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|-------------------|---------------------------------|---|----------------|--|
| • | | | | 2010 |
| Form 99 | 0 | Return of Organization Exempt From Incom | ne Tax | OMB No. 1545-0047 |
| Department of th | • | Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (ex benefit trust or private foundation) | kcept black | lung Quento Public. |
| niernal Revenue | | The organization may have to use a copy of this return to satisfy state repo | orting requir | ements Inspection . |
| | | ar, or tax year beginning 11/01/08 and ending 10/31/09 | | |
| B Creck a applica | 12914411 | C Marme clorganization SOUTHEAST MISSOURI DISTRICT FA | TD AC | D Employer identification number |
| hame change | label or print or | Oong Business As | TV VO | 43-1179098 |
| 7 | lype. | | m/susto | E Telephone number |
| indual return | See Specific | 410 KIWANIS DRIVE 20 | 00 | 573-334-9250 |
| [] ismuration | instruc | City or town, state or country, and ZIP + 4 | ļ | G Gross recents\$ 690,796 |
| Amended resur | 5 11 | CAPE GIRARDEAU MO 63702 and address of principal officer: | | Man to the a series of the |
| Application pen | ding No.11e | and address of principal differ. |) | H(a) is thus a group return for entities? Yes X No |
| | | | } | H(b) Are all affisiates yes No |
| | | | | If "No," attach a list (see instructions) |
| I Tax exempt | | 501(c) (5) ◀ (insert no) 4947(a)(1) or 527 | | |
| J Website. D | | Ovistion Trust X Association Other > L Year of | | H(c) Group exemption number |
| SPantas | Summar | | formation. | M State of logal domorlo MO |
| 1 Brief | | ne organization's mission or most significant activities | | |
| g A | GRICULTU | RE | | |
| ner . | | | | |
| BOVERNANCE CHECK | ck this box | | • >- | |
| 3 Num | | members of the governing body (Pa RECEIVED, OSC 120) | o or its asset | 3 1 12 |
| | | endent voting members of the governing body (Pert VI, line 1h) | | 4 9 |
| S Tola | il number of e | imployees (Part V, tine 2a) | | 5 44 |
| | | olunteers (estimate if necessary) (JUN 01 2011) | | 6 100 |
| 7a Tola | il gross unrela | ated business revenue from Part VIII line 11 column (C) iness taxable income from Form 99p-T, line 30 P's 1 Dept 88 | | 72 |
| D Mer | mirelated priz | IRS OGDEN, UTAH | Prior Yea | 76 O |
| a B Cont | | grants (Part VIII, line 1h) | | |
| • l | _ | revenue (Part VIII, line 2g) | 701 | |
| 11 Othe | | le (Part VIII, column (A), lines 3, 4, and 7d) art VIII, column (A), lines 5, 6d, 8c, 9c, 40c, and 11e) | 22 | |
| 1 | • | dd Imes B Ibround Armasi Fales Pan VIII, column (A), line 12) | 728 | |
| 13 Gran | nts and simila | r amounts paid (Part IX, column (A), June 1-3) | | |
| 14 Bene | efils paid to o | r for members (Part IX, column (A), hipe | | |
| 15 Salar | sies, other co | mpepsation, employed bline in Part X solumn (A), lines 5–10) raising Sets (PBI) X solumn (A), line 1184 | 26 | 5,315 23,916 |
| b Total | i fundraisino | expenses (Part IX, column (P), (n=25) | Series in | |
| ம் 17 Othe | | Part IX column CDEN 11 TO 14 2017 | | 7,692 548,845 |
| | | add lines 13 17 (must equal Part IX, column (A), line 25) | 624 | 1,007 572,761 |
| 19 Reve | enue less exp | enses Subtract line 18 from line 12 | | 1,902 118,035 Year End of Year |
| San 20 Total | i assets (Part | X hoe 16) | Beginning of | 3,081 1,280,591 |
| Y 21 Total | | art X, line 26) | | 525 |
| | essels or fund | balances Subtract line 21 from tine 20 | 1,162 | 2,556 1,280,591 |
| Part II | Signatur | | | |
| | | es of perjury, I declare that I have examined the return including accompanying echadidae and a strue, correct and complete. Dec | elalamante a | of in the best of my knowledge Thes any kylowledge |
| Sign | K. | DO NOT CORRESPOND FOR SI | IGNATU | IRE 1/29/10 |
| Here | Signaturi | e of officer | | Date |
| į | > | od officer Chris Waish, Traisurar | | |
| | Type or p | orni name and title | | Preparar's identifying number |
| Paid | Preparer's signature | Date 1 / 2 0 / 1 | Check i | (see restructions) |
| Preparer's | | 1/29/1 STANLEY, DIRNBERGER, HOPPER & ASSO | | ed ► [500-80-0471 EIN ► 43-1500106 |
| Use Only | Firm's name (if self-employ | W YOURS A 1441 N MOUNTER BUTTERN DO | | Phone P 43-1300100 |
| | address, and | | | no ▶ 573-334-3343 |
| | | turn with the preparer shown above? (see instructions) | | Yes No |
| DAA For Priva | acy Act and f | Paperwork Reduction Act Notice, see the separate instructions. | | Form 990 (2008) |

| m 990 (2008) SOUTHEAST MISSOURI D | | | Page |
|---|---|---|---|
| Briefly describe the organization's mission: | compliantions (| SCC Wish actions) | |
| AGRICULTURE | | | |
| | | | ******** |
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| | | | |
| Old the organization undertake any significant program | n services during the ye | ar which were not listed on | |
| the prior Form 990 or 990-EZ? | - , | | Yes X No |
| If "Yes," describe these new services on Schedule O. | | | |
| Did the organization cease conducting, or make signif | icant changes in how it | conducts, any program | |
| services? | | .,, , , , , , , , , , , , , , , , , , , | . Yes X No |
| If "Yes," describe these changes on Schedule O. | | | |
| Describe the exempt purpose achievements for each | | | |
| Section 501(c)(3) and 501(c)(4) organizations and sec | | | |
| allocations to others, the total expenses, and revenue | , if any, for each prograi | m service reported | |
| (Code) (Expenses \$ 549,1 | .99 including grants | of \$) (Revenue \$ | |
| SOUTHEAST MISSOURI DISTRICT | FATE ASSOCT | ATION, INC. | • |
| AGRICULTURE AND RECREATION | | | • • • • • |
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| (Code) (Expenses \$ | including grants | of \$ | |
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| (Code:) (Expenses S | induding grants | of \$,) (Revenue \$ | |
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| Other program services (Describe in Schedule O) | | | |
| Other program services (Describe in Schedule O) (Expenses \$ including g | rants of \$ 549,199 (Must 6 |) (Revenue \$ |) . |

| | | | Yes | No |
|----------|---|----------|-----|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? (f "Yes," complete Schedule A | | | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | 1 2 | | X |
| 3 | Oid 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 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in tobbying activities? If "Yes," complete | ۴ | | |
| · | Schedule C, Part II | 4 | 1 | |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. is the organization subject to the section 6033(e) | | | |
| - | notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | X |
| 6 | Oid the organization maintain any donor advised funds or any accounts where donors have the right to | ۲ | | |
| | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete | | | |
| | Schedule D, Part I | 6 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | ۲ | | |
| | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | . | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | <u> </u> | | |
| | complete Schedule O, Part III | В | . ! | x |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part | | | |
| | X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," | | | |
| | complete Schedule D, Part IV | 9 | 1 | X |
| 10 | Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D. Part V | 10 | | X |
| 11 | Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 257 if "Yes," complete Schedule D, | | | |
| | Parls VI, VII, VIII, IX, or X as applicable | 11 | x | |
| 12 | Did the organization receive an audited financial statement for the year for which it is completing this return | | | |
| | that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII | 12 | | X |
| 13 | is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the U.S? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | | | |
| | business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I | 14b | | _X_ |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Part II | 15 | | _X_ |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | l i | 1 | |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Part III | 16 | | <u> </u> |
| 17 | Did the organization report more than \$15,000 on Part IX, column (A), fine 11e? If "Yes," complete Schedule G, Part I | 17 | 1 | X |
| 18 | Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | <u> </u> |
| 20 | Oid the organization operate one or more hospitals? If "Yes," complete Schedule H | 20 | | X |
| 21 | Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | X |
| 22 | Oid the organization report more than \$5,000 on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III | 22 | | <u> </u> |
| 23 | Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 57 If "Yes," complete | 1 1 | - 1 | |
| | Schedule J | _23 | | <u> </u> |
| 248 | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than |]] | - 1 | |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions | ١ ا | 1 | |
| _ | 24b-24d and complete Schedule K. If "No," go to question 25 | 24a | | <u>X</u> |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year | | J | |
| A. | to defease any tax-exempt bonds? Did the organization act as an on behalf of issuer for bonds outstanding at any time during the year? | 24c | | |
| d 25a | | 24d | - | |
| 230 | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | ,,, | | |
| b | Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified | 25a | | |
| U | nomen from a management of the formation Cabadala L. On a L. | 25. | - 1 | |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | 25b | | |
| | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | ا ہے ا | | х |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or | 26 | | |
| | substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III | 27 | I | X |
| | Test, Complete Outcome Life Bit III | | 990 | |
| | | | | |

| | | | Yes | No |
|----|---|-------|-------|----------|
| 28 | Ouring the tax year, did any person who is a current or former officer, director, trustee, or key employee. | 3,000 | 500 | 200 |
| 3 | Have a direct business relationship with the organization (other than as an officer, director, trustee, or | Sec. | 393 | 200 |
| | employee), or an indirect business relationship through ownership of more than 35% in another entity | | | 11.00 |
| | (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, | 100 | lias. | 5 1. X |
| | Part IV | 28a | | <u>X</u> |
| b | Have a family member who had a direct or indirect business relationship with the organization? If "Yes," | } | j | |
| | complete Schedule L, Part IV | 28b | | X |
| С | Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a | | 1 | |
| | professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV | 28c | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes." complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | |
| | Part! | 31 | | X |
| 32 | Oid the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete | | | |
| | Schedule N, Part II | 32 | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | |
| | sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | 33 | | <u>X</u> |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, | 1 | | |
| | III, IV, and V, line 1 | 34 | | <u>X</u> |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete | | | |
| | Schedule R, Part V, line 2 | 35 | | _X_ |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related | 1 1 | | |
| | organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part | | | |
| | VI | 37 | | _X_ |
| | | _ ` | 000 | . — |

Form 990 (2008)

| 1 = | Foter the number renoded in Pay 2 of Farm 1000. Assurt Community of the published of | (M) | Yes | No |
|-----|---|---------------|---------------------------|----------------------|
| | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable. | | 32 | |
| b | February 1 (B) 1111 1111 1111 1111 1111 1111 111 | -[::::: | $\mathcal{G}(\mathbb{C})$ | 200 |
| c | | -[2€] | وار موجود موروع کرم | يُرْسِهُ |
| ٠ | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | 35.27 | المائية: المائدة | "6% k 2 |
| 2- | gaming (gambling) winnings to prize winners? | 1c | X | ļ, |
| 28 | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | 1900 C |
| | Statements, filed for the calendar year ending with or within the year covered by this return 2a 44 | | 200 | |
| ь | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 26 | X | |
| | Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see | 1.5.3 | 280 | 20 |
| | instructions) | | , in the second | 3000 |
| Зa | Did the organization have unrelated business gross income of \$1,000 or more during the year covered by | 1393 | ૽ૣ૽૽ૺ૽ૺ૽ૼ | |
| | this return? | За | | X |
| þ | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | _3ь | | |
| 48 | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | | | |
| | over a financial account in a foreign country (such as a bank account, securities account, or other financial | | | 1 |
| | account)? | 4a | | Х |
| b | If "Yes," enter the name of the foreign country | | 37.5 | . vg., ,,, |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank | | 30 | |
| | and Financial Accounts. | | `@``\$ | 10 mg |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | X |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax sheller transaction? | 5b | | Х |
| C | If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity | | | |
| | Regarding Prohibited Tax Shelter Transaction? | 5c | | í |
| 6a | Oid the organization solicit any contributions that were not tax deductible? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| | gifts were not tax deductible? | 6b | | ĺ |
| 7 | Organizations that may receive deductible contributions under section 170(c). | 200 | 355 | |
| а | Did the organization provide goods or services in exchange for any quid pro quo contribution of more than | | | |
| | \$75? | 7a | - 1 | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | | | |
| | required to file Form 8282? | 7c | l | х |
| d | If "Yes," indicate the number of Forms 8282 filed during the year 7d | NA S | 46.7 | وغمر |
| 6 | Did the organization during the year, receive any funds, directly or indirectly, to pay premiums on a personal | 7 | | 1 |
| | benefit contract? | 7e | | X |
| ſ | Old the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 71 | | X |
| 9 | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | 79 | | X |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as | | | |
| | required? | 7h | 1 | Х |
| 8 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section | 33.5 | , <u>4.03</u> | 11.77 |
| | 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring | | 3,3-7 | 135.4 |
| | organization, have excess business holdings at any time during the year? | 8 | | |
| 9 | Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds. | 1500 | 数词 | 363 |
| а | Did the organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter | 270376 | ું હૈં | 433° |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | 43. A |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | \$ 5° | |
| 11 | Section 501(c)(12) organizations. Enter | 355 | | 200 / 27 200 / 27 |
| а | Gross income from members or shareholders | النبية الرا | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | 1822 | 33/1 | |
| | amounts due or received from them) | | | entity, |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | • |
| _Ь | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | - T | 3.60 | 7) <u>k</u> - |
| | | Form | 990 | (2008) |

| Forn | 1 990 (2008) SOUTHEAST MISSOURI DISTRICT FAIR AS 43-1179098 | Down C |
|----------|--|--|
| ٠P.ā | art. (I). Governance, Management, and Disclosure (Sections A. B. and C request information about the control of | out policies not |
| C | required by the Internal Revenue Code.) | |
| <u> </u> | tion A. Governing Body and Management | |
| | | Yes No |
| | For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the | 15 15 15 15 15 15 15 15 15 15 15 15 15 1 |
| | ctrcumstances, processes, or changes in Schedule O. See instructions | |
| 1a | Enter the number of voting members of the governing body | |
| Þ | Enter the number of voting members that are independent 1b 9 | |
| 2 | Ord any officer, director, trustee, or key employee have a family relationship or a business relationship with | |
| | any other officer, director, trustee, or key employee? | 2 X |
| 3 | Did the organization delegate control over management duties customenty performed by or under the direct | |
| | supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 X |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? | 4 X |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | 5 X |
| 6 | Does the organization have members or stockholders? | 6 X |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members | |
| | of the governing body? | 7a X |
| þ | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | Service Const. |
| | the year by the following. | 1822 4 (A224 S. 1997) |
| а | The governing body? | 8a X |
| b | Each committee with authority to act on behalf of the governing body? | 8b X |
| 9a | Does the organization have local chapters, branches, or affiliates? | 9a X |
| b | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, | · 30 |
| | affiliates, and branches to ensure their operations are consistent with those of the organization? | |
| 0 | Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations | 9b |
| | must describe in Schedule O the process, if any, the organization uses to review the Form 990 | ا ا ا |
| 1 | Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at | 10 X |
| | the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 4 |
| Sec | tion B. Policies | 11 X |
| | | |
| 2a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | 12a X |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | 12a X |
| _ | nse to conflicts? | 401 |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | 12b |
| Ū | describe in Schedule O how this is done | |
| 3 | Does the organization have a written whistleblower policy? | 12c |
| 4 | | 13 X |
| 5 | Does the organization have a written document retention and destruction policy? | 14 X |
| - | Did the process for determining compensation of the following persons include a review and approval by | を変数がある。 |
| _ | Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision | [588] (E. 44) (E. 45) |
| a | The organization's CEO, Executive Director, or top management official? | 15a X |
| Ь | Other officers or key employees of the organization? | 15b X |
| •- | Describe the process in Schedule O (see instructions) | |
| oa | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | |
| | with a taxable entity during the year? | 16a X |
| b | If "Yes" has the organization adopted a written policy or procedure requiring the organization to evaluate | 6480 A B B B B B B B B B B B B B B B B B B |
| | its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard | |
| | the organization's exempt status with respect to such arrangements? | . 16b |
| | tion C. Disclosure | |
| 7 | List the states with which a copy of this Form 990 is required to be filed None | |
| 8 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) | |
| | available for public inspection. Indicate how you make these available. Check all that apply | |
| | Own websile Another's website X Upon request | |
| 9 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest | |
| | policy, and financial statements available to the public. | |
| 0 | State the name, physical address, and telephone number of the person who possesses the books and records of the | |
| | · | |

organization: ► CHRIS WEISS 2480 EAST MAIN STREET
ACKSON MO 63755

JACKSON

572-243-8463 Form 990 (2008)

| Form 990 (2008) | SOUTHEAST | MISSOURT | DISTRICT | FATR AS | 43-1179098 |
|-----------------|-----------|----------|----------|---------|------------|

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. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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 the organization did not compensate any officer, director, trustee, or key employee (A) **(B)** (C) (E) (F) Average Position (check all that apply) Reportable Reportable compensation Name and Title Estimated hours per compensation Individual trustee or director amount of institutional trustee from related other organizations (W-2/1099-MISC) сопрепавиол employee the from the (W-2/1099-MISC) and related organizations PETE POE PRESIDENT 0 0 0 DAVE WHITE VICE-PRESIDE 0 0 0 MARILYN SCHOTT SECRETARY 0 0 0 CHRIS WEISS TREASURER 0 0 0

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| (A) Name and use | (B) Average | | | chec | C) kallı | hat a | | (D) Reportable | (E) Reportable | (F) Estimated |
|--|---|--|-------------------------------|---------------------------------------|----------------------|--|---------------------|---|--|--|
| | hours per week | or director | Institutional trustee | Officer | Key amployee | Highest compansated employee | Former | compensation from the organization (W-2/1099-MISC) | compensation from related organizations (W-2/1099-MISC) | amount of other compensation from the organization and related organizations |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | - | |
| | | | | | | | | | | |
| Total | | | | اــــــــــــــــــــــــــــــــــــ | <u>ــــ</u> | <u>. </u> | • | | | |
| Total number of indivi | duals (including those | in 1a) v | vho | rece | ived | тог | e tha | in \$100,000 in reportable of | compensation from the | |
| employee on line 1a? For any individual liste the organization and i individual Did any person listed services rendered to t ection B. Independent C Complete this table for | If "Yes," complete Sched on line 1a, is the sur- related organizations gi- on line 1a receive or a the organization? If "Ye- contractors. | edule . n of re reater t ccrue c s," con | J for porta han comp | suclable \$150 sensite Sc | com 0,00 ation | ividu ipen: 0? If in fros | atio Ye: n an | n and other compensation c." complete Schedule J fo y unrelated organization fo | from r such | Yes No |
| compensation from th | (A) Name and business address | | | | | | | Decree | (B) tion of services | (C) Compensation |
| | | | | | | | | Descrip | and the second | Conspension |
| · · · · · · · · · · · · · · · · · · · | | | | | | | - | | | |
| | | | | | | | - | | | |
| | | | | | | | - | | | |
| | | | | | | | - | · · · · · · · · · · · · · · · · · · · | | |
| | | Juding | thos | se in | 1) v | vho r | ecer | ved more than \$100,000 in | | |
| compensation from the | E OTYRNIZEUON P | | | | | | | | | / »? » O |

Form 990 (2008) SOUTHEAST MISSOURI DISTRICT FAIR AS 43-1179098

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from lax under secuons 512,513 or 514 |
|--|---|--------------------|---|--|--|--|---|
| 1: | Federated campaigns | 1a | | | | | THE STATE OF THE STATE OF |
| 3 | Membership dues | 16 | | | var reprinse | | |
| | Fundraising events | 1c | | | | A STRUCTURE OF | |
| 티 (| Related organizations | 10 | | | | | \$\tag{\tag{2}}\tag{2}\t |
| =1 | Government grants (contributions) | 1e | | | | | |
| <u>^</u> | All other continbutions, grits, grants, | | | | 2 - 4 - 3 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 | | |
| | and similar amounts not included above | 111 | | | | | |
| 3] , | Noncash contributions included in lines 1 | | | | | | |
| =1 | Total Add lines 1a-1f | · · · · · | | A A S Car Library ard and | | | |
| + | TOTAL FACTORIES TOTAL | | Busn Code | ئونلىۋېدىۋە: ئىكىنىدى ئەيلىدىدىن. دە | STOREST STREET | | |
| ١,, | amiccione | | Busii Code | 343,779 | Parvings is in it was was too it to | Catharacan san take an an an | |
| 2: | | | | 267,922 | | | 343,7 |
| 1 | CARNIVAL CONCESS | | | | | | 267,92 |
| ' | | | — | 49,930 | | | 49,9 |
| ' | ENTRY FEES & HORSE | S SHOW | <u> </u> | 24,695 | | | 24,6 |
| ſ° | · | | | 75 | | | · |
| 1 | f All other program service rev | venue . | L | | | | |
| 1_9 | Total. Add lines 2a-2f . | | <u></u> | 686,401 | | | |
| 3 | Investment income (including | g dividends, inte | rest, and | | | | |
| | other similar amounts) | | > | 72 | 1,143 | | -1,0 |
| 4 | Income from investment of ta | ax-exempt bond | proceeds > | | | | |
| 5 | Royalties | | ▶ | | | | |
| 1 | (ı) Real | 1 (u) | Personal | | | | (4.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2 |
| 68 | Gross Rents | | | | | | Str. |
| l t | Less rental exps | | | | | | 机学学学经验 |
| | | | | | | | |
| ! . | | L | Þ | 1 | " Charles of the said | Stevensky wroth Just 1 1 | San San Carata Cara |
| | Gross amount from (i) Securit | lies : | (ii) Other | 6.836023614036496 | V Mary Charles (Males | 2008/07/44 2000/00 | OXCON, CONSTRUCT |
| | sales of assets | | (,,, 0 | | | | |
| Ι. | other than inventory | | | | | | |
| ' | Less cost or other | | | | | | |
| | basis & safes caps. | | | | | | |
| 1 | Gain or (loss) | | | | | Control of the Contro | |
| 1 . | | | <u> </u> | NATIONAL CONTRACTOR SOCIAL | | 00 00 00 00 00 00 00 00 00 00 00 00 00 | statt 2.7 |
| 8 | Gross income from fundraising e | vents | | | | | |
| | (not including \$ | | | | | | |
| 1 | of contributions reported on line 1 | íc). | | | | | |
| 1 | See Part IV, tine 18 | . a | | 1000 A 10 | | | |
| į t | Less: direct expenses | ъ | | | | | Y& #241.5 |
| | Net income or (loss) from fur | ndraising events | |] | | | |
| 98 | Gross income from gaming activity | rties | | | | | |
| 1 | See Part IV, line 19 | a | | | | | |
| t | Less direct expenses | ь | • | | rangariya ka | | THERMAN |
| 1 | Net income or (loss) from ga | | > | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | AND THE DESCRIPTION OF THE PERSON OF THE PER |
| 1 | Gross sales of inventory, les | | | Same Street Colors | 22.00 | .383/35\186-78.33 | (A) (T) Si (T) A |
| " | returns and allowances | اد | | | 14 TO 15 | | |
| . | Less cost of goods sold | ь . | | | | | |
| | • | | <u></u> | Land translation in the No | har calan magning | 149100646006646 | the property of the |
| | : Net income or (loss) from sa Miscellaneous Reven | | Busn. Code | <u>चित्रकृत्तात्त्रकृत्वयः । ।</u> | 15 22 CAN CAN CALL OF A CONTROL OF A | 8,75,9 3,95,79,965,22-2,7-47 c.m. | 6 45 1 1 1 1 1 Care |
| <u></u> | | | Dusii. Code | Acres carres a result | fan Primagan is | | \$P\$\$\$\$\$\$\$\$ |
| 112 | | | | 4,323 | | | 4,32 |
| , t | · | | | | | | |
| 9 | | | | | ļ | | |
| 0 | Alf other revenue | | L | <u> </u> | 1 | | |
| e | Total. Add lines 11a-11d | | > | 4,323 | Character (Carlot St. | | |
| 12 | Total Revenue. Add lines 11 | h, 2g, 3, 4, 5, 6d | , 7d, 8c, | | | | |
| 1 | | | | | t . | | 689,65 |

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (O).

| | not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|----------|--|-----------------------|--|--|--|
| 1 | Grants and other assistance to governments and | | | Section of the sectio | M.77, M. L. S. |
| | organizations in the U.S. See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to individuals in | | | | |
| | the U.S. See Part IV, line 22 | : | | | |
| 3 | Grants and other assistance to governments, | | | | Same 18 18 18 18 18 18 18 18 18 18 18 18 18 |
| | organizations, and individuals outside the | | | | State of the state |
| | U.S. See Part IV, lines 15 and 16 | | | | March Comment |
| 4 | Benefits paid to or for members | | | | 建筑层线线线以上 。 |
| 5 | Compensation of current officers, directors, | | | | |
| | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified | | | | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 22,082 | 19,682 | 2,400 | |
| 8 | Pension plan contributions (include section 401(k) | | | | |
| | and section 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | 1,834 | 1,631 | 203 | |
| 11 | Fees for services (non-employees) | | | | |
| | Management | | | | |
| | Legal . | 0.001 | | | |
| c | Accounting | 2,881 | · - · · · · · · · · · · · · · · · · · · | 2,881 | |
| đ | Lobbying | | 1 Y 2 K 2 X W 20 X W - W - W - W - X - X - X - X - X - X | | |
| е | Professional fundraising services. See Part IV, line 17 | | | | |
| f | Investment management fees | 643 | | 643 | |
| g | Other | 46 000 | 46.000 | | <u> </u> |
| 12 | Advertising and promotion | 46,902 | 46,902 | 0.040 | |
| 13 | Office expenses | 2,240 | | 2,240 | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | 1ravet | | | | |
| 18 | Payments of travel or entertainment expenses | | | | |
| 40 | for any federal, state, or local public officials | 34,429 | 26,148 | 8,281 | |
| 19 | Conferences, conventions, and meetings | 35,429 | 20,140 | 35 | |
| 20 21 | Interest Payments to affiliates | | | 33 | |
| 22 | Depreciation, depletion, and amortization | 3,335 | 2,561 | 774 | |
| 23 | Insurance | 17,698 | | | |
| 23 | | | | Production of the Control of the Con | 14.5 () (15.4) 10.18 () () () () () |
| 24 | Other expenses Itemize expenses not | | | | |
| | covered above (Expenses grouped together | | | | |
| | and labeled miscellaneous may not exceed | | | | Because the |
| | 5% of total expenses shown on line 25 below) | | | | |
| а | ENTERTAINMENT | 179,932 | 179,932 | 7. W. V. | , V 9 |
| b | PRIZES AND AWARDS | 55,784 | 55,784 | - | |
| c | EQUIPMENT RENT | 54,658 | 54,658 | | |
| d | CONCESSIONS | 52,698 | 52,698 | | ··· |
| e | CONTRACT LABOR | 25,075 | | | |
| í | All other expenses | 72,535 | | | |
| 25 | Total functional expenses Add lines 1 through 24f | 572,761 | 549,199 | | |
| 26 | Joint Costs. Check here | | | | |
| | SOP 98-2 Complete this line only if the | , | | | |
| | organization reported in column (B) joint costs | ' | |] | |
| | from a combined educational campaign and fundraising solicitation | | | | |
| | | | | | |

| <u></u> | u . , | C Datalier Offeet | | | |
|-------------|------------------|--|--|--|--|
| | | | (A) Beginning of year | ļ | (B) End of year |
| | 1 | Cash—non-interest bearing | 159,982 | 1 | 112,235 |
| | 2 | Savings and temporary cash investments | 243,636 | | |
| | 3 | Pledges and grants receivable, net | 243,636 | | 250,762 |
| | 13 | | ļ | 3 | |
| | 1 4 | Accounts receivable, net | | 4 | |
| | 5 | Receivables from current and former officers, directors, trustees, key | | l | } |
| | | employees, or other related parties. Complete Part II of Schedule L | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 5 | |
| | 6 | Receivables from other disqualified persons (as defined under section | | | AND THE PROPERTY OF THE |
| | 1 | 4958(I)(1)) and persons described in section 4958(c)(3)(B). Complete | | 1. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | í | Pan II of Schedule L | | 6 | |
| 53 | 7 | Notes and loans receivable, net | | 7 | |
| Se | 8 | Inventones for sale or use | | 8 | |
| Assets | 9 | Prepaid expenses and deferred charges | | 9 | |
| | 10a | Land, buildings, and equipment cost basis 10a 991, 974 | | 39 | BERGEROUS CLASS |
| | | Less accumulated depreciation Complete | | *** | |
| | | Part VI of Schedule D 10b 74,745 | 591,937 | 10c | 917,229 |
| | 11 | Investments—publicly traded secunites | 167,526 | | 317,223 |
| | 12 | Investments—other securities See Part IV, line 11 | 107,320 | | |
| | | | | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | <u> </u> |
| | 15 | Other assets See Part IV, line 11 | | 15 | 365 |
| _ | 16 | Total assets Add lines 1 through 15 (must equal line 34) | 1,163,081 | 16 | 1,280,591 |
| | 17 | Accounts payable and accrued expenses | | 17 | <u> </u> |
| | 18 | Grants payable | | 18 | |
| | 19 | Deferred revenue | | 19 | |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| es | 21 | Escrow account liability Complete Part IV of Schedule D | | 21 | |
| ≝ | 22 | Payables to current and former officers, directors, trustees, key | | £7%; | 327503600000 |
| Liabilities | | employees, highest compensated employees, and disqualified | | 33,78 | |
| Ĩ | j | persons. Complete Part II of Schedule L | (V-7/5-142) - V-1-144A | 22 | do months of a month of a |
| | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable | | 24 | |
| | 25 | Other liabilities Complete Part X of Schedule D | 525 | 25 | |
| | 26 | Total Irabilities. Add Imes 17 through 25 | 525 | | |
| S | - | | 12.00 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | 26 ≈*∵• | Stoke Start trust & NY -200 |
| Balances | İ | Organizations that follow SFAS 117, check here | | | |
| an | ,, | complete lines 27 through 29, and lines 33 and 34. | | Zontary. | Charles Control of the Control of th |
| 33 | 27 | Unrestricted net assets | 1,162,556 | 27 | 1,280,591 |
| ш | 28 | Temporatily restricted net assets | ······································ | 28 | |
| Fund | 29 | Permanently restricted net assets | 2642-6 A 2010-11 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 29 | |
| Œ. | 1 | Organizations that do not follow SFAS 117, check here▶ | | 13 | |
| ŏ | | and complete lines 30 through 34. | | 200 | |
| 53 | 30 | Capital stock or trust principal, or current funds | | 30 | |
| Assets | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| ΑS | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| Net | 33 | Total net assets or fund balances | 1,162,556 | 33 | 1,280,591 |
| Z | 34 | Total liabilities and net assets/fund balances | 1,163,081 | 34 | 1,280,591 |
| <u>, 5;</u> | art X | | · · · · · · · · · · · · · · · · · · · | | · |
| | We We If " | are the organization's financial statements compiled or reviewed by an independent account the the organization's financial statements audited by an independent accountant? Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility a audit, review, or compilation of its financial statements and selection of an independent a | y for oversight of | | Yes No 2a X 2b X 2c X |
| 3: | | a result of a federal award, was the organization required to undergo an audit or audits as | set forth in | | |
| | | Single Audit Act and OMB Circular A-133? | | | 3a X |
| <u>t</u> | 11 " | Yes," did the organization undergo the required audit or audits? | | | 3Ь |
| | | | | | Form 990 (2008) |

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047
2008

See Open to Public 9

Name of the organization Employer identification number SOUTHEAST MISSOURI DISTRICT FAIR AS 43-1179098 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 Part'I (a) Donor advised funds (b) Funds and other occounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes ∏ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Part1197 Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space 2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the lax year. Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2Ь Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2ď Number of conservation easements modified, transferred released, extinguished, or terminated by the organization during the 'axable year > Number of states where property subject to conservation easement is located \blacktriangleright _ _ _ Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and ∏ No enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ▶ \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? \prod_{No} In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service. provide, in Part XIV, the text of the footnote to its financial statements that describes these items. bill the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII line 1 (ii) Assets included in Form 990, Part X 2. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 Schedule D (Form 990) 2008

| | | MISSOURI DI | | | | | | Page 2 |
|----------------|--|---|---|---------------|---|--|-----------------|--|
| | | Collections of Art, | HIStorical Trea | isures, | or Other | Similar A | ssets (con | linued) |
| 3 | Using the organization's accession and other items (check all that apply) | records, check any of the | lollowing that are a | a signilica | ant use of its | collection | | |
| a | Public exhibition | d ∐ Loan | or exchange progra | กร | | | | |
| b | Scholarty research | e 🗌 Other | | | | | | |
| c | Preservation for future generations | | | | | | · - | |
| 4 | Provide a description of the organization's collect XIV | lections and explain how | they further the orga | anızatıon | 's exempl pi | urpose in | | |
| 5 | During the year, did the organization solicit or assets to be sold to raise funds rather than to | receive donations of art, be maintained as part of | historical treasures, the organization's o | or other | sımılar ? | | Yes | □ No |
| 'P | Part IV, line 9, or reported a | | | | n answer | ed "Yes" t | o Form 99 | 0. |
| - <u>-</u> 1a | Is the organization an agent, trustee, custodia | | | | is not | | | |
| | inclided on Form 990, Part X? | no or other another to | | 2330 | .13 1101 | | Yes | □ No |
| b | If "Yes," explain the arrangement in Part XIV | and complete the following | n table | | - | •• •• | | [] NO |
| | | | , | | | | Amo | unt |
| c | Beginning balance | | | | | 1c | , , , , , | |
| d | | • • • • | | • | | 1d | | |
| e | Distributions during the year | | | • | | 10 | | |
| f | Ending balance | | •• | ••••• | | 16 | | |
| 2a | Did the organization include an amount on Fo | rm 990, Part X, line 21? | | | • ••• | | Yes | No |
| | if "Yes," explain the arrangement in Part XIV | , | | • • • • • • • | • ••• ••• | • • • • • • • • • • • • • | . 🗀 163 | v |
| Pa | irt V. Endowment Funds. Compl | ete if organization a | nswered "Yes" | to For | n 990, Pa | rt IV, line | 10. | |
| | | (a) Current year | (b) Prior year | 1 | o years back | (d) Three yes | | our years back |
| 1a | Beginning of year balance | | | | | 78.15 | | 13 14 15 TO |
| b | Contributions | | | 1:31(2) | J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | 300 600 200 | | 2.50 No. 12 197 |
| С | Investment earnings or losses | | | | -37/4 ° | 247892 A | # | A. A. S. |
| d | Grants or scholarships | | 対抗ながっまけれ | G#4.23 | | | 135 P. 1830 | 1 Sec. 3 Sec. 3 |
| e | Other expenditures for facilities | | | 1,1,5,4,3 | | 200 A 200 C | 407704 W. W. W. | F. 27. 27. 27. 27. 27. 27. 27. 27. 27. 27 |
| | and programs | | | | | | 经验验 | |
| 1 | Administrative expenses | | | | | | | 18 (18 18 18 18 18 18 18 18 18 18 18 18 18 1 |
| 9 | End of year balance | | | 100 | | 30 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 和歌的梦 | \$30°88 |
| 2 | Provide the estimated percentage of the year | end balance held as | | | | | | |
| а | Board designated or quasi-endowment 🕨 | % | | | | | | |
| b | Permanent endowment > % | | | | | | | |
| | Term endowment ▶ % | | | | | | | |
| 3a | Are there endowment funds not in the posses | sion of the organization th | nat are held and adr | ninistera | d for the | | | |
| | organization by | | | | | | _ | Yes No |
| | (i) unrelated organizations | • | | | | | 3a(|) |
| | (ii) related organizations | | | | | | 3a(i | 0 |
| þ | If "Yes" to 3a(u), are the related organizations | listed as required on Sch | edule R? | | | | <u>[3</u> 6 | |
| | Describe in Part XIV the intended uses of the | | | | | | | |
| <u> 22 H a</u> | rt.VI: Investments—Land, Buildi | | | | | | | |
| | Description of investment | (a) Cost or other basis (investment) | (b) Cost or of bases (othe | | | preciation | | ok vajue |
| 1 a | Land | | | | (| | | |
| b | Buildings | | | | | | | |
| С | Leasehold improvements | | | | | | | |
| d | Equipment | | 1 | | | | | |
| | Other | | | ,974 | 1 | 74,745 | | 917,229 |
| Total | . Add lines 1a-1e (Column (d) should equal Fo | orm 990, Part X, column | B), line 10(c) } | | | <u> </u> | •] | 917,229 |

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Schedule D (Form 990) 2008

| Financial derivatives and other financial products Closely-held equity intrests Diner Total. (Column (b) should equal Form 990, Part X, col. (b) line 12) Part VIII: Investments—Program Related. See Form 990, Part X, line 13. (a) Description of investment type Cost or end-of-year market value Total. (Column (b) should equal Form 990, Part X, col. (b) line 13) Part VIII: Investments—Program Related. See Form 990, Part X, line 13. (b) Book value Cost or end-of-year market value (c) Method of valueson Cost or end-of-year market value Cost or end-of-year market value (c) Mothod of valueson Cost or end-of-year market value (b) Book value (c) Notice (a) Cost or end-of-year market value (d) Amount (e) Rook value (e) Rook value (f) Amount (o) | Part VII Investments—Other Securities. See Form 9 (a) Description of security or category | (b) Book value | (c) Method of valuation |
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| | dule D (Form 990) 2008 SOUTHEAST MISSOURI DISTRICT I | | 98 | Page 4 |
|-----------|--|----------------------------------|--|--------------|
| | | o Financial Statements | _ | |
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | | 11 | |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | 2 | |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | | 3 | |
| 1 | Net unrealized gains (losses) on investments | | 4 | |
| 5 | Donated services and use of facilities | | 5 | |
| 6 | Investment expenses | | 6 | |
| 7 | Prior period adjustments | | 7 | |
| 8 | Other (Describe in Part XIV) | | 8 | |
| 9 | Total adjustments (net) Add lines 4-8 | | 9 | |
| 10 | Excess or (deficit) for the year per financial statements. Combine lines 3 and 9. | <u> </u> | 10 | |
| Pa | rt-XII. Reconciliation of Revenue per Audited Financial Stateme | ents With Revenue per Re | eturn | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | 18.79. (b) | |
| а | Net unrealized gains on investments | 1 2a 1 | 88 5 | |
| ิย | Donated services and use of facilities | 2b | 1.3% | |
| С | Recoveries of prior year grants | 2c | 12525 | |
| d | Other (Describe in Part XIV) | 2d | 1633 | |
| e | Add lines 2a through 2d | 201 | \$ 1.500 20 | |
| 3 | Subtract line 2e from line 1 | | 2e | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1 | 7 . 1 | 3 | |
| ٠, | | | 175 | |
| K | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | -6:4 | |
| b | Other (Describe in Part XIV) | 4b (| 122 | |
| _ | Add lines 4a and 4b | | 4c | |
| 5 • Da | Total revenue Add lines 3 and 4c (This should equal Form 990, Part 1, line 12) | | 5 | |
| | rt XIII > Reconciliation of Expenses per Audited Financial Statem | tents With Expenses per | Return | |
| 1 | Total expenses and losses per audited financial statements | | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | 1 1 | 33 | |
| a | Donated services and use of facilities | 2a | 433 | |
| ь | Prior year adjustments | 2b | -1873 -1873 | |
| С | Losses reported on Form 990, Part IX, line 25 | 2c | 域樹 | |
| d | Other (Describe in Part XIV) | 2d | 1 868-1 | |
| e | 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: | | 1 de 12 de 1 | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| p | Other (Describe in Part XIV) | 46 | | |
| | Add lines 4a and 4b | | 4c | |
| 5 | Total expenses Add lines 3 and 4c (This should equal Form 990, Part I line 18) | | 5 | |
| -Ra | rt-XIV. Supplemental Information | | | |
| Comp | late this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, li | ines 1a and 4, Part IV, lines 1b | | |
| and 2 | b, Part V, line 4. Part X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d | d and 4b. | | |
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SCHEDULE O (Form 990)

(FUIII 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008
Open to Public

Name of the organization Employer identification number SOUTHEAST MISSOURI DISTRICT FAIR AS 43-1179098 Form 990, Part I, Line 6 MEMBERS OF THE ASSOCIATION AND OTHERS THAT VOLUNTEER TO HELP CONDUCT THE FAIR. Form 990, Part VI, Line 6 - Classes of Members or Stockholders THE ORGANIZATION HAS A MEMBERSHIP. Form 990, Part VI, Line 7a - Election of Members and Their Rights THE MEMBERSHIP VOTES FOR THE OFFICERS.

CIST8BV225

Depreciation and Amortization

(Including Information on Listed Property)

ONIS 110 15/6 2172

| | a' Ramanua Servica (99) | | ▶ See se | parate instructions | Attach to yo | our tax return | _ | | Attachment Sequence (1) | 67 |
|-------------|--|-------------|---|--|-------------------------------------|--------------------|------------------|----------|----------------------------|--|
| Jame | e(s) shown on return SO | UTHEA | AST MISSOUR | RI DISTRICT F | AIR AS | | Identify 43-1 | | uper | |
| | ORM 990, LINE | | | | | | | | | |
| | | | se Certain Prop | erty Under Section | 179 | | | | | |
| | | | | ty, complete Part V | | u complete P | art I. | | | |
| 1 | Maximum amount. See the | | | | | | - | 1 | 250 | <u>,000</u> |
| 2 | Total cost of section 179 | | | | | | | 2 | | |
| J ¢ | Threshold cost of section | | • | • | lions) | | }- | 3 | 800 | ,000 |
| 5 | Recuction in limitation. S | | | • • | | | ··· - }- | 4 | . | |
| | Dollar limitation for tax year. | | n of property | | ig separately, s si (business us | | | 5 | Villa 12 mm | |
| 6 | (8) | Cescipad | To property | (0) 003 | N (DOSHROSS US | E CHRY) (C) C | lected cost | —€ | | |
| | | | | | | | | {} | | |
| 7 | Listed property Enter the | amount. | from line 29 | | | 7 | | ∤ફું | | 34 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| 8 | Total elected cost of sec | | | · · · · · · · · · · · · · · · · · · · | nd 7 | <u> </u> | T | 8 | Section State Com- | |
| 9 | Tentative deduction. Enti | | | | | | · · } | 9 | | |
| 10 | Carryover of disallowed of | | | · · · · · · · · · · · · · · · · · · · | • | · · · · · · · | ·· - | 10 | | |
| 11 | Business income limitation | | • | | zero) or line | 5 (see instruction | · - - | 11 | | · |
| 12 | Section 179 expense dec | | | | | • (see mandaloi | '''' | 12 | | |
| 13 | Carryover of disallowed of | | | | | 13 | | | J. W | - N. J. |
| Note | . Do nel use Part II or Part | t III below | for listed property fr | istead, use Part V | | L - T I | | 1, | <u> </u> | |
| ,Pa | rt,II* Special Dep | preciati | on Allowance a | nd Other Depreciat | ion (Do no | ot include list | ed proper | rtv) (3 | See instruction | ו פתנ |
| 14 | Special depreciation allow | | | | | | T | | | , <u>,</u> |
| | during the tax year (see i | | | ,,, | • | | } | 14 | | |
| 15 | Property subject to section | on 168(f)(| 1) election | • | , , | | ·· ·· · | 15 | | |
| 16 | Other depreciation (included | | | ··· · · · · · · · · · · · · · · · · · | • | | · . · | 16 | | |
| <u>`Pá</u> | irtill. MACRS De | preciati | ion (Do not inclu | ide listed property) | (See instr | uctions.) | | | | |
| | | | | Section A | | | | | | |
| 17 | MACRS deductions for a | ssets plac | ced in service in lax y | ears beginning before 20 | 800 | | L | 17 | 3 | 202 |
| 19 | If you are electing to group as | ny assets p | laced in service during t | he tax year into one or more | general asset a | ccounts, check her | • ▶ ∫ \$ | | Broke (C | 77.7 |
| | Sec | tion B—A | | vice During 2008 Tax Ye | | General Depre | ciation Sys | tem | | |
| | (a) Classification of proces | ny | (b) Month and year placed in service | (c) 6asis for depreciation (business/investment use only-see instructions) | (d) Recovery period | (e) Convention | (f) Metho | × (| g) Deprecation de | duction |
| 19a | 3-year properly | | | | ļ <u>.</u> | | | _ _ | | |
| b | 5-year property | | | 740 | | НУ | SL | | | 25 |
| <u>c</u> | 7-year property | | | 4,527 | 7.0 | HY | SL | _ | | 108 |
| <u>_d</u> _ | 10-year property | | | | | | | _ | | |
| <u> </u> | 15-year property | | | | ļ | | | | | |
| f_ | 20-year property | | | <u> </u> | | | | | | |
| 8- | | | m. 10. 10. 10. 17. 17. 17. 19. 19. 19. 19. 19. 19. 19. 19. 19. 19 | | 25 yıs | | S/L | | | |
| h | Pesidential rental | | | 4 | 27 5 yrs | MM | S/L | | | |
| | property | | | | 27 5 yrs | MM | S/L | | | |
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| | property | 00 C 4 | note Placed to State | D | 1 | MM | S/L_ | | | |
| | | UII C-AS | sets Placed in Servi | ice During 2008 Tax Yea | r using the A | Allernative Depr | | stem | | |
| 20a | Class life | | 1 . 2 | | 1.2 | ļ | S/L | | | |
| <u> </u> | 12-year | | | | 12 yrs | | S/L | - | | |
| | 40-year rt IV Summary (S | See inc | tructions) | | 40 yrs. | MM | S/L | | | |
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| 21 22 | Listed property Enter am Total Add amounts from | | | inne 10 and 20 : | (a) a== 4:= : | | · } | 21 | | |
| | Enter here and on the ap | | | | | | 1 | _ | 3 | 225 |
| 23 | For assets shown above | | | | rations—see | instr | <u>_</u> | 22 | 3, | 222 |
| | enter the portion of the ba | | | | | 23 | | 45 | 烈物由海 | * } 73 4 |
| or P | aperwork Reduction Act | | | | | , 23) | | <u> </u> | Form 456 | <u>ν</u> |