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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 2012 Open to Public Inspection

	For the	2012 c	alendar year, or tax year beginning $11/01/12$ , and ending $10/31/12$	13			
	Check if appl		C Name of organization	-	D Employ	yer identification	n number
	Address cha		RUTLAND COUNTY AGRICULTURAL SOCIETY				
		-	Doing Business As		l 03-	-015433	0
	Name chang	ge	Number and street (or P O box if mail is not delivered to street address)	Room/suite		one number	
	Initial return		175 SOUTH MAIN ST		802	2-747-8	921
	Terminated		City, town or post office, state, and ZIP code	<u> </u>			
-	A	4	RUTLAND VT 05701		G Gross rece	unto C	864,240
	Amended ret	eturri	F Name and address of principal officer	1	G GIUSS IECE		
-	Application p	pending	DONNA J STEARNS	H(a) Is this a g	roup return for a	affiliates?	Yes X No
			PO BOX 62	H(b) Are all af	filiates include	- d?	Yes No
			CENTER RUTLAND VT 05736	1		(see instructions	5)
	Tau ayama		501(c)(3) <b>X</b> 501(c) ( <b>5</b> ) <b>4</b> (insert no ) 4947(a)(1) or 527	$\dashv$			
<u>-</u>	Tax-exemp		7/A	H(c) Group ex	remotion numb	nor <b>b</b>	
				Year of formation	kempaon name	M State of legal	I domicile VT
_	Form of orga Part I		Immary	real of formation		W State of legal	Toomiciae 1 C
	7		scribe the organization's mission or most significant activities		<del></del>		
		-	MISSION AND PURPOSE OF THE SOCIETY IS TO FOSTER AN	INDERSTANI	OING OF	AND	
ခို			ROMOTE AGRICULTURAL ISSUES AND TO ADVOCATE FOR AGRI				
Governance		10 1	RONOTH AGRICULTURAL TOUGHT IND TO IDVOCATE FOR HOLD				
Ş.	2 0	hack the	s hav by	% of its nat asset	e e		
Ö	2 Ni	umboro	s box ▶ if the organization discontinued its operations or disposed of more than 250 of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b) inber of individuals employed in calendar year 2012 (Part V, line 2a) inber of volunteers (estimate if necessary) elated business revenue from Part VIII, column (C), line 12 and the property of t	, all him asset	ا 3 <b>ا</b>	11	
<b>න්</b> ග	4 N	umboro	of undergoders withing members of the governing body (Part VI. line 1h)	bu	4	<u> </u>	
Ę	5 To	umber c	share of individuals employed in colonder year 2012 (Part V. line 22)		5	160	
Activities	5 10	olai nun	there of individuals employed in calendar year 2012 (Part V, line 2a)	$^{4}$	6	30	
ĕ	6 10	otai num	nber of volunteers (estimate if necessary)	10°	7-		0
	/a 10	otal unre	elated business revenue from Part VIII, column (C), line 12	COVICE	7a		
	b Ne	et unrela	ated business taxable income from Form 990-T, line 34	Pnor Ye		Сигтег	nt Year
	9.00	ontributi	of independent voting members of the governing body (Part VI, line 1b) inber of individuals employed in calendar year 2012 (Part V, line 2a) inber of volunteers (estimate if necessary) elated business revenue from Part VIII, column (C), line 12 ated business taxable income from Form 990-T, line 34 ions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g) int income (Part VIII, column (A), lines 3, 4, and 7d)	742 , 11101 10	5,600	<u> </u>	17,800
			service revenue (Part VIII, line 2g)	84	9,781		345,934
Revenue	i i	•	nt income (Part VIII, column (A) lines 3. 4 and 7d)	<u> </u>	577	<u> </u>	506
æ	i i				<del>- 37.</del>		
	1		renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	86	5,958	5	364,240
<u> </u>			enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,330		0 10 17 10
3	1		nd similar amounts paid (Part IX, column (A), lines 1–3)				0
<b>₽</b>	1	•	paid to or for members (Part IX, column (A), line 4)	18	0,140		165,562
penses	15 Sa		other compensation, employee benefits (Part IX, column (A), lines 5–10)	10	0,140		0
e i	16a Pr		nal fundraising fees (Part IX, column (A), line 11e)  traising expenses (Part IX, column (D), line 25) ▶  0				
_ M			arailoning experience (if are the socialism (b), into 20, t	<u></u>	0 227	-	788,286
- u	" 0	•	penses (Part IX, column (A), lines 11a–11d, 11f–24e)		8,327 8,467		953,848
_	i i	•	enses Add lines 13–17 (must equal Part IX, column (A), line 25)				
<u> </u>	19 R∈	evenue	less expenses Subtract line 18 from line 12	Beginning of Cur	7,491		-89,608 of Year
Net Assets or	20 7	otal aca	ets (Part X, line 16)		7,684		384,789
-88-	20 TO		ets (Part X, line 16)		8,922		365,635
<u>چُر</u>	21 10				8,762		519,154
	Part II		ts or fund balances Subtract line 21 from line 20	3,00	0,702		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			gnature Block			dee and haliaf	
			perjury, I declare that I have examined this return, including accompanying schedules and statemen complete. Declaration of preparer (other than officer) is based on all information of which preparer has		i my knowie	uge and belier,	it is
	1	<u> </u>	D 10L		10	121120	7/4
e:	_	<u>-</u>	ignature of officer	<del></del>	Date	21100	<u> </u>
Sig	- 1		•	SURER			
пе	ere	7	DONNA J STEARNS TREAS  Type or print name and title	JUNER	<del>-</del>		
		<u> </u>	e preparer's name Preparer's signature_	Date	Chock	ıf PTIN	
Pa		•	1 Jaime		Check	"	1.46400
	naror F		G. VALENTE C CENADO CDAC DILC		/14 self-em		146409 380198
	e Only	Firm's na	<del></del>		Firm's EIN	04-3.	700130
ψS	· 1		92 GROVE STREET	1		902-7	75-2241
<del></del>		Firm's ad			Phone no		75-2341
_	<u> </u>		s this return with the preparer shown above? (see instructions)				Yes No
For DA/		rk Redu	ction Act Notice, see the separate instructions			F	orm <b>990</b> (2012)

905,201

4e Total program service expenses ▶

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,"			
	complete Schedule A	1_		<u> X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		<u>X</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	_	<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	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,	_ :		v
_	Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	•		X
-	"Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
9	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	,		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
•	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
-	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	44.		v
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	45		<b>.</b>
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		х
17	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		^
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		х
18		<del>- ''</del> -		-
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		<del>  **</del> -
	If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<del></del>
	The state of the s		000	

## Form 990 (2012) RUTLAND COUNTY AGRICULTURAL SOCIETY 03-0154330

Pa	rt 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 19 If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		_	
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
L-Ta	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
		24a		X
L	through 24d and complete Schedule K. If "No," go to line 25	24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<u></u>		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds?			
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	0.5		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	_25a		
b	is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	<b>28</b> b		X
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		X
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			
	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	'	Х
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-37 If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
•	or IV, and Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		-	
~	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
J-0	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
J 1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		37		x
20	Part VI  Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u> </u>	<del> </del>	<del></del>
38	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
	13. Note: All 1 of th 330 life is a required to complete Schedule O	<u> </u>		

## Form 990 (2012) RUTLAND COUNTY AGRICULTURAL SOCIETY 03-0154330

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

	Check it Schedule O contains a response to any question in this Part v			Γ
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and			
Ŭ	reportable gaming (gambling) winnings to prize winners?	1c		x
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return  2a 160	į		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	İ
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			1
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c_		<u> </u>
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 as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or		İ	
	gifts were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		├
d	If "Yes," indicate the number of Forms 8282 filed during the year	┥_		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	-	<del> </del>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<del>                                     </del>	<del> </del>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	ľ		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	- <del>"</del>	<del>                                     </del>	╁
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	1		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them )			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		L	<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	ļ
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans  13b			
С	Enter the amount of reserves on hand	-	ļ	<del> </del>
I4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	<u> </u>	<u> </u>

Part VI

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

Sec	tion 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 11 11			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent	4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_		<b>.</b>
	one or more members of the governing body?	_7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			v
o	stockholders, or persons other than the governing body?  Did the executation contemporare early decument the meetings held or written actions undertaken during the year by the following	7b		<u> X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		х	
a	The governing body?	8a	X	ļ
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code	_		
	and b. I choice (This econor & requests information about policies free required by the internal revenue court	,	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
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			ŀ
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	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		X
þ	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	4.5.		
<u></u>	organization's exempt status with respect to such arrangements?	16b	L	L
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
40	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy,			
20	and financial statements available to the public during the tax year  State the name, physical address, and telephone number of the person who possesses the books and records of the			
40	otate the name, physical aggress, and telephone number of the betsoff who bossesses the books situ records of the			

organization >

ROGER M PIKE

PO BOX 864

# 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

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bc of	x, unl ficer a	Pos check ess pe ind a c	erson	than o	an ee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2) (USS-WIGC)	organization and related organizations
(1) RICHARD RIVERS										
	40.00					1			_	_
MANAGER/PRESIDENT	0.00	_		X	<u> </u>	1		45,047	0	0
(2) BEVERLY DAVIDSON										
	0.00							1 200	_	_
TREASURER (3) DONNA STEARNS	0.00	-	$\vdash$	X	1			1,200	0	0
(3) DONNA STEARNS	0.00									
SECRETARY	0.00			x				498	o	o
(4) BOB BEAROR	0.00			Ĥ	$\vdash$	+		430		
(4) 202 222 (01)	0.00									
VICE PRESIDENT	0.00			x				l o	o	o
(5) CHARLES BROTHERS			<u> </u>		<u> </u>			<del>-</del> -		
``	0.00			ł						
VICE PRESIDENT	0.00			X				0	0	0
(6)										
					ļ					
(7)										
(8)									<u> </u>	
(9)										
(10)										
(11)										
										000

_Pai	rt VII Section A Officers	s, Directors, Tru	ıstee	s, K	ey E	mp	loye	es, a	and Highest Compensated	Employeescontinued)			
	(A)	(B)			-	C)			(D)	(E)	1	F)	
	Name and title	Average hours per	1,4	o not		more	e than	one	Reportable compensation	Reportable compensation from		nated unt of	
		week					is both		from	related		her	
		(list any	of	ficer a	nd a	directi	or/trus	tee)	the	organizations		ensation	
		hours for related	9 5	lns.	ş	Key	gg.	ρ	organization (W-2/1099-MISC)	(W-2/1099-MISC)	1	n the lization	
		organizations	direc	tituti	Officer	en	ploy	Former	( == ,		and	elated	
		below dotted	Individual trustee or director	Institutional trustee		/ employee	#g				organ	izations	
		line)	l sie	เบร		è	pen						
			Ō	tee			Highest compensated employee						
(42)			╁──		-		+ -						
(12)			i										
		,											
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(17)		<u> </u>	<del> </del>	-			1	$\vdash$					
(17)													
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			+			<del> </del>	+	├-					
(18)													
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		ļ	<del> </del>	_	<u> </u>	<u> </u>	↓	<u> </u>		<u> </u>			
(19)											İ		
					ŀ								
		<u> </u>											
1b	Sub-total								46,745				
С	Total from continuation she	ets to Part VII,	Sect	ion <i>i</i>	4			$\blacktriangleright$					
d	Total (add lines 1b and 1c)							<b>•</b>	46,745		_		
2	Total number of individuals (ind				ose	liste	d abo	ve)	who received more than \$10	00,000 in			
	reportable compensation from	the organization	<u> </u>	0								<del></del>	
												Yes	No
3	Did the organization list any fo						•		ee, or highest compensated		3		x
4	employee on line 1a? If "Yes," For any individual listed on line								and other compensation from	n tha	<u>⊢</u> *	+	<del>  ^</del>
4	organization and related organ									ii uie	l		
	individual	izations greater		,,,,,	,000	"	100,	· ·	inplote concedio o loi caci		4		X
5	Did any person listed on line 1	a receive or accr	ue co	mpe	nsat	ion f	rom a	any i	unrelated organization or inc	dividual			
	for services rendered to the or	ganization? If "Ye	es," c	omp	lete :	Sche	edule	J fo	r such person				<u> </u>
Sect	ion B. Independent Contracto	ors											
1	Complete this table for your fiv	e highest compe	nsate	d in	depe	ndei	nt co	ntrac	ctors that received more thai	n \$100,000 of			
	compensation from the organiz		mper	satio	on fo	r the	cale	nda					
	Name and	(A) I business address							Descrip	(B) Ition of services		(C) Compensa	ation
	-							Т					
											1		
								1					
	<del></del>	<del></del>						+			<del></del>		
											İ		
	<del></del>							+	<del></del>				
								-					
								1					
										_			
2	Total number of independent of	ontractors (inclu	ding l	out n	ot lır	nited	to th	nose	listed above) who				
	received more than \$100,000	of compensation	from	the e	orga	nızat	lion	<u> </u>		0			
DAA												Form <b>99</b>	0 (2012)

#### Form 990 (2012) RUTLAND COUNTY AGRICULTURAL SOCIETY 03-0154330

Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in tines 1a- Fotal. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV All other program service reventotal. Add lines 2a-2f		300 17,500	(A) Total revenue  17,800 602,826	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a- Fotal. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV All other program service revent Fotal. Add lines 2a-2f	1b 1c 1d 1e 1f \$	17,500				
Fundraising events Related organizations Government grants (contributions) All other contributions, grifts, grants, and similar amounts not included above Noncash contributions included in lines 1a- Total. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV All other program service revent Total. Add lines 2a-2f	1c	17,500				
Related organizations Government grants (contributions) All other contributions, grifts, grants, and similar amounts not included above Noncash contributions included in tines 1a- Total. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV  All other program service revent Total. Add lines 2a-2f	1d   1e   1f   \$					
Sovernment grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a- Total. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV  All other program service reventotal. Add lines 2a-2f	1e					
All other contributions, gifts, grants, and similar amounts not included above some standard contributions included in lines 1a-Total. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REVIOUS All other program service reventotal. Add lines 2a-2f	1f \$					
and similar amounts not included above Noncash contributions included in lines 1a- Total. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV  All other program service revent Total. Add lines 2a-2f	11 \$	Busn Code				
Total. Add lines 1a-1f  STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV  All other program service reven  Total. Add lines 2a-2f		Busn Code				
STATE FAIR  SPECIAL PROGRAMS  LEASES & RENTALS REV  All other program service revenue.  Total. Add lines 2a–2f	VENUE	Busn Code				
SPECIAL PROGRAMS  LEASES & RENTALS REV  All other program service reven  Total. Add lines 2a–2f	VENUE	Busn Code	602,826	1		<del></del>
SPECIAL PROGRAMS  LEASES & RENTALS REV  All other program service reven  Total. Add lines 2a–2f	VENUE		602,826	1		
LEASES & RENTALS REV All other program service reven Total. Add lines 2a-2f	VENUE			602,826		
All other program service reven Fotal. Add lines 2a–2f	VENUE		198,190	198,190		
Total. Add lines 2a-2f		<b>—</b>	44,918	44,918		
Total. Add lines 2a-2f						
Total. Add lines 2a-2f						
	nue					ļ
		<u> </u>	845,934			· · · · · · · · · · · · · · · · · · ·
nvestment income (including d	lividends, inte	rest,	-06			
and other similar amounts)		. •	506	506		<del></del>
ncome from investment of tax-	exempt bond	proceeds -		<del></del>	· <del></del>	
Royalties	<del>,  </del>	<b>P</b>				<del> </del>
(ı) Real		(II) Personal				l
Gross rents						
.ess rental exps				İ		
· · · · · · · · · · · · · · · · · · ·						
Proce amount from	<del></del>	(v) Other		<del></del> -	<del></del>	
ales of assets	<del>`                                    </del>	(ii) Other				
· [						
				H		
		<b>•</b>		ľ		ĺ
• •	nts				<del></del> -	
_	,	ĺ		İ		1
See Part IV, line 18	a					
Less direct expenses	ь					
Net income or (loss) from fundr	raising events	<b></b>				
Gross income from gaming activities	s					
See Part IV, line 19	a					
ess direct expenses	b					
Net income or (loss) from gami	ing activities	<b>•</b>				
Gross sales of inventory, less		}				]
eturns and allowances	a					
ess cost of goods sold	b		İ			
Net income or (loss) from sales	s of inventory	<b>&gt;</b>				
Miscellaneous Revenue		Busn Code				
						ļ
						ļ
		<u> </u>			·	ļ
		1	I	ļ.		•
	iles of assets ther than inventory ass & sales exps diain or (loss) let gain or (loss) ross income from fundraising eve not including \$ f contributions reported on line 1c) ee Part IV, line 18 ess direct expenses let income or (loss) from fund ross income from gaming activitie ee Part IV, line 19 ess direct expenses let income or (loss) from gam fross sales of inventory, less eturns and allowances ess cost of goods sold let income or (loss) from sale	ret rental income or (loss) ross amount from (i) Securities ries of assets her than inventory ress cost or other ress & sales exps ross income from fundraising events ross income from fundraising events rot including \$ ricontributions reported on line 1c) ree Part IV, line 18 ress direct expenses ross income from gaming activities ree Part IV, line 19 ress direct expenses ress direct	ret rental income or (loss) ross amount from (i) Securilies les of assets her than inventory less cost or other lasis & sales exps latin or (loss) ross income from fundraising events not including \$ if contributions reported on line 1c) lee Part IV, line 18 let income or (loss) from fundraising events ross income from gaming activities let income from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from sales of inventory  Miscellaneous Revenue    Initiation of the results of t	tet rental income or (loss)  ross amount from les of assets her than inventory less cost or other lass & sales exps let income or (loss)  ross income from fundraising events ross income from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from gaming activities let income or (loss) from sales of inventory  Miscellaneous Revenue   Busn Code	tet rental income or (loss)  toss amount from lies of assets her than inventory less cost or other lasis & sales exps latin or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet gain or (loss)  tet income or (loss) from fundraising events  tet income or (loss) from gaming activities  tet income or (loss) from gaming activities  tet income or (loss) from gaming activities  tet income or (loss) from gaming activities  tet income or (loss) from gaming activities  tet income or (loss) from sales of inventory  Miscellaneous Revenue  Busn Code	et rental income or (loss)  ross amount from lise of assets her than inventory  sso cost or other sists & sales exps datin or (loss)  ross income from fundraising events not including \$ if contributions reported on line 1c) ee Part IV, line 18 ess direct expenses belet income or (loss) from fundraising events ee Part IV, line 19 ess direct expenses belet income from gaming activities ee Part IV, line 19 ess direct expenses belet income or (loss) from gaming activities ee Part IV, line 19 ess direct expenses belet income or (loss) from gaming activities ee Part IV, line 19 ess direct expenses belet income or (loss) from gaming activities  ross sales of inventory, less eturns and allowances ess cost of goods sold belet income or (loss) from sales of inventory  Miscellaneous Revenue  Busin Code

864,240

846,440

0

12 Total revenue. See instructions

Page 10

#### 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)

	Check if Schedule O contains a respo				
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.	<u> </u>	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				<u> </u>
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	45,047		45,047	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B)	100,401	100,401		
7 8	Other salaries and wages Pension plan accruals and contributions (include	100,401	100, 401		
J	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	20,114	16,514	3,600	
11	Fees for services (non-employees)				
а	•	6 075	C 075		
b	Legal	6,075	6,075		<del></del>
۳ 0	•			<del></del>	
d e	Lobbying Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	· ·			·	
	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses	10,982	10,982		
14	Information technology				
15 16	Royalties Occupancy	95,413	95,413		
17	Travel	30,113	30/120		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	4,260	4,260		
21	Payments to affiliates			<del></del>	
22 23	Depreciation, depletion, and amortization Insurance	22,726	22,726		
23	Other expenses Itemize expenses not covered	22,720	22,720		
27	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)				
а	STATE FAIR EXPENSES	309,935	309,935		
b	PROGRAM EXPENSES	178,284	178,284		
C	MISCELLANEOUS	112,565	112,565		
d	CITY LICENSE	33,736 14,310	33,736 14,310		
25	All other expenses  Total functional expenses Add lines 1 through 24e	953,848	905,201	48,647	0
26		333,040	303,201	10,047	
	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)				
DAA		·			Form 990 (2012)

Form 990 (2012)

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 211,345 85,979 1 Cash-non-interest bearing Savings and temporary cash investments 2 3 Pledges and grants receivable, net 73,859 80,032 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 8 3,375 4,013 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 5,595,572 other basis Complete Part VI of Schedule D 10a 5,588,298 5,595,572 b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 14 14 Intangible assets 15 Other assets See Part IV, line 11 15 5,884,789 5,757,684 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 31,244 177,827 17 17 Accounts payable and accrued expenses 18 18 Grants payable 3,400 3,400 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 105,892 84,461 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 8,386 99,947 of Schedule D 148,922 365,635 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here and Balances complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets X Organizations that do not follow SFAS 117 (ASC 958), check here and Net Assets or complete lines 30 through 34 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 5,608,762 5,519,154 32 Retained earnings, endowment, accumulated income, or other funds 5,608,762 5,519,154 33 Total net assets or fund balances 5,884,789 5,757,684 Total liabilities and net assets/fund balances

Form **990** (2012)

the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

3a

#### 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

OMB No 1545-0047

2012

Open to Public

Name of the organization

Inspection

Name	of the organization	"	-mployer i	dentification number				
R	THAND COUNTY AGRICULTURAL SOCIETY		03-0	0154330				
Pa	rt I Organizations Maintaining Donor Advised Full organization answered "Yes" to Form 990, Part IV		ounts.	. Complete if the				
_	organization anomorou you to verification, and	(a) Donor advised funds	(t	) Funds and other accounts				
1	Total number at end of year	(,,	<u>.</u>	· <u>·</u>				
2	Aggregate contributions to (during year)		_					
3	Aggregate grants from (during year)		_					
1	Aggregate value at end of year							
5	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 exclu			Yes No				
6	Did the organization inform all grantees, donors, and donor advisors in v							
·	only for charitable purposes and not for the benefit of the donor or donor							
	conferring impermissible private benefit?	davisor, or for any other purpose		Yes No				
Pa	irt II Conservation Easements. Complete if the orga	nization answered "Yes" to Form 99	0. Part					
1	Purpose(s) of conservation easements held by the organization (check a							
•	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically impor	tant land	l area				
	Protection of natural habitat	Preservation of a certified historic st						
	Preservation of open space							
2	Complete lines 2a through 2d if the organization held a qualified conserv	ration contribution in the form of a conservatio	n					
_	easement on the last day of the tax year							
				Held at the End of the Tax Year				
а	Total number of conservation easements		2a					
b	Total acreage restricted by conservation easements		2b					
C	Number of conservation easements on a certified historic structure inclu	ded in (a)	2c					
d	Number of conservation easements included in (c) acquired after 8/17/0							
	historic structure listed in the National Register		2d					
3	Number of conservation easements modified, transferred, released, exti	nguished, or terminated by the organization d	uring the	}				
	tax year ▶							
4	Number of states where property subject to conservation easement is lo	cated ▶						
5	Does the organization have a written policy regarding the periodic monit							
	violations, and enforcement of the conservation easements it holds?	•		Yes No				
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforci	ng conservation easements during the year						
	<b>&gt;</b>							
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	onservation easements during the year						
	<b>&gt;</b> \$							
8	Does each conservation easement reported on line 2(d) above satisfy the	ne requirements of section 170(h)(4)(B)						
	(i) and section 170(h)(4)(B)(ii)?			Yes No				
9	In Part XIII, describe how the organization reports conservation easeme	nts in its revenue and expense statement, and	d					
	balance sheet, and include, if applicable, the text of the footnote to the c	rganization's financial statements that describ	es the					
	organization's accounting for conservation easements							
P	art III Organizations Maintaining Collections of Art,		nilar A	ssets.				
	Complete if the organization answered "Yes" to I		_					
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), no	•						
	works of art, historical treasures, or other similar assets held for public e		e of					
	public service, provide, in Part XIII, the text of the footnote to its financia							
b			_					
	works of art, historical treasures, or other similar assets held for public e	exhibition, education, or research in furtherance	e 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		tne					
	following amounts required to be reported under SFAS 116 (ASC 958) r	elating to these items:						
а	Revenues included in Form 990, Part VIII, line 1			\$				
<u>b</u>	Assets included in Form 990, Part X	<del></del>	<u> </u>	\$				

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds

	Yes	No_
3a(i)		
3a(ii)		
3b		

(d) Book value

3,115,018

3,115,018

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (investment) (other) depreciation 3,115,018 1a Land

c Leasehold improvements d Equipment

**b** Buildings

e Other

Total Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Schedule D (Form 990) 2012

(3) SALES TAX PAYABLE 14,283
(4)
(5)
(6)
(7)
(8)
(9)
(10)
(11)

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

99,947

2. FIN 48 (ASC 740) Footnote In Part XIII, 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) Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 RUTLAND COUNTY AGRICULTURAL SO	CIETY	03-0154330	)	Page <b>4</b>
Pa	rt XI Reconciliation of Revenue per Audited Financial Statemer	ts With Re	evenue per Retur	'n	
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	2a		1	
b	Donated services and use of facilities	2b		I	
С	Recoveries of prior year grants		1		
d	Other (Describe in Part XIII )	2d		1	
е	Add lines 2a through 2d		L	2e	
3	Subtract line 2e from line 1	, ,		3	<u> </u>
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	4a		İ	
b	Other (Describe in Part XIII )	4b			
C	Add lines 4a and 4b		_	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	nts With E	xpenses per Ret	turn	
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			l	
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		- 1	
C	Other losses	2c		- [	
d	Other (Describe in Part XIII )	2d		l	
е	Add lines 2a through 2d		_	2e	
3	Subtract line 2e from line 1	r )		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	4a			
b	Other (Describe in Part XIII )	4b			
С	Add lines 4a and 4b		_	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	

Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2012 RUTLAND COUNTY AGRICULTURAL SOCIETY 03-0154330

Part XIII Supplemental Information (continued)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### 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.

OMB No 1545-0047
2012
Open to Public

Name of the organization

RUTLAND COUNTY AGRICULTURAL SOCIETY

Employer identification number 03-0154330

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 REVIEWED BY BOARD, OFFICERS, AND TRUSTEES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION AVAILABLE UPON REQUEST.