tv.) (S	See instructions)	
14	···········							<u> </u>			
• •	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)							14			
15	Property subject to section 168(f)(1) election							15			
16	Other depreciation (including ACRS	•							16	54,617	
	rt III MACRS Depreciati		de listed prope	rty.) (See	e instruct	tions.)				
				ion A							
17	MACRS deductions for assets place	ed in service in tax ye	ears beginning befo	ore 2011					17	0	
18	If you are electing to group any assets placed										
	Section B—/	Assets Placed in Se	ervice During 201	1 Tax Year	r Using th	e Gen	eral Depr	eciation	System	1	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investment only-see instruct	ituse '`	d) Recovery period	(e) C	onvention	(f) Meth	od	(g) Depreciation deduction	
19a	3-year property									<u> </u>	
b	5-year property										
c	7-year property									·	
d	10-year property										
е	15-year property	1									
<u>f</u>	20-year property										
_ 9	25-year property				25 yrs.			S/L		- · · · · · · · · · · · · · · · · · · ·	
h	Residential rental				27 5 yrs		MM	S/L			
	property				27 5 yrs		ММ	S/L			
i	Nonresidential real		<u> </u>		39 yrs		ММ	S/L			
	property	L	<u> </u>				MM	S/L			
		ssets Placed in Ser	vice During 2011	Tax Year	Using the	Alteri	native De _l		ı	em	
<u>20a</u>		<u> </u>				-		S/L			
	12-year				12 yrs.			S/L			
	40-year				40 yrs		MM	S/L	.]		
	art IV Summary (See ins							.	1		
21	Listed property Enter amount from		40				h = ==		21		
22	Total. Add amounts from line 12, li	-				⊏nter	nere			EA 617	
	and on the appropriate lines of your return. Partnerships and S corporations—see instructions							22	54,617		
23	For assets shown above and place		e current year, ente	er tne		22					
	portion of the basis attributable to section 263A costs 23								4500		