California Exempt Organization Annual Information Statement or Return

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199	2 Annual Information Statement or Return		Mark Mark Comment			<u>199</u>	Street, Square, Square,
For cale	MONTH DAY YEAR endar or fiscal year beginning 01 01 1992, a	and ending	монтн 12	1	1	YEAR	
	Attach Preaddressed Label A Final return?				4.	16	
	corporation number Federal employer identification number Dissolved	☐ Withdrawn ☐	Merned/Re	organized	d (attach e	volanatio	n)
)112130 HC6FA M 12	ecked, enter date		-	-	Apianado	11)
or HUM	ABILIDE COUNTY FAIR ASSN	filed this year: Stat				ns.	
		90 🗆 900EZ 🗀 99					112
dd BX	637	is exempt under R&					
FER	(NIIALE LA 95536	us organization or is					abilo
ty	Ctate 7ID code	ee General Instruction					X
							_
art I A	MI organizations complete Part I unless not required to file this form. See General In	nstruction C.					
	1 Gross sales or receipts from other sources. From Side 2, Part II, line 8		T	1			,
	2 Gross dues and assessments from members and affiliates		****	2		-	1
	3 Gross contributions, gifts, grants, and similar amounts received. See instructions			3	1		
ceipts	4 Total gross receipts for filing requirement test. Add lines 1 through 3.			11/11/	//////	/////	111
and	This line must be completed. See instructions		• [4		11111	
renues	5 Cost of goods sold				//////	/////	77
	6 Cost or other basis and sales expenses of assets sold 6						///
	7 Total costs. Add line 5 and line 6			7			//
ı	8 Total gross income. Subtract line 7 from line 4		_	8			
	9 Total expenses and disbursements. From Side 2, Part II, line 18			9			_
enses	10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8			10			
1	11 Filing Fee, see General Instruction F						\vdash
	Tr Timing 100, 000 denoral methadatati			11			- 0
-iling	12 Penalty for failure to file on time. See General Instruction I		_	11			-
Fee 1	Penalty for failure to file on time. See General Instruction L	any political camp	aign,	11 12 13			
Fee 1 If exem or (2) a (relating in the that have in the inf "yes," in this at this at the inf "yes," is this at this at this at the inf "yes," is this at this at the inf "yes," is the inf "yes," is the inf "yes," is this at the inf "yes," is the inf "yes,"	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R&TC.	any political camp &TC Section 2370 ration or bylaws	aign, 4.5	12 13		′es ↓ ′es ↓	No No No No
If exem or (2) a (relating Did the that have If "yes," Did the If "yes," Is this a	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R&g to lobbying by public charities)? If "yes," complete and attach form FTB 3509 e organization have any changes in its activities, governing instrument, articles of incorporative not been reported to the Franchise Tax Board? organization exempt under R&TC Section 23701g? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file form 100 total income reported \$ a group return filed on behalf of affiliated organizations? See General Instruction M.	any political camp &TC Section 2370 ration or bylaws	aign, 4.5	12 13		′es ↓ ′es ↓	No No No
If exemor (2) a (relating Did the that have If "yes," Did the If "yes," Is this a	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R&g to lobbying by public charities)? If "yes," complete and attach form FTB 3509 e organization have any changes in its activities, governing instrument, articles of incorporative not been reported to the Franchise Tax Board? organization exempt under R&TC Section 23701g? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file form 100 total income reported \$ a group return filed on behalf of affiliated organizations? See General Instruction M.	any political camp &TC Section 2370 ration or bylaws Daytime tele	aign, 4.5	12 13		∕es ↓ ∕es ↓ ∕es ↓ ∕es ↓	No No No
If exemor (2) a (relating Did the that have if "yes," Did the if "yes," The book	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R&g to lobbying by public charities)? If "yes," complete and attach form FTB 3509 organization have any changes in its activities, governing instrument, articles of incorporative not been reported to the Franchise Tax Board? organization exempt under R&TC Section 23701g? organization exempt under R&TC Section 23701g? organization file Form 100, Form 100S or Form 109 to report taxable income? organization file Form 100, Form 100S or Form 109 to report taxable income? organization file on behalf of affiliated organizations? See General Instruction M ooks are in care of located at	any political camp &TC Section 2370 attion or bylaws Daytime tele	aign, 4.5 phone (12 13	knowledg	/es ↓ /es ↓ /es ↓ /es ↓ /es ↓	No
If exemor (2) a (relating Did the that have is the colf "yes," Did the if "yes," The book	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R& g to lobbying by public charities)? If "yes," complete and attach form FTB 3509 e organization have any changes in its activities, governing instrument, articles of incorporative not been reported to the Franchise Tax Board? organization exempt under R&TC Section 23701g? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file Form 100 for affiliated organizations? See General Instruction M noks are in care of located at Under penalties of perjury, I declare that I have examined this return, including accompanying schedul is true, coffect and complete. Declaration of preparer (other than taxpayer) is based on all information	any political camp &TC Section 2370 ration or bylaws Daytime tele	aign, 4.5 phone (12 13		es ↓ es ↓ es ↓ es ↓ es ↓ 7 786	No
If exemor (2) a (relating Did the that have if "yes," Did the if "yes," The book	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R&T g to lobbying by public charities)? If "yes," complete and attach form FTB 3509 erorganization have any changes in its activities, governing instrument, articles of incorporative not been reported to the Franchise Tax Board? organization exempt under R&TC Section 23701g? erorganization file Form 100, Form 100S or Form 109 to report taxable income? erorganization file Form 100, Form 100S or Form 109 to report taxable income? erorganization of total income reported \$	any political camp &TC Section 2370 attion or bylaws Daytime tele	aign, 4.5 phone (est of my vieledge.	knowledg	es x es x es x es and bel 7 786 me telep	No.
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If exemor (2) a (relating Did the that have If "yes," Did the If "yes," Is this a The book ase	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R& g to lobbying by public charities)? If "yes," complete and attach form FTB 3509 erorganization have any changes in its activities, governing instrument, articles of incorporative not been reported to the Franchise Tax Board? organization exempt under R&TC Section 23701g? erorganization exempt under R&TC Section 23701g? erorganization file Form 100, Form 100S or Form 109 to report taxable income? erorganization file Form 100, Form 100S or Form 109 to report taxable income? erorganization of total income reported \$ a group return filed on behalf of affiliated organizations? See General Instruction M eroks are in care of located at looks are in care of located at	any political camp &TC Section 2370 ration or bylaws Daytime tele Daytime tele Daytime tele Sand statements, and of which preparer has been considered by the constant of	aign, 4.5 phone (est of my vieledge.	knowledg	es x es x es x es and bel 7 786 me telep	No No No No ief, it
If exemor (2) a (relating Did the that have If "yes," Did the If "yes," Is this a The book	npt under R&TC Section 23701d, has the organization during the year: (1) participated in attempted to influence legislation or any ballot measure, or (3) made an election under R& g to lobbying by public charities)? If "yes," complete and attach form FTB 3509 e organization have any changes in its activities, governing instrument, articles of incorporative not been reported to the Franchise Tax Board? organization exempt under R&TC Section 23701g? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file Form 100, Form 100S or Form 109 to report taxable income? e organization file on behalf of affiliated organizations? See General Instruction M oks are in care of located at Under penalties of perjury, I declare that I have examined this return, including accompanying schedul is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information Figurature of officer Date	any political camp &TC Section 2370 attion or bylaws Daytime tele Daytime tele Diles and statements, a of which preparer has been dependent of the content of the conten	aign, 4.5 phone (est of my vieledge.	knowledg	es x es x es x es and bel 7 786 me telep	No.

YEAR

California Exempt Organization Annual Information Return

FORM
199

200	0 Annual Information Return	199
For calen	dar or fiscal year beginning month 1 day 1 year 2000	o, and ending month 12 day 31 year 2000.
	IMPORTANT: Your number is required.	A Final return? Yes. If yes, check applicable box No
California	orporation number Federal employer identification number	● ☐ Dissolved ☐ Withdrawn ☐ Merged/Reorganized (attach explanation)
01	12130946000770	If a box is checked, enter date •
		B Check forms filed this year: State: ☐ 109 ☐ 100 ☐ 100S
	Attach Preaddressed Label	Federal: ☐ 990 ☐ 990EZ ☐ 990T ☐ 990PF ☐ 1041 ☐ 1120H ☐ 1120
	or See Instructions	c If organization is exempt under R&TC Section 23701d and is a school, public
Corp		charity, religious organization, or is controlled by a religious operation,
***	*********** 5-DIGIT 95536	check box. See General Instruction F. No filing fee is required. • \Box
Addı		D Is this a group filing? See General Instruction M
	040 330	E Accounting method used
	MBOLDT COUNTY FAIR ASSN	F Type of organization ☐ Exempt under Section 23701 (insert letter)
	BOX 637 RNDALE CA 95536-0637	☐ IRC Section 4947(a)(1) trust
r E i	ANDALE CA 95550 0057	
Part I C	omplete Part I unless not required to file this form. See General Instruc	tions B and C.
	1 Gross sales or receipts from other sources. From Side 2, Part II, line	
	2 Gross dues and assessments from members and affiliates	
Receipts	3 Gross contributions, gifts, grants, and similar amounts received. See	
and	4 Total gross receipts for filing requirement test. Add line 1 through lin	
Revenues	This line must be completed. If the result is less than \$25,000, see	
(Attach check	5 Cost of goods sold	
or money	6 Cost or other basis, and sales expenses of assets sold	
order here.)		7
	8 Total gross income. Subtract line 7 from line 4	
Expenses	9 Total expenses and disbursements. From Side 2, Part II, line 18	
	10 Excess of receipts over expenses and disbursements. Subtract line 9	Ifolii iiile o
	Ad Filler for MdO on MOC Con Occasion landwarding F	11 25 00
	11 Filing fee \$10 or \$25. See General Instruction F	II
Filing	AO DE MARCO COMENTANTO DE COMENTANTO DE LA COMENTANTE DE	10
Fee	12 Penalty for failure to file on time. See General Instruction L $\ \ldots \ \ldots$	12
		40
	13 Balance due. Add line 11 and line 12	
	opt under R&TC Section 23701d, has the organization during the year: (1)	
, ,	empted to influence legislation or any ballot measure, or (3) made an elect	
	lic charities)? If "Yes," complete and attach form FTB 3509, Political or Le	
	organization have any changes in its activities, governing instrument, arti	
	eported to the Franchise Tax Board? If "Yes," complete an explanation and	
	organization exempt under R&TC Section 23701g?	
	" enter amount of gross receipts from nonmember sources \$	
	organization file Form 100, Form 100S, or Form 109 to report taxable inc	come? Yes 🔼 No
If "Yes	," enter amount of total income reported \$	and the same of th
	CALL CALCE STATE	N. T. T. 1 (1) (2) (2) 2212
18 The fin	ancial records are in care of CALIF. FAIRS SERVICES	<u> Аштноп ту</u> Daytime telephone (<u>916</u> 921 - 22 <u>13</u>
	177/ TOLO: 2010 CASON.4.7.	TO CEPIE
located	at 1776 TRIBUTE ROAD SACRAMEN	
	Under penalties of perjury, I declare that I have examined this return, including accounting accoun	mpanying schedules and statements, and to the best of my knowledge and belief, it is nall information of which preparer has any knowledge.
Please	1+	
Sign Here	- Muut Alu	3-6-01 CEO (27) 786-9511
	Signature of officer	Date Title Daytime telephone
	Preparer's	Date Check if Preparer's SSN or PTIN
Paid	signature	self-employed
Preparer's		FEIN
Use Only	Firm's name (or yours, if	1 1/4
	self-employed) and address	Daytime telephone ()
		Dayume telephone (

California Exempt Organization Annual Information Return

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2001 For calendar or fiscal year beginning month TNA. year 2001, and ending month DEC. day_ year 200 / IMPORTANT: Your number is required. ☐ No California corporation number Federal employer identification number ■ Dissolved □ Withdrawn □ Merged/Reorganized (attach explanation) 4-60 0 If a box is checked, enter date B Check forms filed this year: State: ☐ 109 ☐ 100 ☐ 100S Attach Preaddressed Label Federal: 990 990EZ 990T 990PF 1041 1120H 1120 or See Instructions c If organization is exempt under R&TC Section 23701d and is a school, public Corporation/Organization name charity, religious organization, or is controlled by a religious operation, Humboldt check box. See General Instruction F. No filing fee is required. PMB no. **D** Is this a group filing? See General Instruction M. ■ ☐ Yes ☐ No 1250 E Accounting method used City ZIP Code Type of organization Exempt under Section 23701 ____ (insert letter) Fernda CA 9.5536 ☐ IRC Section 4947(a)(1) trust Part I Complete Part I unless not required to file this form. See General Instructions B and C. 1 Gross sales or receipts from other sources. From Side 2, Part II, line 8 1 2 Gross dues and assessments from members and affiliates 2 Receipts 3 Gross contributions, gifts, grants, and similar amounts received. See instructions 3 and 4 Total gross receipts for filing requirement test. Add line 1 through line 3 Revenues This line must be completed. If the result is less than \$25,000, see General Instruction C (Attach check 5 Cost of goods sold or money order here.) 6 Cost or other basis, and sales expenses of assets sold 7 8 9 Total expenses and disbursements. From Side 2, Part II, line 18 Expenses 10 Excess of receipts over expenses and disbursements. Subtract line 9 from line 8 Filing Fee 14 If exempt under R&TC Section 23701d, has the organization during the year: (1) participated in any political campaign or (2) attempted to influence legislation or any ballot measure, or (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section 23701d Organizations ... \square Yes \square No 15 Did the organization have any changes in its activities, governing instrument, articles of incorporation, or bylaws that have not If "Yes," enter amount of gross receipts from nonmember sources \$_ If "Yes," enter amount of total income reported \$ 18 The financial records are in care of CALIF. FAIRS SERVICES AUTHORITY __ Daytime telephone (916) 921 - 2213 located at 1776 TRIBUTE ROAD SACRAMENTO Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Please Sign Here 4-30-02 CEO (707) 286-950 ignature of officer Daytime telephone Preparer's SSN or PTIN Preparer's Check if signature > self-employed Paid Preparer's FEIN Use Only Firm's name (or yours, if self-employed) and address Daytime telephone (

TAXABLE YEAR **FORM California Exempt Organization Annual Information Return** 199 2010 Calendar Year 2010 or fiscal year beginning month and ending month day year Type of organization A First Return Filed? Yes CORP# Exempt under Section 23701 (insert letter) □No IRC Section 4947(a)(1) trust [0 Corporation/Organization Name FEIN **HUMBOLDT COUNTY FAIR ASSOCIATION** 4 7 6 . 0 . 0 . 0 . 7 . 7 1250 5TH STREET City ZIP Code **FERNDALE** 95536 CA No H Accounting method used (1) Cash (2) Accrual (3) Other C Amended Return?.... No If exempt under R&TC Section 23701d, has the organization during the year: (1) participated (a) Is this a group filing for affiliates? See General Instruction L • Yes in any political campaign or (2) attempted to influence legislation or any ballot measure, or (b) If "Yes," enter the number of affiliates (3) made an election under R&TC Section 23704.5 (relating to lobbying by public charities)? (c) Are all affiliates included? Yes If "Yes," complete and attach form FTB 3509, Political or Legislative Activities by Section (If "No," attach a list. See instructions.) J Did the organization have any changes in its activities, governing instrument, articles of (d) Is this a separate return filed by an organization covered by a incorporation, or bylaws that have not been reported to the Franchise Tax Board? If "Yes, complete an explanation and attach copies of revised documents..... ■ ☐ Yes ☑ No Is the organization exempt under R&TC Section 23701g?..... ☐ Yes ✓ No If "Yes," enter amount of gross receipts from nonmember sources \$__ ☐ Dissolved ■ ☐ Surrendered (Withdrawn) L Is the organization under audit by the IRS or has the IRS audited in ☐ Merged/Reorganized (attach explanation) a prior year? • Yes Vo Is the organization a Limited Liability Company? Yes No If a box is checked, enter date Check the box if the organization filed the following federal forms or schedule: N Did the organization file Form 100 or Form 109 to report taxable (1) ● □ 990T (2) ● □ 990PF (3) ● □ (Schedule H) 990 If organization is exempt under R&TC Section 23701d and is exclusively religious, educational, or charitable, and is supported primarily (50% or more) by public contributions, check box. See General Instruction F. No filing fee is required. Part I Complete Part I unless not required to file this form. See General Instructions B and C. 1 Gross sales or receipts from other sources. From Side 2, Part II, line 8..... 1,416,983 00 2 284.897 00 Receipts 3 Gross contributions, gifts, grants, and similar amounts received. 3 00 and 4 Total gross receipts for filing requirement test. Add line 1 through line 3. Revenues This line must be completed. If the result is less than \$25,000, see General Instruction B..... 1,701,880 00 6 Cost or other basis, and sales expenses of assets sold 00 7 00 8 Total gross income. Subtract line 7 from line 4..... 8 1,701,880 9 Total expenses and disbursements. From Side 2. Part II, line 18 9 1,503,341 Expenses

	TO EXCESS OF receipts over expenses and dispursements.	Subtract line 9 in	<u>om ime 8 </u>		. 10	198,539	10
	11 Filing fee \$10 or \$25. See General Instruction F				11	25	0
Filing	12 Total payments				12		00
Fee	13 Penalties and Interest. See General Instruction J					40	0
	14 Use tax. See General Instruction K	. 14		00			
	15 Balance due. Add line 11, line 13, and line 14. Then su	ıbtract line 12 fro	om the result		15	65	00
Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the t true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.					my knowledge and belief, it	is
lere		1		Date	Telepl	hone	
	Signature of officer	SECRETA	RY	05/29/2014	(70	07) 786-9511	
aid	Preparer's signature		Date	Check if self- employed ▶ □	Prepa	arer's PTIN/SSN	
reparer's Ise Only	Firm's name (or yours, if self-employed)						
	and address				Telepl	none	
					()	
	May the FTB discuss this return with the preparer sho	own above? See	instructions		✓ Ye	s 🗆 No	
D	Netter and from ETD 4404	265110	2		Го	100 0100 to 001	

Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information. See Specific Line Instructions.

	complete Part II or turnish substitute informat	ion. See Specific Line Ins	tructions.		
	1 Gross sales or receipts from all business ac	ctivities. See instructions .		1	1,262,523 00
	2 Interest			2	00
D !	3 Dividends		*******	3	00
Recei from	4 Gross rents		***************	4	154,460 00
Other	5 Gross royalties				00
Sourc					00
	7 Other income. Attach schedule				00
	8 Total gross sales or receipts from other so	,			
	Enter here and on Side 1, Part I, line 1				1 ,416,983 00
	9 Contributions, gifts, grants, and similar am				00
	10 Disbursements to or for members				00
	11 Compensation of officers, directors, and tru				740,400
Expen					749,126 00
and Disbui	13 Interest.				00
ments	14 Ιάλος				00
	15 Rents				59,487 00
	17 Other. Attach schedule				694,728 00
	18 Total expenses and disbursements. Add line				1,503,341 00
Scho	edule L Balance Sheets	Beginning of			
Assets		(a)	(b)	(c)	xable year (d)
	ash	(4)	240,053	(6)	346,832
	et accounts receivable		49,510	TRACES AND ASSESSMENT	93,092
	et notes receivable. Attach schedule		,	With Grand State No. 1886	0
	ventories	Production and the second			•
5 Fe	deral and state government obligations		8	THE STATE OF THE STATE OF	•
	vestments in other bonds. Attach schedule				•
7 Inv	vestments in stock. Attach schedule				•
	ortgage loans (number of loans)	BETTER CHARACTER		ESTATISMENT OF	•
9 Ot	her investments. Attach schedule	等分析(Aemoritan)的主持。		and the second	•
10 a	Depreciable assets	4,573,015		4,679,380	
	Less accumulated depreciation (3,360,311)	1,212,704 (3,425,010	
	nd		60,932		60,932
	her assets. Attach schedule		4 500 400		•
	tal assets		1,563,199		1,755,226
	ties and net worth				40.004
	counts payable				18,381
	Intributions, gifts, or grants payable		68,397		161,609
	ortgages payable		00,597		101,009
	her liabilities. Attach schedule	31.40 (a) (b) (c) (c)	267,281		147,916
	pital stock or principle fund.		201,201		147,510
	id-in or capital surplus. Attach reconciliation	CONTRACTOR OF CONTRACTOR			•
	tained earnings or income fund	THE WAR AND THE WAY AND THE	1,227,521		1,427,320
			1,563,199		1,755,226
Sche	tal liabilities and net worth	with income per return			
	Do not complete this schedule if the a	~~~	e 13, column (d), is less th	an \$25,000	
1 Ne	et income per books	• 198,539	7 Income recorded on b	ooks this year	
		•	not included in this ret		
	cess of capital losses over capital gains		Attach schedule		
	come not recorded on books this		8 Deductions in this retu		
7.5			against book income t		
	penses recorded on books this year not		Attach schedule		•
			9 Total. Add line 7 and li		
	tal.		10 Net income per return.		
Ad	ld line 1 through line 5	198,539	Subtract line 9 from lin	le б	198,539

TAXABLE YEAR

California Exempt Organization Annual Information Return

F	O	R	M	

201	1 Annual Information Ret	urn							1	99	
	/ear 2011 or fiscal year beginning monthday	yea	ar, and ending	monthc	day_		ye	ear			
	/Organization Name			Californi					_		
	DLDT COUNTY FAIR ASSOCIATION			0	1	1	2	1	3	0	
	ite, room, or PMB no.) 「H STREET			FEIN	- 6		0 /	2 0	7	7	0
City	HOINEET	State	ZIP Code	9,4	· , o		0,0	J , U	, /	1 /	, 0
FERND	ΔIF	CA	95536								
				TO 0 - 1' - 00704						A. A.	
	turn		J If exempt under R&T during the year: (1) p						1		
	d Return		or (2) attempted to in				,		re		
	tion 4947(a)(1) trustYes		or (3) made an electi						ι ο,		
	turn	✓ No	(relating to lobbying						Y	es 6	ØNo
	ssolved • 🗆 Surrendered (Withdrawn) erged/Reorganized Enter date: • / //		If "Yes," complete an	nd attach form FTE	350	9.					
	counting method:		K Is the organization ex	xempt under R&T	C Sec	ction	n 2370	1g?.	Y	es G	ZNo
	ash (2) ☑ Accrual (3) □ Other		If "Yes," enter the gro	5				9			
	return filed?		sources						. \$		
	990T (2) ■ □ 990(PF) (3) ■ □ Sch H (990)		■ If organization is exe	mpt under R&TC	Section	on 2	237010	d and is	6		
	group filing for the subordinates/affiliates? ■ □Yes	√ No	exclusively religious,	educational, or cl	harita	ble,	and is	3			
	attach a roster. See instructions	BETWO	supported primarily (
	rganization in a group exemption? \Byes	No	check box. No filing f								
	what is the parent's name?	E-110	M Is the organization a						PΥ	es l	ZNo
11 103,	what is the parents hame:		N Did the organization							_	_,
Did the c	organization have any changes in its activities,		taxable income?					•	ΙΥ	es l	Z No
	ng instrument, articles of incorporation, or bylaws		Is the organization up IBS audited in a prior I					_			TAL -
	e not been reported to the Franchise Tax Board? • 🗆 Yes	✓No	IRS audited in a prior	r year?	• • • •	• • •			Г	es L	□No
If "Yes,"	explain, and attach copies of revised documents.										
Part I Co	omplete Part I unless not required to file this form. See Ge	neral Ins	tructions B and C.				~~				
	1 Gross sales or receipts from other sources. From Side 2,					1	1		1,180	.938	3 100
	2 Gross dues and assessments from members and affiliate						2			,227	
Receipts	3 Gross contributions, gifts, grants, and similar amounts re						3			,173	
and Revenues	4 Total gross receipts for filing requirement test. Add line 1	through	line 3.								
nevenues	This line must be completed. If the result is less than \$2	25,000, s	ee General Instr <u>uction B.</u>			4	4		1,594	,338	3 00
	5 Cost of goods sold				00						
	${f 6}$ Cost or other basis, and sales expenses of assets sold				00)					
	7 Total costs. Add line 5 and line 6					_	7				00
	8 Total gross income. Subtract line 7 from line 4					_	3		,594		
Expenses	9 Total expenses and disbursements. From Side 2, Part II,						9		1,417		
	10 Excess of receipts over expenses and disbursements. Su								176	,376	
1.	11 Filing fee \$10 or \$25. See General Instruction F					11				25	00
	12 Total payments					12				4.0	00
	13 Penalties and Interest. See General Instruction J					13				40	00
	14 Use tax. See General Instruction K					14			_	65	00
	15 Balance due. Add line 11, line 13, and line 14. Then subt Under penalties of perjury, I declare that I have examined this return					15		a culoda	o and h	OC.	00
Sign	true, correct, and complete. Declaration of preparer (other than taxpe	ayer) is ba	sed on all information of which	ch preparer has any k	knowle	edge		lowledg	e and L	ellei, it	. 15
Here	Signature	Title		Date	•		phone				
	of officer	SECR	ETARY	05/29/2014	(7	07)	786-9	9511		
	Preparer's		Date	Check if self-		PTI	N				
Paid	signature			employed ▶ ☐	_				1 1		
Preparer's Jse Only	Firm's name (or yours,					FEI	N				
,	if self-employed)					Tols	T I			<u> </u>	
	and address				,	ielė	phone				
)			-	
	May the FTB discuss this return with the preparer show	n above	? See instructions		. • [\square Y	'es 🗆	No			

Part II Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross receipts—complete Part II or furnish substitute information. See Specific Line Instructions.

	complete Part II or lurnish substitute inform	iation. See Specific Line in:	structions.		
	1 Gross sales or receipts from all business	activities. See instructions		1	1 ,020,684 00
	2 Interest			2	00
Descriptor	3 Dividends				00
Receipts from	4 Gross rents			4	160,254 00
Other	5 Gross royalties		(;,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		00
Sources	6 Gross amount received from sale of asse	ets (See Instructions)		6	00
	7 Other income. Attach schedule				00
	8 Total gross sales or receipts from other s				CHAPASAL PART &
	Enter here and on Side 1, Part I, line 1			8	1,180,938 00
	9 Contributions, gifts, grants, and similar a	mounts paid. Attach schedu	le	9	00
	10 Disbursements to or for members				00
	11 Compensation of officers, directors, and				00
Expenses					718,902 00
and	13 Interest				00
Disburse-	14 Taxes				00
ments	15 Rents				00
	16 Depreciation and depletion (See instructi				59,487 00
	17 Other Expenses and Disbursements. Atta				639,573 00
	18 Total expenses and disbursements. Add				1,417,962 00
Calaadu					
Schedu Assets	Ile L Balance Sheets		taxable year	End of tax	
		(a)	(b) 346,832	(c)	(d)
			93,092		374,397
	counts receivable		93,092		53,310
	otes receivable	THE RESIDENCE OF THE PROPERTY			•
	tories				•
	al and state government obligations	THE RESERVE THE PROPERTY OF TH	10.1		•
	ments in other bonds	ASSESSMENT OF THE PROPERTY OF THE PARTY OF T	3/9		•
	ments in stock	DOSCOTORIOS CONTRADA DOSCOTORIO SE RECENTARIO DE CONTRADA DE CONTRADA DE CONTRADA DE CONTRADA DE CONTRADA DE C	(/)		•
U	age loans	Participated Selection and Selection Selection (Selection Selection Selectio	5/1/2		. ".
	investments. Attach schedule			1 272 222	•
	reciable assets	to the second of	4.2.7	4,679,380	
b Less	s accumulated depreciation	(3,425,011)	1,254,369	3,484,498)	1,194,883
		THE STATE OF THE S	60,932		60,932
12 Other	assets. Attach schedule				•
	assets		1,755,225		1,683,522
Liabilities	and net worth			India di Alta Propinsi di Alta	
	nts payable	Report and the property of the party of the property of the party of t	18,381	There is a second of the	5,298
15 Contri	butions, gifts, or grants payable				•
16 Bonds	and notes payable		161,608		54,631
17 Mortg	ages payable				•
18 Other	liabilities. Attach schedule		147,916	ALE THE PROPERTY AND ADDRESS OF THE PARTY OF	11,204
19 Capita	I stock or principle fund	光度		特別的主義的政治等	•
	n or capital surplus. Attach reconciliation			和自己的自然是的情况。	•
21 Retain	ed earnings or income fund	在中国的	1,427,320		• 1,612,389
22 Total li	iabilities and net worth		1,755,225		1,683,522
Schedu	le M-1 Reconciliation of income per bool	ks with income per return	46		
	Do not complete this schedule if th		25.75	1 \$25,000	
1 Net in	come per books	• 176,376	7 Income recorded on boo	oks this year	
2 Federa	al income tax	•	not included in this retu		
3 Exces	s of capital losses over capital gains	•	Attach schedule		
	ne not recorded on books this		8 Deductions in this return	and the second s	
4 Incom				-	3克拉斯 建氯甲基甲基酚 医超级
		•	against book income thi	s vear.	
year. A	Attach schedule		against book income thi		
year. <i>F</i> 5 Expen	Attach schedule		Attach schedule		
year. <i>F</i> 5 Expendeduce	Attach schedule		Attach schedule 9 Total. Add line 7 and line		
year. A 5 Expendeduc 6 Total.	Attach schedule	•	Attach schedule	8	176,376

TAXABLE YEAR

California Exempt Organization Annual Information Return

FORM
FORIV

201	2 Annual Information Ret	urn							19	99	
	ear 2012 or fiscal year beginning monthday	yea	r, and ending	month	_day		ye	ear			
	/Organization Name						tion nu		_		
	DLDT COUNTY FAIR ASSOCIATION		TO SECTION AND THE SECTION AND	0	1_	1	2	1_	3	0	
	ite, room, or PMB no.) TH STREET			FEIN	1 ==	6	0 (0	7	7	0
City	HORLET	State	ZIP Code	9	4 -	0	0, 0	0 0	RESURGAN	i de la constante de la consta	0
FERND.	AI F	CA	95536								
	turnYes		J If exempt under R&T	C Section 2370)1d h	as the	organ	nization			100 200
	d Return		during the year: (1) p				-		1		
	tion 4947(a)(1) trust	690	or (2) attempted to in	The state of the s					re,		
	turn? ● ☐ Dissolved ● ☐ Surrendered (Withdrawn)	s de l'ido	or (3) made an electi								
	erged/Reorganized Enter date: •///		(relating to lobbying						Y	es b	ZNo
	ccounting method:		If "Yes," complete an				area de la contraction de la c				
	ash (2) ☑ Accrual (3) □ Other		K Is the organization ex					1g? ■	Ye	s L	a No
F Federal	return filed?		If "Yes," enter the gro								
	990T (2) ■ □ 990(PF) (3) ■ □ Sch H (990)		Sources								
G Is this a	group filing for the subordinates/affiliates? $lacktriangle$ Yes	√No	 If organization is exe exclusively religious, 						i.		
	attach a roster. See instructions		supported primarily (5.5					
	rganization in a group exemption? $\dots \dots \square$ Yes	☑No	check box. No filing t								
If "Yes,"	what is the parent's name?		M Is the organization a	Limited Liability	y Com	ipany	?	•	Ye	es 🗓	ZNo
. 5:11			N Did the organization								
	organization have any changes in its activities, ng instrument, articles of incorporation, or bylaws		taxable income?					•	Ye	es L	ZNo
	e not been reported to the Franchise Tax Board? ● ☐ Yes	√ No	Is the organization ur							_	
	explain, and attach copies of revised documents.		IRS audited in a prior	r year?				•) L Y6	es ly	ØNo
	omplete Part I unless not required to file this form. See Ge	neral Insi	tructions B and C.								
	1 Gross sales or receipts from other sources. From Side 2,						1	1	,504	,610	00
	2 Gross dues and assessments from members and affiliate	s					2		12	,154	00
Receipts	3 Gross contributions, gifts, grants, and similar amounts r				9	• _ ;	3				00
and Revenues	4 Total gross receipts for filing requirement test. Add line 1										
	This line must be completed. If the result is less than \$5					1000000	4		,516	,764	- 100
	5 Cost of goods sold6 Cost or other basis, and sales expenses of assets sold .					00					是一个
	7 Total costs. Add line 5 and line 6					-	7	A Company of the Comp			00
	8 Total gross income. Subtract line 7 from line 4						8	1	,516	764	
	9 Total expenses and disbursements. From Side 2, Part II,						9		,465		
Expenses	10 Excess of receipts over expenses and disbursements. Su					11				,138	
	11 Filing fee \$10 or \$25. See General Instruction F					\neg				25	00
Filing	12 Total payments					. 12	2				00
	13 Penalties and Interest. See General Instruction J					. 13	3			40	00
						1/				-05	00
	15 Balance due. Add line 11, line 13, and line 14. Then subi					. 1!					00
Sign	true, correct, and complete. Declaration of preparer (other than taxp	ayer) is bas	sed on all information of which	ch preparer has ar	ny knov	vledge	ot my Kr	nowleag	e and b	ellet, it	IS
Here	Signature	Title		Date			phone				
	of officer	SECRE		05/29/2014	4	(7	07)	786-9	511		
	Preparer's		Date	Check if self-	_	PTI	N				
Paid Preparer's	signature •			employed ▶ L		FEI	I I				
Use Only	Firm's name (or yours,				-	FEI	IN				
	if self-employed) and address					Tele	phone		1		1
						()				
	May the ETP discuss this return with the present of	un abau-	2 Can instructions		. L		/aa 🔽	1 N.c			
	May the FTB discuss this return with the preparer show	vii above	? See mistructions			V	∕es □	NO			

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

	regardless of amount of gross receipts — comp	lete Part II or furnish si	ubstitute information.					
	1 Gross sales or receipts from all business act	ivities. See instructions.			1,339,177 00			
	2 Interest			2	00			
	3 Dividends			20 20 20 20 20 20 20 20 20 20 20 20 20 2	00			
Receipts	4 Gross rents	10 to 2 to 2 to 2 to 2000 to 2 to 2000	165,433 00					
from	5 Gross royalties		00					
Other Sources	6 Gross amount received from sale of assets (\$		00					
oouices	7 Other income. Attach schedule							
					1,504,610 00			
	8 Total gross sales or receipts from other source			- 2.00				
	9 Contributions, gifts, grants, and similar amou				00			
	10 Disbursements to or for members				00			
	11 Compensation of officers, directors, and trus				774.959			
	12 Other salaries and wages			- Charles to the first of the control of the contro	774,858 00			
Expenses	13 Interest			A SERVICE OF A SERVICE PROPERTY AND A SERVICE PROPERTY OF A SERVIC	00			
and	14 Taxes				00			
Disburse- ments	15 Rents				00			
monto	16 Depreciation and depletion (See instructions)				59,487 00			
	17 Other Expenses and Disbursements. Attach s			A STATE OF THE REAL PROPERTY OF THE PROPERTY O	631,281 00			
	18 Total expenses and disbursements. Add line	9 through line 17. Enter	here and on Side 1, Part I, I	ine 9 18	1,465,626 ₀₀			
Schedu	ile L Balance Sheets	Beginning of	taxable year	End of tax	able year			
Assets		(a)	(b)	(c)	(d)			
1 Cash		BERGER WARRE	374,397		• 436,493			
2 Net ac	ccounts receivable	PERSONAL PROPERTY	53,310	企业 作用 制度 发生的	• 93,667			
3 Net no	otes receivable				•			
4 Invent	tories				•			
5 Federa	al and state government obligations			是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	•			
	tments in other bonds		19		•			
7 Invest	tments in stock			计算数据编数数据编数	•			
8 Morta	age loans	建在数据的图像是数据的图像数据			•			
	investments. Attach schedule	CHECK THE LANGEST	K	ARTICLE STREET,	•			
	reciable assets	4,679,380		4,679,380				
	s accumulated depreciation	3,484,498)	1,194,883 (3,543,985)	1,135,396			
			60,932		• 60,932			
	assets. Attach schedule			1.675.4816.1314.1314.1316.131	• 24,236			
	assets	The companies thank	1,683,522		1,750,723			
	and net worth	CONTRACTOR SANGERS	1,000,022	SCHOOL SCHOOL SCHOOL	1,700,720			
	ints payable	AND THE LOW OWN	5,298	2-2-2-3-4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	• 20,413			
	butions, gifts, or grants payable	MARKET TO THE RESIDENCE	0,200		20,110			
	s and notes payable		54,631		• 47,458			
	ages payable	2010 P. S. S. S. S. L. A. B. V. S.	04,001		41,400			
	liabilities. Attach schedule		11,204		7,690			
	Il stock or principle fund.		11,204		7,030			
	n or capital surplus. Attach reconciliation							
	ned earnings or income fund		1,612,389		1,675,163			
			1,683,522	A P	1,750,723			
Schedu	iabilities and net worth Ie M-1 Reconciliation of income per books w	ith income per return	1,000,022	ADMINISTRAÇÃO UN SEL DES SOL	1,700,720			
	Do not complete this schedule if the an	nount on Schedule L, lin	e 13, column (d), is less tha	ın \$50,000.				
1 Net in	come per books	51,138	7 Income recorded on bo	ooks this year	· · · · · · · · · · · · · · · · · · ·			
	al income tax		7 Income recorded on books this year not included in this return. Attach schedule.					
	s of capital losses over capital gains		8 Deductions in this return not charged					
	ne not recorded on books this		against book income th	-				
	Control of the Contro							
	ises recorded on books this year not		9 Total. Add line 7 and lin					
	sted in this return. Attach schedule		10 Net income per return.					
	Add line 1 through line 5	51,138	Subtract line 9 from line	. 6	51,138			
u 101al	Aud mie i umbugh mie J	01,100	SUDITAGE HITE 9 HOILI IIII	, U	51,130			

TAXABLE YEAR

California Exempt Organization Annual Information Return

FO	RM	

201	3 Annual Information Ret	urn									1	99	
	ar 2013 or fiscal year beginning (mm/dd/yyyy)			, and end	ling (mm/dd.								
	Organization Name					aliforni O	a co	rpora 1	ition nun 2	nber 1	3	0	
	ite, room, or PMB no.)					EIN	-						
5 7 - 5 7 7 7	H STREET						101	6	0 0	0	7	7	0
City		State	Z	IP Code									
FERNDA	ALE	CA	9	95536									
A First Ret	urnYe	s 🗹 No	J	If exempt under R&T0	C Section 2	3701	d, h	as th	e organ	zation			
B Amende	d Information Return	s √ No		during the year: (1) pa									
	tion 4947(a)(1) trust			or (2) attempted to into or (3) made an election						neasui	e,		
	ormation Return? $ullet$ \square Dissolved $ullet$ \square Surrendered (W	ithdrawn)		(relating to lobbying b							П	es [ZNo
	erged/Reorganized			If "Yes," complete and	12, 12,								
	ter date: (mm/dd/yyyy) // counting method:		K	Is the organization exe					n 23701	g? •	□ Y	es 🕟	No
	ash (2) ☑ Accrual (3) □ Other			If "Yes," enter the gro									
F Federal r				sources							. \$		
	990T (2) ● □ 990 PF (3) ● □ Sch H (990)		L	If organization is exen						and is			
G Is this a	group filing for the subordinates/affiliates? \dots $lacktriangle$ Ye	s 🗹 No		exclusively religious, e supported primarily (5						tions			
If "Yes,"	attach a roster. See instructions			check box. No filing fe									
ℍ Is this or	ganization in a group exemption? $\dots \square$ Yes	s ✓No	М	Is the organization a L								es 6	Z No
If "Yes,"	what is the parent's name?			Did the organization fi		50		2 B					
	to the second se			taxable income?							Y	es G	ZNo
	organization have any changes in its activities, g instrument, articles of incorporation, or bylaws		0	Is the organization und							_	_	
	e not been reported to the Franchise Tax Board? • \(\square\) Yes	. ✓No		IRS audited in a prior	year?			• • • •		•	ΙЦΥ	es l	∐No
	explain, and attach copies of revised documents.												
Part I Co	implete Part I unless not required to file this form. See Go	eneral Ins	stru	ctions B and C.									
	1 Gross sales or receipts from other sources. From Side 2	, Part II,	line	8					1	1		1,723	
	$\boldsymbol{2}$ Gross dues and assessments from members and affiliat								2		30	0,000	00
Receipts and	3 Gross contributions, gifts, grants, and similar amounts						٠ ١		3		20000000	650000000	00
Revenues	4 Total gross receipts for filing requirement test. Add line	_								1	251	700	100
	This line must be completed. If the result is less than \$ 5 Cost of goods sold							00	4		,33	,723	0010
	6 Cost or other basis, and sales expenses of assets sold .							00					
	7 Total costs. Add line 5 and line 6							-	7		DW 0 8207 LPR		00
	8 Total gross income. Subtract line 7 from line 4								8	1	,351	,723	
Expenses	9 Total expenses and disbursements. From Side 2, Part II,	line 18 .							9	1	,597	,748	3 00
1	10 Excess of receipts over expenses and disbursements. Se								0	(246	025	
1	11 Filing fee \$10 or \$25. See General Instruction F											10	00
	12 Total payments												00
								. <u>1</u>					00
4 1	15 Balance due. Add line 11, line 13, and line 14. Then sub							1				10	00
	Under penalties of perjury, I declare that I have examined this retur true, correct, and complete. Declaration of preparer (other than tax		_							owledge	and b		
Sign Here	true, correct, and complete. Declaration of preparer (other than tax	payer) is ba Title	sed		n preparer ha Date	s any			e. ephone				
	Signature of officer	SECR	ET.		05/29/20	14			07)	786-9	511		
				Date	Check if sel		1	PTI					
Paid	Preparer's signature				employed I								
Preparer's							1	FEI	N		-		
Jse Only	Firm's name (or yours, if self-employed)								m I	1			
	and address						● Telephone						
							L	()	-			
	May the FTB discuss this return with the preparer sho	wn above	? S	See instructions			. (1	Yes □	No			

Part II Organizations with gross receipts of more than \$50,000 and private foundations regardless of amount of gross receipts — complete Part II or furnish substitute information.

	regardless of amount of gross receipts — co	impiete Part ii or iuriiisii si	anstitute illioriliation.				
	1 Gross sales or receipts from all business	activities. See instructions.		1	1,166,798 00		
	2 Interest				2 00		
	3 Dividends	3 Dividends					
Receip from	4 Gross rents				154,925 00		
Other	5 Gross royalties				5 00		
Source	6 Gross amount received from sale of asset	s (See Instructions)		• E	00		
	7 Other income. Attach schedule				00		
	8 Total gross sales or receipts from other sou	irces. Add line 1 through line	e 7. Enter here and on Side	1, Part I, line 1 8	1,321,723 00		
	9 Contributions, gifts, grants, and similar ar				00		
	10 Disbursements to or for members				00		
	11 Compensation of officers, directors, and t	1 Compensation of officers, directors, and trustees. Attach schedule					
	12 Other salaries and wages				795,576 00		
Expens	es 13 Interest				00		
and	14 Taxes				00		
Disbura ments	10 1161113						
IIIGIIIS	16 Depreciation and depletion (See instructio	ns)					
	17 Other Expenses and Disbursements. Attac						
	18 Total expenses and disbursements. Add li	ne 9 through line 17. Enter	here and on Side 1, Part I,	line 9 18	1,659,532 00		
Sche	dule L Balance Sheets	Beginning of	taxable year	End of	taxable year		
Assets		(a)	(b)	(c)	(d)		
	sh		436,493		• 254,952		
	t accounts receivable	THE EXPLORED HER PROPERTY OF THE PROPERTY OF T	93,667		• 225,403		
	t notes receivable	SACRA NO CONTRACTOR AND SERVICE DESCRIPTION OF THE SERVICE SER			•		
	rentories	DOMESTIC AND DESCRIPTION OF THE PROPERTY OF TH		Single And Commission	•		
	deral and state government obligations						
	estments in other bonds	EXT. CO. LO. STATE OF CONTROL STATE OF C			•		
	estments in stock	EXECUTION DESCRIPTION OF THE PROPERTY OF THE P			•		
	rtgage loans	REPORTED TO THE PROPERTY OF TH			•		
	ner investments. Attach schedule						
	Depreciable assets		4.405.000	4,680,96			
	ess accumulated depreciation		1,135,396	3,605,76			
	nd	BE WINDS AND ANY	60,932		• 60,932		
	ner assets. Attach schedule		24,236		4.040.400		
	al assets		1,750,723		1,616,482		
	ies and net worth		20,413	Eller West and State of	102 022		
	counts payable		20,413		• 183,022		
	ntributions, gifts, or grants payable		47,458		40,084		
	nds and notes payable		47,430		40,004		
	rtgages payable		7,690		6,746		
	pital stock or principle fund	and the second second second	7,030		0,740		
	d-in or capital surplus. Attach reconciliation						
	ained earnings or income fund		1,675,163		1,386,630		
			1,750,723		1,616,482		
Sche	al liabilities and net worth	s with income per return	-	December 1995	1,010,402		
	Do not complete this schedule if the	amount on Schedule L, lin	ie 13, column (d), is less th	nan \$50,000.			
1 Ne	t income per books	• (246,025)	7 Income recorded on t	ooks this year	學的表別。		
	leral income tax	•		eturn. Attach schedule			
3 Exc	cess of capital losses over capital gains	•	8 Deductions in this ret	urn not charged			
4 Inc	ome not recorded on books this		against book income	this year.			
yea	ır. Attach schedule	•	Attach schedule				
5 Exp	penses recorded on books this year not		9 Total. Add line 7 and I	ine 8			
	ducted in this return. Attach schedule	100 A SAME AND A SAME					
6 Tot	al. Add line 1 through line 5	(246,025)	Subtract line 9 from li	ne 6	(246,025)		