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				Short Form	_	_				OMB No 1545-1150
Fo		0-EZ		Return of Organization Exempt I Under section 501(c), 527, or 4947(a)(1) of the (except black lung benefit trust or priva	Inte ate fe	rnal Rev oundatio	/enue Code on)			2008
De	partment o	of the Treasury		 Sponsonng organizations of donor advised funds and controlling 512(b)(13) must file Form 990. All other organizations with gross recassets less than \$2,500,000 at the end of the year The organization may have to use a copy of this return to satisfy the organization of the set of th	ng org ceipts r may atisfy :	anization less that use this f state repo	s as defined in so n \$1,000,000 and form orting requiremen	ectior 1 tota ts	ו ו	Open to Public Inspection
Ā	For the	2008 calend	ar year	, or tax year beginning $7/01/08$, and ending 6	6/3	30/09)			
B	Check if	applicable	Please	C Name of organization				D	Emplo	yer identification number
	Address	change	use IRS label or	Haywood County Agriculture &						
	Name c	hange	print or	Activities Center Association					-	1944716
	Initial re	turn	type. See	Number and street (or P O box, if mail is not delivered to street ad	ddres	s)	Room/suite	Е		hone number
	Termina		Specific	P.O. Box 308						-452-6758
	Amende		Instruc-	City or town, state or country, and ZIP + 4 Waynesville NC 28786				F		Exemption
			tions.		tach		C Assessed		Numb	X Cash Accrual
	• Sec	tion 501(c)(3)	-	izations and 4947(a)(1) nonexempt charitable trusts must att mpleted Schedule A (Form 990 or 990-EZ).	taçn		G Accountin Other (specify)		anou [
-	Websit	te: N/					H Check	Ť	If the o	rganization is not
J		zation type (c		ly one)— X 501(c) (3) ◀ (insert no) 4947(a)(1) or	T)	527		o atta r 990	ch Sche	dule B (Form 990,
ĸ	Check			ization is not a section 509(a)(3) supporting organization and its	s gro					
	is not r	_	-	anization chooses to file a return, be sure to file a complete retu	-		•	•	_	
L	Add line	s 5b, 6b, and 7b), to line 9	9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead	d of F	orm 990-l	EZ		▶ \$	<u> </u>
	Part I	Reven	ue, Ex	xpenses, and Changes in Net Assets or Fund Ba	alan	ces (S	See the inst	ruct	ions f	
2010	1	Contributions,	gifts, gra	ints, and similar amounts received				Ļ	1	63,318
	2	Program ser	vice rev	venue including government fees and contracts				Ļ	2	114,841
7	3	Membership	dues a	nd assessments				Ļ	3	
0	4	Investment u						-		591
JUL	5a		nount from sale of assets other than inventory 5a							
	b Less cost or other basis and sales expenses 5b									
SCANNED	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch)								<u>5c</u>	
N N	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here									
ANNEI	a		•	including \$ of contributions	e					
సె		reported on I	•		<u>6а</u> 6b					
S	b c		•) from special events and activities (Subtract line 6b from line 6a					6c	
	7a				a) 7a			ŀ		
	b h				7b					
	c c	Gross profit	of (loss	from sales of inventory (Subtract line 7b from line 7a)	ليتتنا				7c	
	8	Other revenu	le (desc) [8	
	9	Total revenu	ie Add	MABY 1. P. 8 42 52 (Bc, 14/2nd 8					9	178,750
	10	Grants and s	similar (a	mounts paid (attach schedule)					10	
	11	Benefits paid	l to or fo	oceden, ut					11	
ų	12	Salaries, oth	er comp	pensation, and employee benefits				L	12	
	13	Professional	fees ar	nd other payments to independent contractors				ŀ	13	6,090
Fynancas	14			lities, and maintenance				ļ	14	64,373
u	15			s, postage, and shipping					15	
	16			scribe ▶ <u>See Statement 1</u>)	16	145,560
	17	-		d lines 10 through 16					17	216,023
Net Accete	18		-	or the year (Subtract line 17 from line 9)				\cdot	18	1,324,758
A c	19			nces at beginning of year (from line 27, column (A)) (must agree with end-of-ye	ear tigi	ire reported	I on phor years retur	ⁿ⁾	<u>19</u> 20	1, 324, 730
a N	20	-		et assets or fund balances (attach explanation) balances at end of year Combine lines 18 through 20			1	⊾ ŀ	20	1,287,485
	Part II			cets. If Total assets on line 25, column (B) are \$2,500,000 or m	nore	file For	m 990 instead	ofF		
		Dalant		e the instructions for Part II)			Beginning of year		T	(B) End of year
22	Cash. s	savings, and ii		·	ľ	. ,	111,72		22	64,605
		nd buildings			ľ]	L,604,13		23	1,587,832
24		issets (descrit	be 🕨		_)[24	
25						1	1,715,86	51	25	1,652,437
26	Total li	abilities (des	cribe 🕨	See Statement 2	_)[391,10)3		364,952
<u>27</u>	Net as	sets or fund b	balance	s (line 27 of column (B) must agree with line 21)	[]	L,324,75	58	27	1,287,485
Fo	r Privacy	y Act and Pap	berwork	Reduction Act Notice, see the Instructions for Form 990.						Form 990-EZ (2008)
DA	А									r 4 .

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Form 990-EZ (2008) Haywood County Agriculture &		5-1944716			Page 2
Part III Statement of Program Service Accomplishments (S	See the instruc	tions for Part I	<u> .)</u>		penses
What is the organization's primary exempt purpose?				-	d for 501(c)(3)
County Fair and Community Activities					organizations
Describe what was achieved in carrying out the organization's exempt purposes. In a describe the services provided, the number of persons benefited, or other relevant in					7(a)(1) trusts, for others)
28 To operate and promote an exhibition to encourage and		<u> </u>			
<pre>improve agriculture, home economics, manufacturing,</pre>					
education and vocational arts.					
(Grants \$) If this amount includes foreign grants, ch	eck <u>here</u>	>	2	8a	<u>175,755</u>
29					
(Grants \$) If this amount includes foreign grants, ch	ock here	•		9a	
30	eck liele			30	
			_	1	
(Grants \$) If this amount includes foreign grants, ch	eck here		3	0a	
31 Other program services (attach schedule)			<u>ا</u> م		
(Grants \$) If this amount includes foreign grants, ch	eck here	▶		<u>1a</u> 2	175,755
<u>32 Total program service expenses (add lines 28a through 31a)</u> Part IV List of Officers, Directors, Trustees, and Key Employees. List each		compensated (Sec			
	(b) Title and average	(c) Compensation	(d) 🗘	ntributions to	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0)		benefit plans & compensation	account and other allowances
See Attached	Directors				
		0		0	0
					<u> </u>
		- <u></u> -			
					· · · - · · · · · · · · · · · · · · · ·
					· · · ·
			L		

Form 990-EZ (2008)

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	<u>990-EZ (2008) Haywood County Agriculture & 56-1944716</u> TV Other Information (Note the statement requirements in the instructions for Part VI.)		•	Page 3
	At V Other Information (Note the statement requirements in the instructions for Part VI.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed		1.00	1-110
	description of each activity	33	1	X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes,"			
•••	attach a conformed copy of the changes	34		X
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 your reason for not reporting the income on Form 990-T			
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting,			
	and proxy tax requirements?	35a		X
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes,"			[
	complete applicable parts of Schedule N	36		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instr			
b	Did the organization file Form 1120-POL for this year?	37ь		X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	1	X
ь	If "Yes," complete Schedule L, Part II and enter the total amount involved [38b]		1	
39	Section 501(c)(7) organizations Enter	1		
a	Initiation fees and capital contributions included on line 9 39a			
b	Gross receipts, included on line 9, for public use of club facilities 39b	1		
	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
	section 4911 ▶, section 4912 ▶, section 4955 ▶		1	
ь	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction		1	ĺ
-	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule			
	L, Part I	40b		X
с	Enter amount of tax imposed on organization managers or disqualified persons during			
	the year under sections 4912, 4955, and 4958			
d	Enter amount of tax on line 40c reimbursed by the organization	-		
e	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	1	X
41	List the states with which a copy of this return is filed None			
	The books are in care of ▶ Glenn White Telephone no ▶ 82	8-45	2 - 6	758
	PO Box 308			
		3786		
Ь	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		Yes	No
	account)?	42b		X
	If "Yes," enter the name of the foreign country:			1
	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 ?	42c	1	X
Ŭ	If "Yes," enter the name of the foreign country	<u> </u>	·	<u> </u>
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here	-		▶□
43	and enter the amount of tax-exempt interest received or accrued during the tax year 43			
			Yes	No
A A	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	[1.03	1
44	Form 990-EZ	44	1	X
			!	<u>†</u>
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If		1	1

Form **990-EZ** (2008)

56-1944716 Haywood County Agriculture & Form 990-EZ (2008) Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 Part VI and complete the tables for lines 50 and 51. No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to Yes 46 Х candidates for public office? If "Yes," complete Schedule C, Part I 46 47 Х 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Х 48 49a Did the organization make any transfers to an exempt non-charitable related organization? 49a 49b

If "Yes," was the related organization(s) a section 527 organization? b

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization If there is none, enter "None"

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$100.000	1	•	••••••	•

Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of 51 compensation from the organization. If there is none, enter "None "

(;	a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None			
		······	
Total numb	per of other independent contractors each receiving over \$100,000		
	Under penalties of perjury, I declare that I have examined this return, incluand belief, it is true, correct, and complete Declaration of preparer (other		
Sign	1 Sthe States		

Sign Here	Signature of officer Glenn Wh Type or printing a	
Paid		A. Bungarner
Preparer's Use Only	Firm's name (or yours if self-employed),	Ray, Bumgarner, Kir 385 N Haywood St St
May the IRS of	address, and ZIP + 4	Waynesville, NC 28

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SCHEDULE A (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	To be com	ublic Charity Status pleted by all section 501(c)(3) nonexempt char ch to Form 990 or Form 990-E	OMB No 1545-0047 2008 Open to Public Inspection						
Name of the organization	Haywood Coun	ty Agriculture							over identification number
Bart F Booo		enter Associati Status (All organizations		omplet	o this	nart) (-1944716
						<u>part.) (</u>	000 11	1011 40	
1 A church, cor 2 A school desc 3 A hospital or 4 A medical resc 5 An organization section 170(l 6 A federal, sta 7 A federal, sta 7 A community 9 X An organization receipts from support from acquired by the acquired	vention of churches, or ass cribed in section 170(b)(1)(a cooperative hospital servic earch organization operated on operated for the benefit of b)(1)(A)(iv). (Complete Part te, or local government or g on that normally receives a section 170(b)(1)(A)(vi). (Co trust described in section 1 on that normally receives (1 activities related to its exer- gross investment income ar he organization after June 3 on organized and operated on on organized and operated on no organized and operated on ne or more publicly support	ce organization described in sec d in conjunction with a hospital of of a college or university owned II) overnmental unit described in s substantial part of its support fro	In section ction 170 described or operate ection 17 om a gove II) port from a exception accome (less (Comple ety See s perform the ection 505	a 170(b)(1 (b)(1)(A)(i in sectio ed by a go 0(b)(1)(A) ernmental contributions, and (2 ss section te Part III ection 50 the functio 0(a)(1) or	iii). (Atta n 170(b) overnme)(v). unit or f ions, me 2) no mo i 511 tax))9(a)(4). ns of, or section)(1)(A)(ii ental uni from the embersh ire than c) from b (see ins to carry 509(a)(2	ii). Ente t descrif genera ip fees, 33 1/3 9 ousiness struction 2 See 5	r the ho bed in I public and gro % of its ses	DSS
persons other 509(a)(1) or s f If the organization,	his box, I certify that the org than foundation managers ection 509(a)(2) ation received a written dete check this box	c Type III–Function anization is not controlled direct and other than one or more put rmination from the IRS that it is	tly or indir blicly supp a Type I,	ectly by o oorted org Type II, o	anizatio or Type I	ore disq	ribed in		
following pers (i) A person and (iii) b (ii) A family (iii) A 35% cd	sons? who directly or indirectly co elow, the governing body o member of a person descrit ontrolled entity of a person o	tion accepted any gift or contrib ontrols, either alone or together f the supported organization? bed in (i) above? described in (i) or (ii) above? he organizations the organization	with perso	ons descr		II)			Yes No 11g(i)
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	governing	sted in your document?	the organ col (i) supp	port?	organizat (i) organi U	s the ion in col zed in the S ?	(vii) Amount of support
			Yes	No	Yes	No	Yes	No	<u> </u>
Total									

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

Schedule A (Form 990 or 990-EZ) 2008

Schedule A (Form 990 or 990-EZ) 2008	Haywood	County	Agriculture &	
Schedule & (Form 330 of 330-EZ) 2000	maywoou	COULLY	Aditonicate a	

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Page 2

Pa	Int II Support Schedule for O (Complete only if you ch)(1)(A)(iv) and	170(b)(1)(A)(vi)	
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(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	Total. Add lines 1-3					<u>. </u>	
5	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				,		
Sec	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
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			<u> </u>	E		
12	Gross receipts from related activities, etc.	(see instructions)				12	
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax yea	ar as a section 50°	1(c)(3)	
	organization, check this box and stop her						>
<u>Sec</u>	tion C. Computation of Public S	upport Percen	itage				
14	Public support percentage for 2008 (line 6	6, column (f) dıvıde	d by line 11, colum	nn (f))		14	
15	Public support percentage from 2007 Sch	edule A, Part IV-A	, line 26f			15	
16a	33 1/3 % support test-2008. If the organ	nization did not che	eck the box on line	13, and line 14 is	33 1/3 % or more,	check this box	
	and stop here. The organization qualifies	as a publicly supp	orted organization				►
b	33 1/3 % support test-2007. If the organ	nization did not che	eck a box on line 1	3 or 16a, and line	15 is 33 1/3 % or r	nore, check this	
	box and stop here. The organization qual	ifies as a publicly	supported organiza	ation			►
17a	10%-facts-and-circumstances test-200	8. If the organizat	ion did not check a	box on line 13, 16	ia, or 16b, and line	e 14 is 10% or	
	more, and if the organization meets the "f	acts-and-circumsta	ances" test, check	this box and stop	here. Explain in P	art IV how the	
	organization meets the "facts-and-circums	stances" test The	organization qualif	ies as a publicly su	upported organizat	tion	►
b	10%-facts-and-circumstances test—200	7. If the organizat	ion did not check a	box on line 13, 16	6a, 16b, or 17a, an	id line 15 is 10% or	
	more, and if the organization meets the "f	acts-and-circumst	ances" test, check	this box and stop	here. Explain in P	art IV how the	
	organization meets the "facts-and-circums	stances" test. The	organization qualif	ies as a publicly su	upported organizat	tion	►
18	Private foundation. If the organization dis	not check a box	on line 13, 16a, 16	b. 17a. or 17b. che	ck this box and se	ee instructions	

Schedule A (Form 990 or 990-EZ) 2008

DAA

Schedule A (Form 990 or 990-EZ) 2008 Haywood County Agriculture &

Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support

_	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
1	Gifts, grants, contributions, and membership fees received (Do not include									
	any "unusual grants")	289,182	162,960	109,974	125,000	63, 318	750,434			
2	Gross receipts from admissions, merchandise									
-	sold or services performed, or facilities									
	furnished in any activity that is related to the	32,605	47,756	80,760	57,712	114,841	333,674			
	organization's tax-exempt purpose				31/12	111,011				
3	Gross receipts from activities that are not an unrelated trade or business under section 513									
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									
6	Total. Add lines 1-5	321,787	210,716	190,734	182,712	178,159	1,084,108			
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons									
-	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b									
8	Public support (Subtract line 7c from	321,787	210,716	190,734	182,712	178,159	·····			
Ŭ	line 6)		210/110				1,084,108			
Sec	tion B. Total Support	L								
	endar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total			
9	Amounts from line 6	321,787	210,716	190,734	182,712	178,159	1,084,108			
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,712	3,238	43	373	591	5,957			
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975									
с	Add lines 10a and 10b	1,712	3,238	43	373	591	5,957			
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,	323, 499	213,954	190,777	183,085	178,750				
	and 12)						1,090,065			
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	second, third, four	th, or fifth tax year	r as a section 501(c)(3)				
Sec	tion C. Computation of Public Su		age							
15	Public support percentage for 2008 (line 8,			(f))		15	99.4535 %			
16	Public support percentage from 2007 Sche			.,,		16	99.1644 %			
	tion D. Computation of Investme									
17										
18	Investment income percentage from 2007					18	0.8356 %			
19a	33 1/3 % support tests—2008. If the orga			14, and line 15 is	more than 33 1/3 %	6, and line				
							► X			
b										
b	33 1/3 % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and									
D	33 1/3 % support tests—2007. If the orga line 18 is not more than 33 1/3 %, check th						▶□			

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Schedule A (Form 990 or 990-EZ) 2008	Haywood County Agriculture &	56-1944716 Page 4
	rmation. Complete this part to provide the explan	ation required by Part II, line 10;
Part II, line 17a or 1	7b; or Part III, line 12. Provide any other addition	al information. (see instructions)

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	4562			epreciation							<u>3 No 1545-0172</u> 2008
Depar Intern	tment of the Treasury al Revenue Service		•	eparate instructio							chment uence No 67
Name			l County Ag	gricultur	e &	Attach to yo	ur tax roturn.			number	
			ies Center	<u>r Associa</u>	tion			56-	194	4716	
	ess or activity to which this		·								
	ndirect Depi		se Certain Prop	orty Under S	action	470					
ма			any listed proper				i complete P	art I			
1	Maximum amount Se								1	· · · · ·	250,000
2	Total cost of section 1		-						2	· · · ·	
3	Threshold cost of sect		•		e instruct	ions)			3		800,000
4	Reduction in limitation	Subtract III	ne 3 from line 2 If ze	ero or less, enter -	0-				4	ļ	
_5	Dollar limitation for tax yea	ar. Subtract lin	e 4 from line 1. If zero c	or less, enter -0- If m	T				5	ļ	
		(a) Description	n of property		(b) Cost	t (business use	only) (c) E	lected cos	t	4	
6					<u> </u>					-	
	· · · · · - ·		<u></u>							-	
7	Listed property Enter			to in column (c) li		d 7	7	· · ·	8		
8	Total elected cost of s	•			ines o an	a /			9	•	
9	Tentative deduction E								10		
10 11	Carryover of disallowe Business income limit		•		ee than -	rero) or line i	5 (see instruction	ne)	11		
12	Section 179 expense			•		•		13)	12	· · · · · ·	
12	Carryover of disallowe						13				
	: Do not use Part II or F										
			on Allowance a			on (Do no	t include list	ed prop	ertv.)) (See in	structions.)
14	Special depreciation a										
••	during the tax year (se			· · · · · · · · · · · · · · · · · · ·					14		
15	Property subject to se								15		
16	Other depreciation (in		•						16		48,932
			ion (Do not incl	ude listed prop	perty.)	(See instr	uctions.)				
					tion A						
17	MACRS deductions for	r assets pla	ced in service in tax	years beginning b	efore 20	08		_	17		0
18	If you are electing to grou										
	S	ection B—/	Assets Placed in Se					ciation S	ystem		
	(a) Classification of pro	operty	(b) Month and year placed in service	(c) Basis for dep (business/investri only-see instru	nentuse	(d) Recovery period	(e) Convention	(f) Me	ethod	(g) Depr	eciation deduction
<u>19a</u>	3-year property	_									
b	5-year property										
C	7-year property										
d	10-year property				-						
0	and the second second										
f_	20-year property	<u>-</u>									
<u> </u>	25-year property		<u></u>			25 yrs		S/L			
h						27 5 yrs	MM	S/L			
	property					27 5 yrs	MM	S/L			
i	Nonresidential real property					39 yrs	MM	S/L			
		ation C Ac	sets Placed in Serv	ico During 2008 [°]	Tax Yoa	L	MM Mtornative Depr	S/L		L	
		ction C—As	Sets Flaced in Serv	The During 2008							. .
<u>20a</u>						12 100		<u>S/L</u> S/L			<u> </u>
_	12-year		[<u> </u>		12 yrs		5/I S/I		<u> </u>	
	40-year Int IV Summary	(See inc	tructions.)	l <u> </u>		40 yrs	MM	3/1		1	
<u>- r e</u> 21	Listed property Enter								21		
21	Total. Add amounts fr			lines 19 and 20 in	column	(n) and line	21		- - '		
"	Enter here and on the	-	•						22		48,932
23	For assets shown abo		-		2 30(p0)					1	
23	enter the portion of the						23				
For F	Paperwork Reduction					· · · · · · · · · · · · · · · · · · ·					orm 4562 (2008
DAA		,			Г	here a	ire no an	nount	s f		

5469 11/16/2009	8 03 AM						1	FALE	> 9
Form 88	368	Applic			ion of Time Tiation Retur		:	11-16 8:07 A MAS	1 OMB No 1545-1709
Department of t Internal Revenu			► File	e a separate app	lication for each ret	urn.			
If you are	filing for an Au	utomatic 3-Month Extension							► X
•	+	Iditional (Not Automatic) 3-I ess you have already been g		•		-	-	20	
Part I		c 3-Month Extension						<u> </u>	
A corporation Part I only	required to file	Form 990-T and requesting	an auto	matic 6-month ex	tension—check this	box and comple	ete		►□
	orations (includ come tax return	ding 1120-C filers), partnershi is	ips, REN	MCs, and trusts n	nust use Form 7004	to request an e	xtension	of	
		enerally, you can electronical	-	•				file	
		ow (6 months for a corporatio	•		, .,				
		the additional (not automatic onsolidated Form 990-T Inste					· · · ·	· · · · ·	
	-	e electronic filing of this form	•		• •	• • •	• •		
Type or		empt Organization	_	·			Employ	yer identii	fication number
print		od County Agric ties Center As					56-1	9447	16
File by the due date for		eet, and room or suite no If a			ns				10
filing your return See		308 <u>308</u>							
instructions	City, town or Waynes	r post office, state, and ZIP c いいしつ		r a foreign addres 28786	s, see instructions				
Check type o		filed (file a separate applicati							
Form 9	90			Form 990-T (co					Form 4720
Form 9				7	ec 401(a) or 408(a) 1				Form 5227
X Form 99				Form 990-1 (tru Form 1041-A	ust other than above)			Form 6069 Form 8870
				J 1 0111 1041-X				· L] '	0111 8870
The book	s are in the car	reof► Glenn Whi	te						
		0 450 6750							
-		8 - 452 - 6758	f husino	FAX No 🕨		,			►□
-		not have an office or place of urn, enter the organization's f				κ.	. If this is		
	group, check th		-	rt of the group, ch		▶ and	attach		
a list with the	names and Ell	Ns of all members the extens	ion will o	cover					
		: 3-month (6 months for a cor	-		-				
	Z/IJ/IU organization's re	, to file the exempt organiz eturn for	ation ret	turn for the organi	ization named above	The extension	IS		
	calendar year	or							
► X	tax year begin	ning $7/01/08$, and	ending	6/30/09					
2 If this ta	x year is for les	ss than 12 months, check rea	ason (Initial return	Final return	Change	in accour	nting perio	d
	· · · · · ·	Form 990-BL, 990-PF, 990-	T, 4720,	or 6069, enter th	e tentative tax,				
		e credits See instructions Form 990-PF or 990-T, ente	r anv re	fundable credits :	and estimated tax		<u>3a</u>	<u> </u>	
-	-	de any prior year overpayme	-		and estimated tax		36	\$	
		t line 3b from line 3a Include			orm, or, if required,				
-	•	on or, if required, by using E	FTPS (E	Electronic Federal	Tax Payment				
	See instruction	ons make an electronic fund with	drawalw	with this Form 899	38 see Form 9452 5	O and Form 99	<u>3c</u>	\$	
for payment in					JU, SEE I UIII 0433-E		, 3-CV		

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

5469 02/13/2010 2 25 PM

Form 8868 (F	ev 4-2009)		Page 2
	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box		► X
•	mplete Part II if you have already been granted an automatic 3-month extension on a previously filed Form	8868	
• If you are	filing for an Automatic 3-Month Extension, complete only Part I (on page 1)		
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copie	s needed).
Type or	Name of Exempt Organization E	mploye	er identification number
print	Haywood County Agriculture &		
File by the	Activities Center Association 5	6-1	944716
extended	Number, street, and room or suite no If a P O box, see instructions	or IRS	use only
due date for filing the	P.O. Box 308		
return See	City, town or post office, state, and ZIP code For a foreign address, see instructions		
Instructions	Waynesville NC 28786		
Check type o	f return to be filed (File a separate application for each return)		
Form 9	90 Form 990-PF Form 1041-A		Form 6069
Form 9	90-BL Form 990-T (sec 401(a) or 408(a) trust) Form 4720		Form 8870
X Form 9	90-EZ Form 990-T (trust other than above) Form 5227		
STOP! Do no	t complete Part II if you were not already granted an automatic 3-month extension on a previously filed	Form	8868.
The book	s are in the care of ▶ Glenn White		
Telephon	e No ▶ 828-452-6758 FAX No ▶	En	
•	anization does not have an office or place of business in the United States, check this box		
	or a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this i	S	
		attach	а
	ames and EINs of all members the extension is for		
	st an additional 3-month extension of time until $5/15/10$		
•	endar year , or other tax year beginning $7/01/08$, and ending $6/30/09$		
	ix year is for less than 12 months, check reason: Initial return I Final return Change in a	iccount	una period
	detail why you need the extension		ing period
	Statement 1		
000			
8a lfthis a	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
	y nonrefundable credits See instructions	8a	\$
	pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and	oa	<u></u>
	ed tax payments made Include any prior year overpayment allowed as a credit and any		¢
	paid previously with Form 8868.	<u>8b</u>	\$
	Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit		•
	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$
	of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my	/ knowle	dge and belief,
	, and complete, and that I am authorized to prepare this form		
Signature 🕨	Tute > Cert. Public Accou	inta	
			Form 8868 (Rev 4-2009)

FYE: 6/30/2009

Statement 1 - Form 8868, Part II, Line 7 - Explanation for Extension

Description

The books and records are not fully compiled as of the first extended due date. Additional time is needed to complete the bookkeeping in order to file a complete and accurate return.



HAYWOOD COUNTY AGRICUL/TURE AND ACTIVITIES CENTER ASSOCIATION, INC. PO Box 308 Waynesville, NC 28786 www.haywoodcountyfairgrounds.org

2009

Tax ID No. <u>56-1944716</u>

John Best 149 Ray Best Road Clyde, NC 28721

David Cotton County Manager 215 N Main Street Waynesville, NC 28786

Jim Francis P.O. Box 117 Lake Junaluska, NC 28745

Tom Knapko 115 Wayah Zooshuga Road Maggie Valley, NC 28751

Katy McLean-Secretary 100 McLean Lane Waynesville, NC 28786

Dorothy Morrow-Vice President 517 Rabbit Skin Road Waynesville, NC 28786

Kathy Palmer c/o Palmer's Perms & Color 379 Walnut Street Waynesville, NC 28786

Nick Reynolds Extension Office

Sam Smith Administrative Assistant Charles Boyd 557 Hemphill Road Waynesville, NC 28786

Kevin Ensley HC. Board of Commissioners 428 Dellwood Road Waynesville, NC 28786

Wade Francis 1049 Francis Farm Road Waynesville, NC 28786

Bob Massie 60 Timbergrove Lane Waynesville, NC 28786

Jane Mehaffey 94 Indian Springs Road Clyde, NC 28721

Will Morrow Mountain Research Station 265 Test Farm Road Waynesville, NC 28786

Kaleb Rathbone Mountain Research Station 265 Test Farm Road Waynesville, NC 28786

W. Skipper Russell 133 Berea Court Waynesville, NC 28786

Donald Smart 1440 Crabtree Road Waynesville, NC 28785 Jim Cochran-President P.O. Box 362 Hazelwood, NC 28738

Marlene Ferguson 191 Ferguson Cove Loop Clyde, NC 28721

Aleasa Glance 1286 Bald Creek Road Clyde, NC 28721

Marlyn McFalls 322 Reed Cove Road Waynesville, NC 28786

Richard Messer 73 Lisa Road Waynesville, NC 28785

Ted Norman P.O. Box 504 Hazelwood, NC 28738

Teresa Raulerson 15274 Cruso Road Canton, NC 28716

Bill Skelton Extension Office

Glenn White-Treasurer 317 Big Stomp Road Waynesville, NC 28786

_ ____ _

5469 Haywood County Agriculture	
56-1944716	Fede
FYE: 6/30/2009	

Federal Statements

Statement 1 - Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
Expenses	\$
Interest	21,257
Advertising	5,158
Cleaning	5,882
Insurance	10,933
Miscellaneous	1,264
Repairs & Maintenance	13,482
Contract Labor	18,350
Fair, Concessions, etc.	35,540
Concert	25,163
Dues & Subscriptions	100
Postage & Delivery	796
Fundraising	7,635
Total	\$ 145,560

Statement 2 - Form 990-EZ, Part II, Line 26 - Total Liabilities							
Description		Beginning of Year					
Deferred Repair Loans Payable	\$ \$	7,850 383,253	\$	364,952			
-	-	391,103	_	364,952			

5469 Haywood County Agriculture & 56 1944716 Federal Asset Report FYE: 6/30/2009

Form 990, Page 1

<u>Asset</u>	Description	Date In Service	Cost	Bus _%	Sec <u>179</u> Bonus	Basis for Depr	<u>Per</u>	Conv Meth	Prior	Current
<u>Other</u>	Depreciation:									
1	Gas Heaters	7/01/94	3,037					MO S/L	3,037	0
4	Tables & Chairs	7/17/95	1,175			1,175		MO S/L	1,175	0
5	Chairs 64 tables	9/19/95 9/19/95	1,625 6,487			1,625		MO S/L MO S/L	1,625 6,487	0
8	1 Heater	12/05/96	624			624		MO S/L MO S/L	602	22
9	l sign	9/17/97	1,887			1,887		MO S/L	1,690	157
10	1 Building	7/01/94	20,942					MO S/L	6,806	524
	1 Staining barn	7/01/94	900			900		MO S/L	630 379	45
12	Ramp for handicapped 1 Wash rack	11/01/95 4/04/96	1,197 2,100			1,197		MO S/L MO S/L	643	30 52
14	1 Livestock Barn & Shed	9/12/97	8,950			8,950		MO S/L	2,424	224
15	1 Dance Floor Addition	10/01/97	811			811		MO S/L	218	20
16	1 Gravel road	7/01/94	1,139			1,139		MO S/L	797	57
17 18	1 Landscaping 1 Fairground improvements	7/01/94 7/01/94	1,210 1,910			1,210		MO S/L MO S/L	847 1,337	61 96
19	1 Gravel road	11/15/95	1,686					MO S/L	1,068	84
20	1 Fence	4/04/96	1,741			1,741	20	MO S/L	1,067	87
21	1 Landscaping	6/20/98	2,673			2,673		MO S/L	1,337	133
22 23	Land Improvements Bleachers	10/26/98 7/27/98	8,062 7,055			,	-	MO S/L MO S/L	1,948 6,996	202 59
25	Sound Equipment	9/10/99	7,055			1,466		MO S/L MO S/L	0,990 1,295	59 147
26	Tables-Adırondack	9/17/99	7,881					MO S/L	5,747	657
27	Arena Project	12/03/99	42,000			42,000		MO S/L	9,013	1,050
28	High Chairs	9/21/99	374			374		MO S/L	327	37
32	Ice Maker (Haywood Applicance) Stove (Haywood Applicance)	7/18/00 9/22/00	2,171 336			2,171 336	10	MO S/L MO S/L	1,719 260	217 34
33	Freezer (Lowes)	9/22/00	247			247		MO S/L	191	25
34	New Computer w/networking	1/23/01	1,217			1,217	10	MO S/L	903	121
35	Grading	5/16/01	4,961			4,961			1,757	248
36 37	Hydroseeding New Building	4/17/01 3/15/01	900 41,902			900 41,902		MO S/L MO S/L	323 7,682	45
38	Show Ring Arena	6/26/01	37,860			37,860		MO S/L MO S/L	6,625	1,048 947
39	Grading	10/01/01	8,032			8,032		MO S/L	2,711	401
40	Gutters for Old Barn	7/12/01	2,293			2,293		MO S/L	803	114
41 42	Arena Naw Exhibit Building	11/07/01	9,933			9,933 134,932		MO S/L	1,655	249
44	New Exhibit Building Building #2	9/24/01 11/01/02	134,932 46,178			46,178		MO S/L MO S/L	22,770 6,542	3,373 1,154
45	Storm Drain	2/19/03	8,278			8,278		MO S/L	2,207	414
46	Paving - Building #2	12/18/02	6,550			6,550		MO S/L	1,801	328
47 48	Table Holder 50 Tables	5/04/03	752			752		MO S/L MO S/L	324	62
40 52	Software	4/30/03 10/01/03	3,500 1,495			3,500 1,495		MO S/L MO S/L	1,507 1,420	292 75
53	Cigarette Butt Container	3/30/05	550			550		MO S/L	179	55
54	Floor Scrubber	6/29/05	2,000			2,000	10	MO S/L	600	200
55	Gravel Roads	10/10/04	5,716			5,716		MO S/L	1,072	286
56 57	Retaining wall Bingo Machine	1/28/05 6/29/05	1,294 776			1,294 776		MO S/L MO S/L	221 233	65 77
	Lions Club Barn	7/22/04	40,000			40,000		MO S/L MO S/L	3,917	1,000
59	Multipurpose Arena	6/01/06	1,074,775			1,074,775	40	MO S/L	55,978	26,869
	Wiring Lions Club Barn Mabile Concession Stand	4/06/06	3,084					MO S/L	174	77
61 62	Mobile Concession Stand Chain Link Fence	9/01/06 10/09/07	8,174 23,628			8,174 23,628		MO S/L MO S/L	1,499 886	817 1,181
63	Refrigerator	6/01/07	23,028 400			400		MO S/L MO S/L	43	40
64	Side Walk (Bldg B)	7/01/06	600			600	20	MO S/L	60	30
65	Gravel Roads	9/01/06	3,176			3,176		MO S/L	582	318
66 67	Bleacher Seating (part of Arena) Retaining Wall	6/01/07 7/01/06	78,473 500					MO S/L MO S/L	2,125 50	1,962 25
68	Wash Pad & Tie-Downs	6/27/07	2,384					MO S/L MO S/L	119	119
69	Arena Additions	7/01/06	27,198			27,198	40	MO S/L	1,360	680
	Bleacher Seating	6/10/08	74,449			74,449	40	MO S/L	155	1,861
71 72	Arena Roof Bleachers	8/23/07 12/31/08	6,570			6,570	40	MO S/L	137	164
74	Barn Roof	12/02/08	13,072 3,500					MO S/L MO S/L	0 0	163 52
75	Signs	6/16/09	16,061			16,061		MO S/L	ŏ	0
	Total Other Depreciation	-	1,824,849		-	1,824,849			188,085	48,932
	•	-			-					<u>, </u>
	Total ACRS and Other Depre	ciation	1,824,849			1,824,849			188,085	48,932
	and contr Depic		-,,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-			.,			,	.0,702

5469 Haywood County Agriculture	&	05/07/2010	10:33 AM
56-1944716	Federal Asset Report		
FYE: 6/30/2009	Form 990, Page 1		

<u>Asset</u>	. Description	Date In Service Cost	Bus Sec Basis <u>%</u> 179Bonus for Depr PerConv M	leth Prior Current
	Grand Totals Less: Dispositions Less: Start-up/Org Expense	1,824,849 0 0	1,824,849 0 0	188,085 48,932 0 0 0 0
	Net Grand Totals	1,824,849	1,824,849	188,085 48,932