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Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

2010

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

For	calend	ar year 2010, or tax year beginning, a	and ending				
G (Check a		turn of a former public ress change	_ `	change	Final return	
D	ENT	oundation COUNTY LIVESTOCK EDUCATIONAL CIATION, INC.	L		43	loyer identification num -1608213 phone number (see page 1	
		nd street (or P O box number if mail is not delivered to street address	ss) Ro	om/suite	57:	3-308-5415	·
		CR 2540			C If exe	mption application is pend	ling, check here 🕨
	•	n, state, and ZIP code			D 1. Fo	preign organizations, checi	k here
	ALEI				1	oreign organizations meeti	_
		ype of organization. X Section 501(c)(3) exempt private			r	6% test, check here and at	
		n 4947(a)(1) nonexempt chantable trust Other taxable trust Other taxable trust Accounting method	E private foundation X Cash Acc	rual	•	rate foundation status was on 507(b)(1)(A), check her	
		ear (from Part II, col (c), Other (specify)	A Casii Acc	iuai		foundation is in a 60-mon	_
	ne 16) j		be on cash basis)			r section 507(b)(1)(B), che	
		Analysis of Revenue and Expenses (The total of	(a) Revenue and		l		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))	expenses per books	(b) Net inco		(c) Adjusted net income	for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
[[[]]	2	Check ► X if the foundation is not required to attach Sch B		<i>'</i>			
	3	Interest on savings and temporary cash investments	1,256		1,256	1,256	•
:3 1	4	Dividends and interest from securities					
	5a	Gross rents					
de	b	Net rental income or (loss)					
e	6a	Net gain or (loss) from sale of assets not on line 10			,	,	**
<u>_</u> ∂	b	Gross sales price for all assets on line 6a	· · · · · · · · · · · · · · · · · · ·		0		* · ·
	7	Capital gain net income (from Part IV, line 2)	** ,			· * · · · · · · · · · · · · · · · · · ·	
	8	Net short-term capital gain Income modifications	· ·			<u> </u>	
SCANCREVENUE	10a	- Collinson	<u> </u>				
奶	ь	Gross sales lese rejures (allowances O			~	·	
	C	Gross profit of (loss) (attach ashortitis)	··	,2	(*	·	
	11	Other income vattagh schedule)					
	12	Total. Add lines 1 through 11	1,256		1,256	1,256	
	13	Compensation of officers difectors, trustees, etc	0				
penses	14	Other employee salaries and wages					
)eu	15	Pension plans, employee benefits					
EXE	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule) STMT 1	225				
Ę	С	Other professional fees (attach schedule)					
štra	17	Interest	20	_			
Ĕ	18	Taxes (attach schedule) (see page 14 of the instructions) STMT 2	30				
<u>Ξ</u>	19	Depreciation (attach schedule) and depletion					
A	20	Occupancy Travel, conferences, and meetings		_		<u> </u>	
P	22	Printing and publications	26				
ā	23	Other expenses (att sch)					
Operating and Administrative	24	Total operating and administrative expenses.		· · · · · · · · · · · · · · · · · · ·	<u></u>		-
at		Add lines 13 through 23	281		0	0	0
be	25	Contributions, gifts, grants paid	1,230				1,230
0	26	Total expenses and disbursements. Add lines 24 and 25	1,511		0	0	
	27	Subtract line 26 from line 12:					`
	a	Excess of revenue over expenses and disbursements	-255				***
	b	Net investment income (if negative, enter -0-)			1,256		
	С	Adjusted net Income (if negative, enter -0-)				1,256	W.

For Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2010)

Fo	rm 990	O-PF (2010) DENT COUNTY LIVESTOCK EDUCATIONAL	43-16082	<u>13</u>		Page 2
, 1	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year		End o	f year
_		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Valu	ıe	(c) Fair Market Value
ı	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments	64,614	64,	359	64,359
	3	Accounts receivable ▶			-	
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable >		-		
- 1	_	Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
- 1	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see page 15 of the				
l	_	instructions)		_		
	7	Other notes and loans receivable (att schedule)				
,,	_	Less: allowance for doubtful accounts ▶ 0			••	
Assets	8	Inventories for sale or use				
SSI	9	Prepaid expenses and deferred charges				
٩	10a	Investments—U S and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				Manager and Array was and the second and a second as a second as
	40	Less accumulated depreciation (attach sch.)		_		
l	12	Investments—mortgage loans	-			
- 1	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis				arenaumentena mana manamana mana di d
	45	Less accumulated depreciation (attach sch.)				
	15	Other assets (describe)				
	16	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	64,614	6.1	359	64,359
\dashv	17	Accounts payable and accrued expenses	04,014	04,	333	04,339
	18	Grants payable				۶ ٪
Liabilities	19	Deferred revenue				*
	20	Loans from officers, directors, trustees, and other disqualified persons				
ä	21	Mortgages and other notes payable (attach schedule)				
	22					*
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0		0	·
\dashv	20	Foundations that follow SFAS 117, check here				4
ဖွ		and complete lines 24 through 26 and lines 30 and 31.				
ဋ	24	Unrestricted				
画	25	Temporarily restricted		· · · · · · · · · · · · · · · · · · ·		¢
B	26	Permanently restricted				
or Fund Balances		Foundations that do not follow SFAS 117, check here ▶ X				% >*
쾹		and complete lines 27 through 31.				<u> </u>
님	27	Capital stock, trust principal, or current funds				·
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
Se	29	Retained earnings, accumulated income, endowment, or other funds	64,614	64,	359	*
As	30	Total net assets or fund balances (see page 17 of the				
Net Assets		instructions)	64,614	64,	359	
Z	31	Total liabilities and net assets/fund balances (see page 17				
⅃		of the instructions)	64,614	_64,	359	!
	Part	III Analysis of Changes in Net Assets or Fund Balances				
1	Tota	I net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	st agree with			
		of-year figure reported on prior year's return)			1_	64,614
2	Ente	r amount from Part I, line 27a			2	-255
3	Othe	er increases not included in line 2 (itemize)			3	
4		lines 1, 2, and 3			4	64,359
5		reases not included in line 2 (itemize)			5	
_6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (l	b), line 30		6	64,359

Form 990 PF (2010) DENT COUI	NTY LIVESTOCK EDUCA Losses for Tax on Investmen		43-1608213		Page
(a) List and describe the	ne kınd(s) of property sold (e g , real estate, use, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr)	
1a N/A			D Donadon		
b					
С					
d					
_e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale	, , ,	Gain or (loss) us (f) minus (g)
a		<u>. </u>		<u> </u>	-
b					
С	· · · · · · · · · · · · · · · · · · ·				
d					
e					
Complete only for assets showing g	ain in column (h) and owned by the fou	indation on 12/31/6	59		(Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		t not less than -0-) or es (from col (h))
<u>a</u>					
<u>b</u>					
С					
d					
е			 	ļ,	<u> </u>
2 Capital gain net income or (net capi	tal loss) If gain, also enter in F If (loss), enter -0- in P	.		2	
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co	as defined in sections 1222(5) and (6): plumn (c) (see pages 13 and 17 of the i				
If (loss), enter -0- in Part I, line 8	(-) (pg			3	
Part V Qualification Und	er Section 4940(e) for Reduce	ed Tax on Net	Investment Inco	ome	
(For optional use by domestic private fo				•	
		,	,		27 / 2
If section 4940(d)(2) applies, leave this	part blank.				N/A
Was the foundation liable for the section if "Yes," the foundation does not qualify		• •	pase period?		Yes No
1 Enter the appropriate amount in each	ch column for each year; see page 18 c	of the instructions b	efore making any er	ntries.	
(a)	(b)		(c)		(d)
Base penod years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	of noncharitable-use as	sets (col	Distribution ratio (b) divided by col (c))
2009			 	- 1	(2, 222 2, 22. (2,)
2008					
2007					
2006				1	
2005					
	•				
2 Total of line 1, column (d)				2	
3 Average distribution ratio for the 5-y	ear base period—divide the total on lin	e 2 by 5, or by the			
•	been in existence if less than 5 years	, -, -, -, -, -, -, -, -, -, -, -, -, -,		3	
	,				
4 Enter the net value of noncharitable	-use assets for 2010 from Part X, line	5		4	
5 Multiply line 4 by line 3				5	
6 Enter 1% of net investment income	(1% of Part I, line 27b)			6	
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from P	art XII, line 4			8	
	ne 7, check the box in Part VI, line 1b,	and complete that	part using a 1% tax	rate. See the	
r art vi matidottona on page 10					

table Exempt operating foundations described in section 4940(4)(2), check here № [X] and enter TNA* on time 1 Date of nating or determination letter: 1.1 (70 7.95 (states here) yet letter if recessary—see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check N / A letter domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, coi. (b), 1 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 Subbita A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 A 1 Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0- Credist/Payments: 2 2010 estimated lax payments and 2009 overpayment credited to 2010 Exempt foreign organizations—ax withheld at source 6 Tax paid with application for extension of time to file (Form 8868) Backup withholding gromeously withheld 7 Total credits and payments. Add lines 8 at through 6 d Backup withholding gromeously withheld 7 Total credits and payments. Add lines 8 at through 6 d Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 9 Tax due. If the total of lines 5 and 8 is entre the amount owerpaid 10 Description of the section of the sec	-	990-PF (2010) DENT COUNTY LIVESTOCK EDUCATIONAL rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(c)		of the	instr	uctions		P	age 4
b Domestic foundations that meet the section 440(e) requirements in Part V, check here \(\) \ \] and enter 1's 60 Part 1, lan 27 \\ \) and enter 1's 60 Part 1, lan 27 \\ \) and enter 1's 60 Part 1, lan 27 \\ \) and enter 1's 60 Part 1, lan 27 \\ \) and the 1's 60 Part 1, lan 12 \\ \) and the 1's 60 Part 1, lan 12 \\ \) and the 1's 60 Part 1, lan 12 \\ \) and the 1's 60 Part 1, lan 12 \\ \) and the 1's 60 Part 1, lan 12 \\ \) and the 1's 60 Part 1, lan 12 \\ \) and the 1's 60 Part 1, lan 12 \\ \) and the 1's 60 Part 1, lan 1's 60 Part 1,				7	11130				
here ▶		Date of ruling or determination letter: 11/07/95 (attach copy of letter if nec	essary—see instructions)					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 1 co.d. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 4 Subbite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment incomes. Subtract line 4 from line 3 if zero or less, enter -0- 6 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment or cellided to 2010 6 Exempt foreign organizations—tax withheld at source 6 Exempt foreign organizations—tax withheld at source 6 Tax paid with application for extension of time to file (Form 8968) 6 Each glass organization for extension of time to file (Form 8968) 6 Each glass organization for extension of time to file (Form 8968) 7 Total credits and payments, Add lines 5 and 8 is more than line 7, enter amount own 9 Tax due, if the total of lines 5 and 8 is more than line 7, enter amount own 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: "Credited to 2011 estimated tax." Part VII.A. Is Statements Regarding Activities 12 Duning the tax year, did the foundation attempt to influence any national, state, or local legislation or did it part viii.A. Is a participate or intervene in any political campaign? 12 Duning the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 13 Duning the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 14 Duning the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participated or intervene in any political campaign? 15 Dull did to foundation file Form 1120-POL to this year? 16 The instructions for definition? 17 On t	b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	N/	Α	1	<u> </u>			
Part I, line 12, coil, (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Tax based with application for sections of the time for line 3 if zero or less, enter -0- Tax based with application for sections of the time for line 6 income in the control of th		here ▶ ☐ and enter 1% of Part I, line 27b							
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add tines 1 and 2 4 Subbite A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 6 Credits/Priments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 6 Exempt foreign organizations—tax withheld at source 6 Tax pad with applications for extension of time to file (Form 888) 6 Ed 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 8a through 64 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 7 Total credits and payments. Add lines 8a through 64 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 6 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 6 is more than line 7, enter amount ower paid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 During the tax year, dith the foundation intered to enter the amount of line 10 to 9 Credited to 2011 estimated tax ▶ 10 During the tax year, dith the foundation intered to influence any national, state, or local legislation or did it participate or inflavemen in any political campaign? 10 In the instructions for definition? 11 If the answer is "res" to 1 a or 1), attach a detailed description of the activities and copies of any materials published of distributed by the foundation in connection with the activities. 12 If "Yes," attach a detailed description of the activities 13 Has the foundation managers. ▶ \$ 14 Enter the anount (if any) 16 the foundation in connection with the activities. 15 Has the foundation managers. ▶ \$ 16 Enter the reimbursement	С		r 4% of				- -		
3 Add lines 1 and 2 Subtible A (noncem) lax (domestic section 4947(a)(1) lrusts and taxable foundations only Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- 6 Creditis/Payments: 5 2010 estimated tax payments and 2009 overpayment credited to 2010 6 Exempt froisign organizations—tax withheld at source 7 Tax pad with application for retension of their to file (Form 8888) 8 Exempt froisign organizations—tax withheld at source 8 B B									_
Subtle A nncome) tax (domestic section 4947(a)(1) fusts and taxable foundations only Others enter -0-) 5			/. Others enter -0-)						0
5 Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Credits/Payments: 2 2010 estimated fax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations—Lax withheld at source Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld Total credits and payments. Add lines 6 at brough 6d B Enter any penalty for underpayment of estimated back. Check here if them 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Tenter the amount of line 10 to be: Credited to 2011 estimated tax PRefunded 11 Defart VII-A Statements Regarding Activities Did it spend more than \$100 dump the year (either directly or indirectly) for political purposes (see page 19 of the enstructions for definition)? If the answer is "Yes" to a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Did the foundation file Form 1120-POL for they sear? Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. S Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. S Enter the amount of any of tax on political expenditures (section 4965) imposed during the year: (1) On the foundation file Form 1120-POL for they sear? Be Enter the amount (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. S Enter the allowable of the activities on foundation foundation has provided to the IRS? If "Yes," attach a detaile	-				-	ļ <u>.</u>			
6 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 Exempt foreign organizations—tax withheld at source Tax pad with application for extension of time to file (Form 8868) Backup withholding erroreously withheld Total credits and payments. Add lines 6a through 6d Total credits and payments. Add lines 6a through 6d Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Tax due. If the total of lines 5 and 8, enter the amount owerpaid Tax due. If the 11		• • • • • • • • • • • • • • • • • • • •	y Others enter -0-)			 	_		0
a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations—Lax withheld at source C Tax pad with application for extension of time to file (Form 8688) d Backup withholding erroneously withheld T Total credits and payments. Add lines 6s through 6d Enter any penalty for underpayment of estimated tax. Check here I From 2220 is attached T Tax dus. If the total of lines 5 and 6 is more than fine 7, online amount ower T Tax dus. If the total of lines 5 and 6 is more than fine 7, online amount overpaid C Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C D Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C D Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C D Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C D Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C D Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C D Overpayment. If line 7 is more than the total of lines 5 and 6, enter the amount overpaid C D Overpayment. If line 7 is more than 10 is a line					5				0
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If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ MO If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X		•				IV/A			x
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27)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X	9								
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses 10 X			s for Part XIV on page						
names and addresses 10 X							9	X	<u> </u>
	10		schedule listing their						
		names and addresses						0.55	X

	990:PF (2010) DENT COUNTY LIVESTOCK EDUCATIONAL 43-160821.	3			P	age 5
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			Ι —		_
• • • • • • • • • • • • • • • • • • • •	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			۱		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			11		-≏-
12	August 17, 2008?			12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applica	tion?		13	Х	
	Website address ► N/A	uo			21	
14	•	none no. I	▶ 573-3	08-	541	5
	1541 CR 2540		3,3 3	• •		
	Located at ▶ SALEM MO	ZIP+4	65560)		
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041—Check here					▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	▶	15			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority	_	<u> </u>		Yes	No
	over a bank, securities, or other financial account in a foreign country?			16		Х
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter					
	the name of the foreign country ▶					
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.				Yes	No
1a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			ŀ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_	_			
	disqualified person?	Yes	X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No		^	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		_			
	the benefit or use of a disqualified person)?	Yes	X No			İ
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			*		
	foundation agreed to make a grant to or to employ the official for a period after			1		
	termination of government service, if terminating within 90 days)	Yes	X No		*	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulati	ons			,	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?		N/A	1b		ļ
	Organizations relying on a current notice regarding disaster assistance check here		▶ 🗌			,
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that					* **
	were not corrected before the first day of the tax year beginning in 2010?		N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			^		*
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and	_				
	6e, Part XIII) for tax year(s) beginning before 2010?	Yes	X No		,	
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					* *
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)					,
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					* ,
	all years listed, answer "No" and attach statement—see page 22 of the instructions)		N/A	2b	_	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here					
	▶ 20 , 20 , 20 , 20					ŕ
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	_				
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or					l`
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year penod (or longer penod approved by the					l
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of					ľ
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		·=			
	foundation had excess business holdings in 2010.)		N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes			4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			<u> </u>		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	107		4b	1	ΙX

Form 990-PF (2010)

	990:PF(2010) DENT COUNTY LIVESTOCK EDUCATION		608213		Page 6
Pa	art VII-B Statements Regarding Activities for Which Form	1720 May Be R	Required (con	tinued)	
5a	During the year did the foundation pay or incur any amount to:				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?		Yes X No	į
	(2) Influence the outcome of any specific public election (see section 4955); or t	o carry on,			
	directly or indirectly, any voter registration drive?			Yes X No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes X No	
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in	_		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instr	uctions)		Yes X No	
	(5) Provide for any purpose other than religious, chantable, scientific, literary, or	educational	_		
	purposes, or for the prevention of cruelty to children or animals?			Yes X No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under	er the exceptions d	escribed in		
	Regulations section 53 4945 or in a current notice regarding disaster assistance	(see page 22 of th	e instructions)?	_N/A	5b
	Organizations relying on a current notice regarding disaster assistance check he	ere		▶ 🗌	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	m the tax			
	because it maintained expenditure responsibility for the grant?		N/A 🗌	Yes 🗌 No	
	If "Yes," attach the statement required by Regulations section 53.4945-5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	y premiums			and the same of th
	on a personal benefit contract?			Yes X No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit contr	act?		6b X
	If "Yes" to 6b, file Form 8870.				_
7a	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		Yes X No	<u> </u>
_b	If Yes, did the foundation receive any proceeds or have any net income attributa	ble to the transacti	on?	N/A	7b
Pa	art VIII Information About Officers, Directors, Trustees, Fo	undation Man	agers, Highly	Paid Employe	es,
	and Contractors				
1	ist all officers, directors, trustees, foundation managers and their compensa-	tion (see page 22	of the instruction	ns).	
		(b) Title, and average	(c) Compensation	(d) Contributions to	(-) 5
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred	(e) Expense account, other allowances
		devoted to position		compensation	
SI	CE STATEMENT 3				
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				-	
		1	ł	+	
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				1	
	······································	<u> </u>	<u> </u>	<u> </u>	<u> </u>
2	Compensation of five highest-paid employees (other than those included on	line 1 — see pag	e 23 of the instru	ictions).	
	If none, enter "NONE."		_	Τ	
		(b) Title, and average		(d) Contributions to employee benefit	(e) Expense account,
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other allowances
				compensation	
NO	DNE				
			_	<u> </u>	
		1			
				 	
			ľ		
				 	
_	I (L	l	<u> </u>	
ı ota	Il number of other employees paid over \$50,000				<u>▶</u> 0
				For	m 990-PF (2010)

Form 990-PF (2010) DENT COUNTY LIVESTOCK EDUCATIONAL 43-1608213	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid El and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "No	ONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	•
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 AGRICULTURAL SCHOLARSHIP ACTIVITIES (RECIPIENTS LISTED IN PART XV)	1,200
FAIR TROPHIES FUNDED FOR COUNTY 4-H PROGRAM	30
3	30
4	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See page 24 of the instructions.	

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,
see page 24 of the instructions.)	
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc,	
purposes·	
a Average monthly fair market value of secunties 1a	0
b Average of monthly cash balances 1b	64,487
c Fair market value of all other assets (see page 25 of the instructions)	. 0
d Total (add lines 1a, b, and c)	64,487
e Reduction claimed for blockage or other factors reported on lines 1a and	-
1c (attach detailed explanation)	
2 Acquisition indebtedness applicable to line 1 assets 2	0
3 Subtract line 2 from line 1d	64,487
4 Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of	
the instructions)	967
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5	63,520
6 Minimum investment return. Enter 5% of line 5	3,176
Part XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating	
foundations and certain foreign organizations check here	
1 Minimum investment return from Part X, line 6	
2a Tax on investment income for 2010 from Part VI, line 5	
b Income tax for 2010. (This does not include the tax from Part VI)	
c Add lines 2a and 2b	
3 Distributable amount before adjustments Subtract line 2c from line 1 3	
4 Recoveries of amounts treated as qualifying distributions 4	
5 Add lines 3 and 4	
6 Deduction from distributable amount (see page 25 of the instructions)	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,	
line 1	
Part XII Qualifying Distributions (see page 25 of the instructions)	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
a Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1,230
b Program-related investments—total from Part IX-B	•
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
purposes 2	
3. Amounts set aside for specific charitable projects that satisfy the	
a Suitability test (prior IRS approval required) 3a	
b Cash distribution test (attach the required schedule) 3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	1,230
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	
Enter 1% of Part I, line 27b (see page 26 of the instructions)	0
6 Adjusted qualifying distributions. Subtract line 5 from line 4	1,230
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	<u> </u>
qualifies for the section 4940(e) reduction of tax in those years	

Form **990-PF** (2010)

DCLIVESTOCK 05/10/2011 43-1608213 Form 990-PF (2010) DENT COUNTY LIVESTOCK EDUCATIONAL Undistributed Income (see page 26 of the instructions) (b) (c) (d) Corpus Years prior to 2009 2009 Distributable amount for 2010 from Part XI, 2010 line 7 Undistributed income, if any, as of the end of 2010 a Enter amount for 2009 only b Total for prior years 20 ____ _ , 20___ Excess distributions carryover, if any, to 2010. a From 2005 **b** From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e Qualifying distributions for 2010 from Part XII, line 4. ▶ \$ a Applied to 2009, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see page 26 of the instructions) c Treated as distributions out of corpus (Election required—see page 26 of the instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount-see page 27 of the instructions e Undistributed income for 2009. Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions) Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a Analysis of line 9.

Excess from 2006 Excess from 2007 Excess from 2008 Excess from 2009 Excess from 2010

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines: SEE STATEMENT 5

SEE STATEMENT 6

factors.

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of **Amount** any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year NONE BRITTANY FLETCHER 11595 ST. RT V EDUC SCHOLARSHIP 600 ROLLA MO 65401 KIRSTEN OWEN NONE EDUC SCHOLARSHIP 15175 CR 3120 600 ST. JAMES MO 65559 DENT COUNTY 4-H COUNCIL NONE DENT COUNTY JUDICIAL BLD FAIR TROPHIES 30 SALEM MO 65560 3a 1,230 Approved for future payment N/A ▶ 3b Total

Part XVI-A Enter gross amo	ounts unless otherwise indicated.	Unrelated b	usiness income	Exclude	d by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program ser				┼		the instructions)
a		-		-		 -
<u> </u>		-				
d		- 		 		
ů				 		
f		-				<u> </u>
· -	d contracts from government agencies	- -				
-	dues and assessments			+		
	avings and temporary cash investments			14	1,256	
	nd interest from securities			1 = -	2,200	
	come or (loss) from real estate.		. D	.3.	The state of the s	19 12 1 No. 1 No. 1 1 1
	anced property					
	t-financed property					
	come or (loss) from personal property					
7 Other invest						
8 Gain or (loss	s) from sales of assets other than inventory				_	
9 Net income	or (loss) from special events					
10 Gross profit	or (loss) from sales of inventory			<u> </u>		
11 Other reveni	ue a			<u> </u>		<u> </u>
		_		ļ		
				ļ		
				 	-	
e		4.7. 3880				
	d columns (b), (d), and (e)	*****	()	1,256	
13 Total. Add li	ne 12, columns (b), (d), and (e)				13	1,256
					_	
(See worksheet	in line 13 instructions on page 29 to verify calcula		at of Evampt D			
See worksheet Part XVI-B	Relationship of Activities to the	Accomplishme				
(See worksheet		Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
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See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
See worksheet Part XVI-B Line No.	Explain below how each activity for which incon accomplishment of the foundation's exempt put	Accomplishme ne is reported in col	ımn (e) of Part XVI	-A contrib	outed importantly to the	
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DCLIVESTOCK DENT COUNTY LIVESTOCK EDUCATIONAL
43-1608213
FYE: 12/31/2010

5/10/2011

	Charitable Purpose	\$ \$		Charitable Purpose	0 0
Lees	Adjusted Net	\$ \$		Adjusted Net	0 O
Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees	Net Investment	0	it 2 - Form 990-PF, Part I, Line 18 - Taxes	Net Investment	0
Form 990-PF, Part I, I	Total	225 \$ 225	ant 2 - Form 990-PF, F	Total	30 30
Statement 1 -		w w	Statemen		FEE \$
	Description	INDIRECT ACCOUNTING FEES TOTAL		Description	STATE ANNUAL REGISTRATION FEE TOTAL

DCLIVESTOCK DENT COUNTY LIVESTOCK EDUCATIONAL 43-1608213 FYE: 12/31/2010	EDUCATIONAL Federal St	atements			5/10/2011
Statement 3 - Form 99	Statement 3 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	- List of Offic	ers, Directors, Trus	tees, Etc.	•
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
GEORGE A BARNITZ 2699 CR 2070 LAKE SPRING MO 65532	PRESIDENT	0.25	0	0	0
BILL HEADRICK 2686 CR 2400 SALEM MO 65560	V PRESIDENT	0.25	0	0	0
DARRELL SKILES 1541 CR 2540 SALEM MO 65560	SECY/TREAS.	0.25	0	0	0
CHARLES TRIPLETT 945 CR 2440 SALEM MO 65560	BOARD MEMBER	0.25	0	0	0
LEE SOUTHARDS 570 CR 2530 SALEM MO 65560	BOARD MEMBER	0.20	0	0	0
ALAN STUCKMEYER 1820 STONEWALL RD SALEM MO 65560	BOARD MEMBER	0.00	0	0	0
LEROY KUNKEL 1061 CR 6350 SALEM MO 65560	BOARD MEMBER	0.00	0	0	0
JIM FREEMAN 535 CR 5190 SALEM MO 65560	BOARD MEMBER	0.00	0	0	0
CHARLES CAMPBELL 20170 HWY 32 LICKING MO 65542	BOARD MEMBER	0.00	0	0	0
		r			င

DCEIVESTOCK DENT COUNTY LIVESTOCK EDUCATIONAL
43-1608213 Federal Statements

5/10/2011

FYE: 12/31/2010

Statement 4 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

APPLICATIONS SHOULD BE SUBMITED IN WRITING AND INCLUDE BIOGRAPHICAL INFORMATION, FUTURE PLANS FOR COLLEGE AND POST GRADUATION

Statement 5 - Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

THE DEADLINE FOR SUBMISSIONS IS A FEW WEEKS PRIOR TO THE END OF THE SCHOOL YEAR FOR THE BOARD TO ADEQUATELY REVIEW APPLICATIONS.

Statement 6 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

THE AWARDS ARE MADE TO QUALIFYING INDIVIDUALS WITHIN A GEOGRAPHICAL REGION OF SALEM, MO.