2949302303503

OMB No. 1545-0047 Return of Organization Exempt From Income Tax -

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Department of the Treasury

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

4	P 44	2040			00101	alian A.			20 + 6		
<u>A</u>			ndar year, or tax year beginnin		, 2018, and en						
В		applicable	C Name of organization The Sa	ndwich Fair As	Sociation	Jno	السعة		entification number		
\sqcup	Address	change	Doing business as						96154		
\sqcup	Name cha	ange	Number and street (or P O box if r	mail is not delivered to street add	dress) Roon	n/suite		Telephone nu	ımber		
Ц	initial retu	ırn	P.O. Box 129								
	Final return	n/terminated	City or town, state or province, cou		code						
	Amended	i return	Sandwich, III	inois 60378				Gross receip	ts \$		
	Application	on pending	F Name and address of principal office	cer		H(a	s) Is this a grou	p retum for suborc	linates? ☐ Yes ☑ No		
_						1			uded? 🗌 Yes 🔲 No		
<u> </u>	Tax-exem	npt status	501(c)(3) 501(c)	(5) ◀ (insert no) ☐ 494	7(a)(1) or 🔲 52		If "No,	" attach a list	(see instructions)		
<u>J</u>	Website:				<u> </u>			xemption num			
_		rganization	Corporation Trust Associ	ation ☐ Other ►	L Year of for	mation 1	888	M State of le	gal domicile <u>Illinoi</u> ;		
Р	art I	Summ		· 	<u> </u>						
			escribe the organization's mis								
Governance		Asso	ciation, Inc. p. eKalb County,	rovides an	annual	ag	ricul	tural	fair		
nan	l .	in Do	eKalb County!	Illinoiso		J					
veri			is box ▶ 🗌 if the organization								
Ĝ	3 1	Number o	of voting members of the gove	erning body (Part VI, line	1a)			3	13_		
ంర	4 1	Number o	of independent voting membe	ers of the governing body	(Part VI, line	lb)		4			
ties	5	Total nun	nber of individuals employed	ın calendar year 2018 (Pa	art V, line 2a)			5	14		
Activities	6 -	Total nun	nber of volunteers (estimate if	necessary)				6			
Ac	7a -	Total unre	elated business revenue from	Part VIII, column (C), line	12			7a			
	b I	Net unrel	ated business taxable income	from Form 990-Dine 3	811/CD: :	.		7b			
				1,120	-1450		Prior Year	· _	Current Year		
Ð	8 (Contribut	ions and grants (Part VIII, line	149	563	114,116					
Revenue	9 1	Program	service revenue (Part VIII, line	1h) 8 [APR] 2	4 2020	ŞΓ,	360		1,457,562		
	10 I	Investme	nt income (Part VIII, column (/	A), lines 3, 4, and 7d) .				551	4088		
Œ	11 (Other rev	venue (Part VIII, column (A), lines 5, 6d, \$c, 9c (16 a) (17)								
			nue-add lines 8 through 11 (J 1.		500	1,644,640		
			nd similar amounts paid (Part				7				
			paid to or for members (Part I								
Ø			other compensation, employee	• • •	A), lines 5–10)		408,237		415,349		
Expenses			nal fundraising fees (Part IX, o	•					- 		
Ç			draising expenses (Part IX, co								
ш			penses (Part IX, column (A), lir				165,	1.484.149			
	18	Total exp	enses. Add lines 13-17 (must		039	1,899,498					
	19 F	Revenue	less expenses. Subtract line		539)	(- 254, 858)					
or ses						Beginni	ing of Curre		End of Year		
sets	20	Total asse	ets (Part X, line 16)			H	121,6	21	4,638,035		
t Ass	21 7		lities (Part X, line 26)						435,000		
Net Assets or Fund Balances	22 1		s or fund balances. Subtract			Ч.	121.6	21	4,203,035		
	rt II		ure Block					<u> </u>			
		es of periur	v. I declare that I have examined this	return, including accompanying	schedules and st	atements.	and to the	best of my kn	owledge and belief, it is		
	•		ete Declaration of preparer (other than					•			
		Th	e Sandwich Fai	ir Association	1. Inc.		A	pril I	3.2020		
Sig	n	Signa	iture of officer Hanny	R	') 		Date		-,		
Here				AIR SECRETAR	>~						
	- 1	Type	or print name and title	JAK DECKETH	<u> </u>						
D .		Print/Typ	e preparer's name	Preparer's signature		Date			PTIN		
Pai		1						Check if self-employed			
	parer										
US	e Only						Firm's				
Mav	the IPS	Firm's ac	this return with the preparer	shown above? (see instri	ictions)		Phone	по	. Yes No		
.viay	nie ins		tins return with the preparer				· · · · ·	· · · · ·	Form 990 (2019)		

Part	III s	tatement of Program hack if Schedule O c			ing in this Bart III			
1	Briefly	describe the organizat	ion's mission:		·	•		
		ase see Pa						
						·····		-
2		organization undertak orm 990 or 990-EZ? .						·····································
3	Did the	" describe these new se organization ceases?	conducting, or n	nake significant c	hanges in how it co	onducts, any progra	m 🗆 Vaa	
		" describe these chang					⊔ tes	™N0
4	expens	be the organization's pees. Section 501(c)(3) and expenses, and reven	ind 501(c)(4) orga	nizations are requi	red to report the am			
4a) (Expenses						
46								
40) (Expenses						
		•••••						
								·
	<u> </u>	\ /-					~~	
4c	(Code:) (Expenses	\$	including grants o	of \$	_) (Revenue \$	·)
								
4d		rogram services (Desci) /D			
40	(Expens	ogram sanusa avpons	ncluding grants of	Φ) (Revenue \$			



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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		V
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		~
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? <i>If "Yes," complete Schedule C, Part II</i>	4		NA
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, Part III	5		V
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 "Yes," complete Schedule D, Part I	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, 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		<i>`</i>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		v
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		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	V	
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		~
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		~
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		レ
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
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		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
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		·
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		/
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		ノ
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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		سا
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		/
18	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		~
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		رز
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		NA
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
		Form	990	(2018)

Form **990** (2018)

Part	Checklist of Required Schedules (continued)			
	•		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		/
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		/
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		v
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		↓
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		—
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		NA
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		NA
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		V
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		~
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):	28a		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	20a		<u> </u>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		~
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<u>'</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u>\</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u></u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		<u>\</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		<u></u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> </u>
ь	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		NA
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		NA
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u></u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38		~
Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 84			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		i

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
	,		Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		٠,					
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 14	<u> </u>						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	W					
	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	ļ	<u></u>				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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 account)?	4a		<u></u>				
b	If "Yes," enter the name of the foreign country:		-					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
	5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		س				
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		-				
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		/را				
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		١				
D	gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	35.						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods							
a	and services provided to the payor?	7a						
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
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			- 2				
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?							
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .							
g								
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	, , , , , , , , , , , , , , , , , , , ,							
	sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12			٠,				
a b	Initiation fees and capital contributions included on Part VIII, line 12	- · ·		1 -				
11	Section 501(c)(12) organizations. Enter:	·		-				
	Gross income from members or shareholders			٠.				
	Gross income from other sources (Do not net amounts due or paid to other sources	1 .1	•	^				
	against amounts due or received from them.)	. '						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	- ,-	;.··					
	Section 501(c)(29) qualified nonprofit health insurance issuers.	[<u>.</u>						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
	Note. See the instructions for additional information the organization must report on Schedule O.			يس. کې*				
b	Enter the amount of reserves the organization is required to maintain by the states in which	3	` "					
	the organization is licensed to issue qualified health plans	[`.√	<u> </u> ; ,	•				
	Enter the amount of reserves on hand			,				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u></u>				
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b						
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		<u> </u>				
	If "Yes," see instructions and file Form 4720, Schedule N.							
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>'</u>				
	If "Yes " complete Form 4720. Schedule O	(, l	. [ا مر				

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struct	tions.
Sect	on 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 1a 13	4		1
	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 . 1b		ļ	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	7	ĺ	
	any other officer, director, trustee, or key employee?	2	1	1
3	Did the organization delegate control over management duties customarily performed by or under the direct			Ī
	supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		V
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5	<u> </u>	1
6	Did the organization have members or stockholders?	6	1	├
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	~	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,		ا . ا	ŀ
	stockholders, or persons other than the governing body?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
_	the year by the following: The governing body?....................................	8a	_	
a b	Each committee with authority to act on behalf of the governing body?	8b	1/	╁
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	05	-	
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		س
Secti	n B. Policies (This Section B requests information about policies not required by the Internal Reve	าue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	ļ	
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	<u></u>	ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		-
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		
14	Did the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
	f "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		<u>-</u>
b	f "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			
	organization's exempt status with respect to such arrangements?	16b		
	n C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-	ı (Sec	tion 5	υ1(c)
	3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)			
10	,	oroc+ ·	. میام	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in Inancial statements available to the public during the tax year.	erest [JUIICY	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords	•	

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

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 organization compensated any current officer, director, or trustee.										
(C)										
(A)	(B)	Position						(D)	(E)	(F)
Name and Title	Average	(do not check more than one box, unless person is both an						Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any hours for	약	ins	읔	e	em Hg	Form	from the	related organizations	other compensation
	related organizations	Individual trustee or director	Institutional trustee	Officer	Key employee	hest	mer	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	itor	onal		ploy	econ		(W-2/1099-WISC)		and related
	line)	uste	trus	'	ê	per	Ì			organizations
·		ë	tee			Highest compensated employee				
	ļ				-					,
(1) DANTEL BREUNIG										
DIRECTOR								# 750		
(2) SCOTT BREUNIG	 									
DIRECTOR	†							775		
(3) GENE FRIEDERS										
DIRECTOR								725		
(4) WILLIAM HAAG										
DIRECTOR_								600		
(5) RONALD HENRICH										
DIRECTOR								2000		
(6) MATTHEW OLSON	ļ	<u></u>								
DIRECTOR		-						775		
(7) MATTHEW WILSON	 	レ						0.00		
DIRECTOR			 ∤					800		
(8) LARRY DANNEWITZ								800		
DIRECTOR PRESIDENT	<u></u>		-		\dashv			800	_	
(9) NANCY REX	} -	~	}	4		Ì		3000	Ì	
DIRECTOR, SECRETARY			\dashv	\dashv				3000		
DIRECTOR, VICE PRESIDENT		~		ᅥ				750		
(11) JOHN WAGNER										
DIRECTOR, TREASURER		-		4	-			800	Ì	
(12) HAROLD DANNEWITZ	PART TIN	JE.								
DIRECTOR, ELECTRICIAN	WAGE	~		ŀ	Ч	- }		12,270		
(13) JAMES WEBBER	FULL		\neg		7			,		
DIRECTOR, CARETAKER	SALARIE	ا م	_ [39,275		
(14) BRADLEY ANDERSON	FULL				\neg					
GENERAL MANAGER	SALARIE	ا د			7			45,000		

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
				(0	•					
(A)	(B)	(do n		Posi iecki		than c	ne	(D)	(E)	(F)
Name and title	Average	٠,				is both		Reportable	Reportable	Estimated
	hours per week (list any			_		or/trust		compensation from	compensation from related	m amount of other
	hours for	Individual trustee or director	Institutional trustee	Officer	Key	Highest compensated employee	Former	the	organizations	compensation
	related organizations	le de	ţ.	cer	Key employee	nest	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC	from the organization
	below dotted	tor tr	onal		ploy	ဗိတ္		(11-2) 1033-111130)		and related
	line)	uste	trus		ее	nper				organizations
	Į į	ď	stee			sate				
						ed	ļ			
(15) REED JOHNSON	PART	ļ			<u>ار:</u>			# 0		
ELECTRICIAN	HOURLY				_		<u> </u>	# 23,048		
(16) GARY D. HOUGHTAYLEN	PART TIME									
MAINTENANCE	HOURLY				_		<u> </u>	19,285		
(17) DALE JACOBSON	PART							امیں ہے۔		
MAINTENANCE	HOURLY				_		<u> </u>	13,462		
(18) CHRIS SCHANK	PART				اررا					
OFFICE WORKER	HOURLY						<u> </u>	11,603	_	ļ
(19)									ı	
			_				L			
(20)				j						
			_		_					<u> </u>
(21)					1			1		
			_	_						
(22)										
			_		_					
(23)										
			_		_					
(24)			İ							
			\perp							
(25)		ł								
1b Sub-total						. 1	▶	175,718		
c Total from continuation sheets to Part						. 1	▶	,		
d Total (add lines 1b and 1c)						. 1		175,718		
2 Total number of individuals (including but						bove) w		ore than \$100,0	00 of
reportable compensation from the organization	zation ► Ç	<u> グ</u>								
									_	Yes No
3 Did the organization list any former off	icer, direct	tor, o	r tru	uste	e, l	кеу е	mp	loyee, or high	est compensa	ted
employee on line 1a? If "Yes," complete S										3 1
4 For any individual listed on line 1a, is the	sum of ren	ortab	le c	om:	pen	satio	n ar	nd other comp	ensation from	the
organization and related organizations										
individual										4
5 Did any person listed on line 1a receive or	accrue co	mpen	sati	on 1	fron	n any	unr	elated organiza	ation or individ	ual <u></u>
for services rendered to the organization?										5
Section B. Independent Contractors						-				
1 Complete this table for your five highest of	ompensate	ed ind	ene	nde	ent c	ontra	acto	rs that receive	d more than \$1	00.000 of
compensation from the organization. Rep										
year.							,	--		9
(A)							(B)		(C)	
Name and business addr	ess							Description of se	rvices	Compensation
						+				
										
					-	+				
2 Total number of independent contractor	e (includes	a hu	- n-	, L.	mito	ud to	th/	nee listed sha	val who	ا در مشا
z rotal number of independent contractor							u 10	JOE HOLEU ADO	ve) will image	

Form **990** (2018)

	990 (201	<u> </u>						Page
Par	τνιι	Statement of Rev		manaa ar nata t	a anu lina in thia	Dort VIII		_
	•	Check if Schedule C	o contains a res	sponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts	1a	Federated campaign	s 1a					
Grants nounts	b	Membership dues .]	,		
ts, (C	Fundraising events .			ļ			
≘ Fi	d	Related organizations		<u> </u>		;		
ns, Ei	e	Government grants (cor	,	101,110				
utio er (f	All other contributions, g and similar amounts not inc						
ë Ş	<u> </u>			13,006				
Contributions, Gifts, Grants and Other Similar Amounts	g h	Noncash contributions include Total. Add lines 1a-1	·					
	- "	Total. Add lines 1a-1	<u> </u>	Business Code	114,116	• •	-	ringe i
enu	2a	CATE DOMITS	STONS	646,338		· •		
Rev	Ь	GATE ADMISS CONCESSIONS PISPLAYS	AND	397,940				
<u>.</u>	c	MATN STACE		269.846				
Program Service Revenue	d	MAIN STAGE ENTRY FEES EXHIBITOR T	TCKETS	50,980				-,
Ē	e	CAMPING		45,887				
gra	f	All other program ser	vice revenue .	46,571				
<u> </u>	g	Total. Add lines 2a-2		<u> </u> ▶	1,457,562			
	3	Investment income			,			
		•		•	4 088	_		
	4	Income from investmen	t of tax-exempt be	ond proceeds ▶				
	5	Royalties	(i) Real	(II) Personal				
		Cross vests	(I) Real	(ii) Fersonai				
	6a	Gross rents Less: rental expenses			,			
	b c	Rental income or (loss)		 				
	ď	Net rental income or	(loss)		68.874		-	
ĺ	7a	Gross amount from sales of	(i) Securities	(II) Other	60,077			
	'"	assets other than inventory						,
	b	Less, cost or other basis			-			
		and sales expenses .						
	С	Gain or (loss)						
	d	Net gain or (loss) .		<u> ▶</u>				
a	_							
Other Revenue	8a	Gross income from fu	indraising					
eve		events (not including \$		}				
ř.		of contributions reported See Part IV, line 18]		
the	b	Less: direct expenses						
0	C	Net income or (loss) fi					-	
		Gross income from ga						
		See Part IV, line 19 .						
	b	Less: direct expenses	b		ļ		i	į
		Net income or (loss) fi		vities ▶			, , , , , , ,	
	10a	Gross sales of in	ventory, less					
		returns and allowance						
i		Less: cost of goods se					· · · · · · · · · · · · · · · · · · ·	
]	c	Net income or (loss) fr						
]		Miscellaneous Re	evenue	Business Code				
[11a		·					
	b		·					
	с С	All other revenue						
)	d	All other revenue . Total. Add lines 11a-			- 			
l	12	Total revenue See in		[]	1 (141) (112)	—— `		-

Part IX	Statement	of F	unctional	Expenses

	on 501(c)(3) and 501(c)(4) organizations must cor Check if Schedule O contains a respon				
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		•		
2	Grants and other assistance to domestic individuals. See Part IV, line 22			,	2.
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	175,718			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	239,631			
9	Other employee benefits				
11 a b	Fees for services (non-employees): Management		······		
c d	Accounting				
e f	Professional fundraising services. See Part IV, line 17 Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 13 14	Advertising and promotion	11,469			
15 16	Royalties				
17 18	Travel				****
19 20	Conferences, conventions, and meetings . Interest	6461			
21 22 23	Payments to affiliates	72,167			
24	Other expenses. Itemize expenses not covered 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.)	12,101			
a b	Please see Schedule O				
d	AN				
е 25 26	All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	1,294,233			
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

	art χ	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Pa	art X		
	•		(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	1,174,898	2	893,120
	3	Pledges and grants receivable, net	, ,	3	
	4	Accounts receivable, net		4	
	5	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	ļ. <u>.</u>		
ě	,	-	<u> </u>	6	·
Assets	8	Notes and loans receivable, net		7	
•	9	Prepaid expenses and deferred charges		8	
	10a	Land, buildings, and equipment: cost or	- t +44 - e _ ah	9	TET, ID CT (TB)
	'04				and the sales are assumed to the sales
	ь	ther basis. Complete Part VI of Schedule D Less: accumulated depreciation	2,939,723	10c	3,737,915
	11	Investments—publicly traded securities	$\frac{2,751,725}{}$	11	3, 131, 113
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11 ORIGINAL .	5000	13	5 00 0
	14	Intangible assets	300	14	9
	15	Other assets. See Part IV, line 11 GOVERNMENT BONDS	2000	15	2000
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,121,621	16	4,638,035
	17	Accounts payable and accrued expenses	, , , , , , , , , , , , , , , , , , ,	17	
	18	Grants payable		18	
	19	Deferred revenue		19	
ĺ	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
ies	22	Loans and other payables to current and former officers, directors,			,
ilit		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	4: - :
-	23	Secured mortgages and notes payable to unrelated third parties		23	435,000
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		0E	
	26	Total liabilities. Add lines 17 through 25		25 26	435,000
	20	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and		-	733,000
Ses		complete lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets		27	1.
Bal	28	Temporarily restricted net assets		28	-
ַ קַ	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
<u>ş</u>	30	Capital stock or trust principal, or current funds		30	
sse	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ĕ۱	32	Retained earnings, endowment, accumulated income, or other funds .		32	
l et	33	Total net assets or fund balances	4,121,621	33	4,203,035
_	34	Total liabilities and net assets/fund balances	4,121,621	34	4,638,035
		··· — · · · · · · · · · · · · · · · · ·			Form 990 (2018)

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			_ 🕝
1	Total revenue (must equal Part VIII, column (A), line 12)	644	,6	40
2	Total expenses (must equal Part IX, column (A), line 25)	899	4	98
3	Revenue less expenses. Subtract line 2 from line 1	-254	1,8	58`
4		12		
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O)	33	<u>6,2</u>	72
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
		,20	<u>3,0</u>	<u>35</u>
Part	XII Financial Statements and Reporting	,	•	
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>		
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other	٠_ ا		-
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		1
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both:			. 4
	Separate basis Consolidated basis Both consolidated and separate basis			ليـــــ
b	Were the organization's financial statements audited by an independent accountant?	2b		~
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both:			İ
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in		i	į
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	_		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	000	
		Form	990	(2018)

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

	f the organization		Employer identification number
The	Sandwich Fair Associated Organizations Maintaining Donor Ac	rion, Inc.	36-2196154
Pa			
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dono		
	funds are the organization's property, subject to t	-	
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the ben-		
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · Yes No
Par		"Vas" on Form 000 Bort IV line 7	
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the		for brokening allice comparisons found areas
	☐ Preservation of land for public use (e.g., recreation of natural habitat	•	f a nistorically important land area f a certified historic structure
	☐ Preservation of open space	☐ Preservation o	a certified historic structure
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contribution	on in the form of a conservation
_	easement on the last day of the tax year.	icid a qualified conservation contributio	Held at the End of the Tax Year
а			
b	Total acreage restricted by conservation easemer		
c	Number of conservation easements on a certified		
d	Number of conservation easements included in		
			· · 2d
3	Number of conservation easements modified, trar	nsferred, released, extinguished, or terr	
	tax year ►	•	, ,
4	Number of states where property subject to conse	ervation easement is located ►	
5	Does the organization have a written policy re		
	violations, and enforcement of the conservation e	asements it holds?	· · · · · ·
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations, and enforcing	g conservation easements during the year
			
7	Amount of expenses incurred in monitoring, inspecti	ng, handling of violations, and enforcing	conservation easements during the year
_	> \$		
8	Does each conservation easement reported on line		
•	and section 170(h)(4)(B)(II)?		
9	In Part XIII, describe how the organization reports		
	balance sheet, and include, if applicable, the text organization's accounting for conservation easem	<u> </u>	ancial statements that describes the
Part			Other Similar Assets
T are	Complete if the organization answered		
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other simila		
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under S		
_	works of art, historical treasures, or other simila		
	public service, provide the following amounts relat		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art	, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X	<u> </u>	> \$

Par	Companizations Maintaining	J Collections of	Art, His	storical	Treasures	s, or O	ther Similar <i>i</i>	Assets (co	ntinued)
3	Using the organization's acquisition, collection items (check all that apply)		ther reco	ords, che	ck any of the	he follo	wing that are a	a significant	use of its
а	Public exhibition		d	☐ Loar	n or exchan	ge prog	rams		
b	☐ Scholarly research		е	☐ Othe	er				
С	☐ Preservation for future generation								
4	Provide a description of the organiza XIII.	tion's collections	and exp	lain how	they further	the or	ganızatıon's ex	:empt purpo	se in Par
5	During the year, did the organization assets to be sold to raise funds rathe	r than to be mainta							s 🗌 No
Par	Escrow and Custodial Arra Complete if the organization	_	" on Fo	rm 990	Part IV In	e 9 or	reported an a	amount on	Form
	990, Part X, line 21.		00	,,,,,		0 0, 0.	roportou arr	arriodini ori	7 0
1a	Is the organization an agent, trustee	, custodian or oth	ner inter	nediary f	or contribu	tions o	other assets	not	
	included on Form 990, Part X?								s 🗌 No
b	If "Yes," explain the arrangement in F	art XIII and compl	ete the f	ollowing t	able:			_	_
	•	·		J				Amount	
С	Beginning balance					10	;		
d	Additions during the year					10	1		
е	Distributions during the year					16	,		
f	Ending balance					11	:		
2a	Did the organization include an amou	nt on Form 990, P	art X, lin	e 21, for e	escrow or c	ustodia	l account liabil	ity? 🗌 Ye	s 🗌 No
b	If "Yes," explain the arrangement in P	art XIII. Check her	e if the e	xplanatio	n has been	provid	ed on Part XIII		
Par	t V Endowment Funds.								
	Complete if the organization	ı answered "Yes	" on Fo	m 990, I					
		(a) Current year	(b) Pr	or year	(c) Two yea	rs back	(d) Three years ba	ack (e) Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance		-						
2	Provide the estimated percentage of t	he current year en	d baland	e (line 1g	, column (a	ı)) held	as:	•	-
а	Board designated or quasi-endowment	nt ▶	%						
b	Permanent endowment ▶	%							
C	Temporarily restricted endowment ▶	%							
	The percentages on lines 2a, 2b, and								
3a	Are there endowment funds not in the	e possession of the	ie organi	zation th	at are held	and ad	ministered for	the _	
	organization by.							\	res No
	(i) unrelated organizations							. [3a(i)]	
	(ii) related organizations							. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related o							. 3b	
4	Describe in Part XIII the intended uses		n's endo	owment for	unds.				
Part	, , ,								
	Complete if the organization	answered "Yes"	' on For	m 990, F	Part IV, line	e 11a. :	See Form 990), Part X, li	ne 10.
	Description of property	(a) Cost or oth (investme		, , <i>,</i>	or other basis ther)		Accumulated preciation	(d) Book	value
1a	Land	. 2,039	064			, _,-	\$ 22 CT		
b	Buildings	1,613							
С	Leasehold improvements								
d	Equipment	. 85	000						
е	Other		,						
Total.	Add lines 1a through 1e. (Column (d) m	oust equal Form 99	0 Part	Column	(B), line 10)C.) .	•	3 737.	915

Part VII	Investments – Other Securities Complete if the organization ans		rm 990 Part IV lir	ne 11h See Form	990 Part X line 12
	(a) Description of security or categor (including name of security)		(b) Book value	(c) Meth	hod of valuation -of-year market value
(1) Financia	Il derivatives				
• •	held equity interests				
(A)					
(B)				T	
(C)					
(D)					
(E)					
(F)	·			ļ	
(G)	·····			-	
(H)	4)				
	(b) must equal Form 990, Part X, col (B) line 12) ▶	.1	<u> </u>	المستقال على المستقال المستقال المستقال المستقال المستقال المستقال المستقال المستقال المستقال المستقال المستقال	
Part VIII	Investments—Program Relate		000 David IV Iva	- 11- 0 5	000 David V III.a. 40
	Complete if the organization ans	wered tes on For			
	(a) Description of investment		(b) Book value	1 ' '	hod of valuation of-year market value
(4)			 		
(1)					
(3)		· 			
(4)					
(5)					· · · · · · · · · · · · · · · · · · ·
(6)					
(7)					
(8)					
(9)					
	(b) must equal Form 990, Part X, col (B) line 13) ▶				
Part IX	Other Assets.				
	Complete if the organization ans		m 990, Part IV, lin	e 11d. See Form	
	(a) Description			(b) Book value
(1)					
(2)		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
(3)		·	····		
(4)	· · · · · · · · · · · · · · · · · · ·				
(5)				<u></u>	
<u>(6)</u> <u>(7)</u>					
(8)			-		
(9)	<u> </u>				
	mn (b) must equal Form 990, Part X, co	ol. (B) line 15.)			
Part X	Other Liabilities.				
	Complete if the organization ans	wered "Yes" on For	m 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,
	line 25.				
1.	(a) Description of liability	(b) Book value			
(1) Federal in	ncome taxes				بين أيمال وأودارا
(2)					
(3)					a sa sa
(4)					
(5)				÷ -•	- <i>y</i> -
(6)	<u> </u>			ا رفوهید	محسا محام الأساطي
(7)					يوسا الحجريون سناس ساسي ساسي
(8)		· · ·			
(9)			* * * *		- · · · · · · · · · · · · · · · · · · ·
	b) must equal Form 990, Part X, col (B) line 25)	de de la serie de la companya de la companya de la companya de la companya de la companya de la companya de la		1- 6	
z. Liability for	uncertain tax positions. In Part XIII, provi	de the text of the footho	ote to the organization	ı's tınancıal statemen	its 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

Pari	Reconciliation of Revenue per Audited Financial Stateme		Return.	
	Complete if the organization answered "Yes" on Form 990,		T 4 T	
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:	o_		
a b	Net unrealized gains (losses) on investments	2a 2b	-	
C	Recoveries of prior year grants		4 {	
d	Other (Describe in Part XIII.)		-	
e	Add lines 2a through 2d			
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i i	- - -	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
b	Other (Describe in Part XIII.)	4b	7	
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5	
Part	XII Reconciliation of Expenses per Audited Financial Statem	nents With Expenses p	er Return.	
	Complete if the organization answered "Yes" on Form 990, I	Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		-	
а	Donated services and use of facilities	2a]]	
b	Prior year adjustments	2b		
С	Other losses	2c	4	
d	Other (Describe in Part XIII.)	2d	اخذا	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4.	- - - - - - - - - - - - -	
a	· · · · · · · · · · · · · · · · · · ·	4a 4b		
		1 4D	J	
b			40	
C	Add lines 4a and 4b		4c	
с 5	Add lines 4a and 4b		4c 5	
c 5 Part	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line XIII Supplemental Information.	e 18.)	5	4; Part X, line
5 Part Provid	Add lines 4a and 4b	e 18.)	5 o; Part V, line	4; Part X, line
5 Part Provid	Add lines 4a and 4b	e 18.)	5 o; Part V, line	4; Part X, line
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5 Part Provid	Add lines 4a and 4b	e 18.)	5 o; Part V, line	4; Part X, line
5 Part Provid	Add lines 4a and 4b	e 18.)	5 o; Part V, line	4; Part X, line
5 Part Provid	Add lines 4a and 4b	e 18.)	5 o; Part V, line	4; Part X, line

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

The San	dwich Fair Association, Inc.	36-2196154
	Statement of Functional Expenses	
line 24	Other expenses	
	\$3491.93 DIRECTOR EXPENSES	
	2180.25, DONATIONS	
	230,985.85 ENTERTAINMENT	
	11,780,57 FUEL	
	329, 119.06 LAND PURCHASE	
	21, 910.90 MAINTENANCE AND REPAIR	S
	19,653,74 MERCHANDISE	
	9 576,67 MERCHANT ACCOUNT	
	87, 217, 91 NEW EQUIPMENT AND REHABIL	ITATION
	3583,15 POSTAGE	
	177,169,10 PREMIUMS	
	15,675.70 PRINTING	
	17,975,69 REAL ESTATE AND OTHER TA	AXES
	7976.00 REFUNDS	
	88,266.47 RENTS (TENTS ETC.)	
	20,855.78 SUPERINTENDENT AND OTHER C	PERATING EXPENSES
	57, 813, 14 SUPPLIES (MAINTENANCE)	
	26,744.04 TELEPHONE AND INTERMET	
	162, 257.51 UTILITIES	
	1,294,233.46 TOTAL	
# (1,294,233.00	·

:

The Sandwich Fair Association, Inc.	36-2196154
Part vi Governance, Management, and Disclosur	·e
Section A. Governing Body and Management	
J / J	
2. Daniel Breunia is Scott Breunia's son.	·
7 .	
Harold Dannewitz and Larry Dannew	itz are
distant cousins.	
-	
6. The Sandwich Fair Association, Inc. is	a private
corporation with one hundred (100) shar	1
7a. The stockholders elect the board of d	irectors.
76. The stockholders accept annual reports.	
Part XI Reconciliation of Net Assets	
line 9	
·	
The Sandwich Fair Association, Inc. purch	rased additional
land for the fairgrounds.	
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·	·
	, ,