

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public

Inter	mal Revenue Serv	➤ The organization may	y have to use a copy of this ret	urn to satisfy stat	e reporting requi	rements	Inspection
A	For the 2010 cal	ndar year, or tax year beginning 0	8/01/10 , and ending	07/31/1	.1	_	
	Check if applicable	Name of organization				D Employe	er identification number
$\neg$	Address change	•	STERN LIVESTOCK EX	POSITION			
$\equiv$	,	Doing Business As				23-7	207500
$\equiv$	Name change	Number and street (or P O box if mail is	not delivered to street address)		Room/suite	E Telephor	
$\sqcup$	initial return	P.O. BOX 2499	,		T COMPOSITO		265-1867
	Terminated	City or town, state or country, and ZIP + 4	4				
П	Amended return	MONTGOMERY	AL 36102-2499			G Gross receipt	s\$ 635,283
Ξ.		Name and address of principal officer				O Gross receipt	
Ш	Application pending	Name and address of principal officer			H(a) Is this a g	roup return for affil	lates? Yes X No
					H(b) Are all a	affiliates include	d? Yes No
					1 ''		(see instructions)
_	Tax-exempt statu	501(c)(3) X 501(c) ( 5 )	(insert no ) 4947(a)(1)		=	•	(,
÷	Website: ► N	, = -	(insert no ) 4947(a)(1)	or 527	<b>⊢</b>		
	·		on Other			exemption num	
*****	Form of organization  Part I Su	X Corporation Trust Associated	on Other		Year of formation		State of legal domicile
	T			<del></del>			
	77	scribe the organization's mission or murage and promote live	_	I mamkatina	_		
မ္သ	Bucc	irage and promote live	stock breeding and	ı marketinç	3		•
nan	l					-	
/eri		. —					
Activities & Governance	2 Check th	· · · · · · · · · · · · · · · · · · ·	ntinued its operations or dispos	ed of more than 2	25% of its net as		
ಷ	3 Number	f voting members of the governing bo	ody (Part VI, line 1a)				114
es	4 Number	f independent voting members of the	governing body (Part VI, line 1	b) .		4	114
V.	5 Total nur	ber of individuals employed in calend	lar year 2010 (Part V, line 2a) <sub>i</sub>		FII 120	5	0
Ċ	6 Total nur	ber of volunteers (estimate if necessa	ary)	REC	EIVED	6	114
•		elated business revenue from Part VIII	•	1 234 4 2		- , 7a	
		ated business taxable income from Fo		_	- 0042	7b	0
				I NUL 18	L ZUI Prior Ye		Current Year
a)	8 Contribu	ons and grants (Part VIII, line 1h)				×	
Revenue	9 Program	service revenue (Part VIII, line 2g)	•	OGD	EN 1 43	2,536	379,696
Ş.	10 Investme	nt income (Part VIII, column (A), lines	3. 4. and 7d)			3,349	35,786
æ	11 Other rev	enue (Part VIII, column (A), lines 5, 6	•		<del></del>	-,	
		enue – add lines 8 through 11 (must e		12)	44	5,885	415,482
_	1	id similar amounts paid (Part IX, colur		.12)		2,250	113,102
	i .	paid to or for members (Part IX, colum		2,230			
	45 0-1	•	* **	40)			
nses	15 Salaries,	other compensation, employee benefi		-10)		<del>-</del>	
ens	16a Profession	nal fundraising fees (Part IX, column (	• • •				<del></del>
Expe	<b>b</b> lotal fun	fraising expenses (Part IX, column (D					
ш	17 001010	enses (Part IX, column (A), lines 11a	·			2,779	430,644
	1	enses Add lines 13–17 (must equal F			44	5,029	430,644
	19 Revenue	less expenses Subtract line 18 from	line 12		<del> </del>	856	-15,162
ssets or		-1- (D-1 V l- 10)			Beginning of Cu		End of Year
.88e	20 lotalas:	ets (Part X, line 16)		•	87	0,643	869,378
	김	lities (Part X, line 26)				1,026	0 50 0 70
يك		s or fund balances Subtract line 21 fr	rom line 20	<del></del>	] 86	9,617	<u>869,378</u>
		nature Block		<del></del>			
		erjury, I declare that I have examined this re				of my knowledge	e and belief, it is
<u>-</u> t	rue, correct, and co	mplete Declaration of preparer (other than	officer) is based on all information o	f which preparer has	s any knowledge.		/_/_
5		IN- 25 mell	<u> </u>			6/	1//2
Si	gn 🖊 :	ignature of officer				Date	, ,
•	еге	William Powell					
;		ype or print name and title					
<del>,</del> —	Print/Tv	pe preparer's name	Proparer's signature		Date	Check	ıf PTIN
Pa	آ أ سن	E. BLAKE, CPA	Ja . 5 /	Rate CY		<i>1</i> .	Dloyed P00144882
	eparer Firm's		ORDEN & COMPANY			Firm's EIN	63-0781330
	se Only		STREET	1		FIIII S EIN F	03-010T330
	-						221 021 661
<u></u>				<del></del> -		Phone no	334-834-6640
		s this return with the preparer shown					Yes No

SEE ATTACHED EXPLANATION FOR LATE FILING

	SOUTHEASTERN LIVE		23-7207500		Page
	atement of Program Service				
		a response to any question	in this Part III	<del></del>	
	be the organization's mission re and promote liv	estock breeding an	d marketing		
<b>_</b>	, o aa <u>p</u> _oooo				
	· · · · · · · · · · · · · · · · · · ·			<del></del>	
	nization undertake any significant pi 30 or 990-EZ?	ogram services during the year which	were not listed on the		□ v <b>∵</b>
	cribe these new services on Schedu	ile O			Yes X No
		significant changes in how it conduct	s, any program		
services?	_				Yes X No
	cribe these changes on Schedule O				
		each of the organization's three large			
		n 4947(a)(1) trusts are required to rep	oort the amount of grants	and allocations to	
others, the to	tal expenses, and revenue, if any, f	or each program service reported			
4a (Code	) (Expenses \$	including grants of \$	<u> </u>	(Revenue \$	
		support to local			
	ural organization				•
		•			
			•		
41 40 1		<del></del>			
4b (Code	) (Expenses \$	including grants of \$	)	(Revenue \$	
			4		
			•		
				••	
					-
4c (Code	) (Expenses \$	including grants of \$	)	(Revenue \$	
		•	•		
				•	
				•	
					-
				•	
4d Other program	m services. (Describe in Schedule (	0)			
(Expenses \$	•	ling grants of \$	) (Revenue \$		)
	m service expenses				
4A					Form <b>990</b> (2010

### Form 990 (2010) SOUTHEASTERN LIVESTOCK EXPOSITION

Pa	art IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Ì	
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	j	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		l	
	Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"		l	
	complete Schedule D, Part I	6	ł	X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, 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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-			
	endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
þ				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d				77
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	448		v
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		X
140	Schedule D, Parts XI, XII, and XIII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes." and if	IZa		
U	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	<u>.</u>	14a		X
b	Did the organization maintain an office, employees, or agents outside or the office office of the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	. 70		
-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
-	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	-	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		1	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	- 1	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	]	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		_X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

19? Note. All Form 990 filers are required to complete Schedule O

	State Chapter of Degree of Capating (Capating of				<u> </u>	age 4
Pi	art IV Checklist of Required Schedules (continued)				Vaa	
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations				Yes	No
••	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II			21		x
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States					
_	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the					
-	organization's current and former officers, directors, trustees, key employees, and highest compensated					
	employees? If "Yes," complete Schedule J			23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			23		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b					
	through 24d and complete Schedule K. If "No," go to line 25			24a		x
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			270		
•	to defease any tax-exempt bonds?			24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			270		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I			25a		
b				200		
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?					
	If "Yes," complete Schedule L, Part I			25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or					
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II			26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,					
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?					
	If "Yes," complete Schedule L, Part III			27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,					
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)					
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete					
	Schedule L, Part IV			28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)					
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV			28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M			29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified					
	conservation contributions? If "Yes," complete Schedule M			30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,					
	Part I .			31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"					
	complete Schedule N, Part II			32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations					
	sections 301 7701-2 and 301 7701-3? 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, III,					
	IV, and V, line 1			34		<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			35		<u>X</u>
а	Did the organization receive any payment from or engage in any transaction with a					
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,		-			
	Part V, line 2	∐ Yes	X No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable					
	related organization? If "Yes," complete Schedule R, Part V, line 2			36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,					
	Part VI			37	<u> </u>	<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and					

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V 1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? X 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? X 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3ь 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a If "Yes," enter the name of the foreign country. See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or X gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? e 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 Sponsoring organizations maintaining donor advised funds. 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: а Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b С Enter the amount of reserves on hand 13c Did the organization receive any payments for indoor tanning services during the tax year? 14a X If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b

Form 990 (2010)

334-265-1867

MONTGOMERY

20

and financial statements available to the public

organization: DR. WILLIAM POWELL

State the name, physical address, and telephone number of the person who possesses the books and records of the

600 ADAMS AVENUE

AL 36104

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

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees, officers, key employees; highest compensated employees, and former such persons

(A) Name and Title	(B) Average	(C) Position (check all that apply)						( <b>D)</b> Reportable	<b>(E)</b> Reportable	(F) Estimated
	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer			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
(1) Camp Powers										
President	1.00							0	0	0
(2) Bob Helms						1 1				
Pres-elect	1.00							0	0	0
(3) Billy Sellers						1 1				
Vice-Pres	1.00							0	0	0
(4) LD Fitzpatrick		ł								
Treasurer	1.00							0	0	0
(5) Billy Powell								·	-	
Ex-Director	3.00					l l		0	0	0
(6) David Crawford										
Director	1.00							0	0	0
(7) Larry Gafford										
Director	1.00		<u> </u>					0	0	0
(8) John M. Trotman								- "	· · ·	
Director	1.00			<u> </u>				0	0	0
(9) Harold Pate										•
Director	1.00		L					0	0	0
(10) Phillip Hardee	-				ľ	.				
Director	1.00							0	0	0
(11) George Smith										,
Director	1.00	_	L					0	0	0
(12) Bill Johnson		ĺ		Į.						
Director	1.00							0	0	0
(13) Woody Bratlett		i _			_					
Director	1.00							0	0	0
(14) Ham Wilson, Jr										
Director	1.00			L	L			0	0	0
(15) J. Lee Alley										
Director	1.00							0	0	0
(16) Tim Coe										
Director	1.00				[			0	0	0

Page 8
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Part VII Section A. Officers	s, Directors, Tru	stees	s, Ke	у Е	mplo	yees	s, ar	nd Highest Compensated	Employees (continued)			
(A) Name and Title	(B) Average hours per	$\vdash$	_	(chec		that a		(D) Reportable compensation	(E) Reportable compensation from		(F) stimated mount of	
•	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	corr fi org an	other npensation rom the panization d related anizations	
(17) Nealy Barrett Director	1.00							0	0			0
(18)												<u>-</u>
(19)												
(20)											<del></del>	
(21)	-											
(22)				<del>                                     </del>								
(23)												
(24)											<u></u>	
(25)										,		
(26)										<del> </del>		
(27)												
(28)												
1b Sub-total	-4- 4- D-+1/II C	I		<u> </u>	<u> </u>	<u> </u>	<b>&gt;</b>					
<ul><li>c Total from continuation she</li><li>d Total (add lines 1b and 1c)</li></ul>	ets to Part VII, S	ecuc	on A									
Total number of individuals (ii reportable compensation from				thos	e lis	ted a	bov	re) who received more than	\$100,000 in	1		- <del></del>
3 Did the organization list any f	· -			ructo		.07.0	male	nyon or highest company	tod		Yes	s No
employee on line 1a? If "Yes, 4 For any individual listed on line	" complete Sche	dule	J for	suc	h ind	dividu	ıal			-	3	X
organization and related orga individual	nızatıons greater	than	\$15	50,00	00?	f "Ye	s," (	complete Schedule J for su	ch		4	х
5 Did any person listed on line for services rendered to the o									r ındıvidual	İ	5	x
Section B. Independent Contract												
Complete this table for your fi compensation from the organ	ization	ensa	ted	inde	pend	lent o	cont					
Name and	(A) d business address	····						Descrip	(B) https://doi.org/10.1009/10.1009/10.1009/10.1009/10.1009/10.1009/10.1009/10.1009/10.1009/10.1009/10.1009/10.1009		(C) Compens	sation
	-											<del></del> -
							_					
2 Total number of independent	contractors (not	udina	, but	not	lum:4	od +-	the	ea listed above) who				
received more than \$100,000		-							0		Form <b>99</b>	0 (2010)
										,	J. 111 3 3	<b>-</b> (∠∪ (∪)

Pa	rt V	III Staten	nent of Reve	nue	<del></del>					
		*					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
S S	12	Federated can	nnaigne	1a				levellue		512, 513, or 514
au		Membership d		1b						
P,E		•	•	$\vdash$						
캶		Fundraising ev		1c						
nig Bil		Related organ		1d						
Sis		Government grants (	•	1e						
펄	T	All other contribution and similar amounts								
팔히				_1f_						
泛티	g		ns included in lines 1a-	1f ;						
<u></u>	<u>h</u>	Total. Add line	es 1a-1f			<u> </u>				
ğ	_					Busn. Code		010 000		
Seve	2a		dmissions				210,230	210,230		
8	b	Sponsor	-				91,225	91,225	·	
ž	С		ION FEES AND		•		30,110			30,110
Program Service Revenue   Contributions, gifts, grants and other similar amounts	d						18,910	18,910		
	е	•	rogram adver		g		13,875	13,875		
jog		. •	am service reve	nue	-		15,346	15,346		
_		Total. Add line					379,696			
	3		come (including	divider	ids, intere	est,		45.405		
	_	and other simi	,				15,405	15,405		
	4		nvestment of tax	-exem	pt bond p	roceeds -		-		
	5	Royalties								
	_		(ı) Real		(11) F	Personal				
	6a	Gross Rents								
	b	Less rental exps								
	C	Rental inc or (loss)		l						
	d 7a	Net rental inco				<u> </u>				
		sales of assets	(i) Securities		(11)	Other				
		other than inventory	240	182						
	b	Less cost or other								
		basis & sales exps	219,							
	_	Gain or (loss)		381	<u> </u>					
	d	Net gain or (lo	•	. 1			20,381	20,381		
91	Вa		om fundraising eve	nts						
Jen J		(not including \$								
Re			reported on line 1c	j						
Other Reven		See Part IV, line		a						
ö		Less direct ex	•	bĺ			•			
	i .		(loss) from fund		events	<u> </u>			<del> </del>	
	9a		om gaming activitie	- 1						
		See Part IV, line		a						
		Less direct ex	· ·	þ						
			(loss) from gam	ing ac ا	tivities	<b>&gt;</b>				
	10a		f inventory, less							
		returns and all		a						
		Less cost of g		þĮ						
	С		(loss) from sale		ventory	<b>•</b>				
		Misc	ellaneous Revenue	-		Busn. Code				
	11a							-		
	b									
	C									
	d	All other reven	· ·			L				
	e	Total. Add line	-			<b>P</b>	415 466	305 353		26
	12	rotal revenue	. See instruction	าร		<u> </u>	415,482	385,372	0	30,110

Form 990 (2010)

#### **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 (D)

		(4)	(D)	(2)	
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	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,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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			-	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)			:	
а	Management	46,387			
b	Legal	4 500			
	Accounting .	4,620			
d					
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				-
13	Office expenses	51,755			
14	Information technology .				
15	Royalties	40.400			
16	Occupancy	42,133			
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		-		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	11 501			
22	Depreciation, depletion, and amortization	11,521			
23	Insurance				
24	Other expenses Itemize expenses not covered			<u> </u>	
	above (List miscellaneous expenses in line 24f If				
	line 24f amount exceeds 10% of line 25, column			Ī	
	(A) amount, list line 24f expenses on Schedule O)	07 700			<u> </u>
a	Rodeo stock contractor	97,700		<u> </u>	
b	Coliseum rental Other rodeo expenses	65,227 57,641			
C	Meetings	57,641 21,119			
d		13,068			
e	Insurance	19,473			
f	All other expenses		0	0	
25	Total functional expenses. Add lines 1 through 24f	430,044	<u> </u>	J	0
26	Joint costs. Check here ► if following SOP 98-2 (ASC 958-720) Complete this line			1	
	only if the organization reported in column				
	(B) joint costs from a combined educational				
DAA	campaign and fundraising solicitation	<u> </u>	<u> </u>	<u> </u>	5

P	art X	Balance Sheet				,	rage 11
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing				1	
	2	Savings and temporary cash investments			19,105	2	40,793
	3	Pledges and grants receivable, net		1		3	
	4	Accounts receivable, net		1	5,554	4	······································
	5	Receivables from current and former officers, directors,	-				
	1	employees, and highest compensated employees. Con	plete Part II of				
		Schedule L		ļ		5	
	6	Receivables from other disqualified persons (as defined					
		4958(f)(1)), persons described in section 4958(c)(3)(B),	-				
	ŀ	employers and sponsoring organizations of section 501					
S		employees' beneficiary organizations (see instructions)		]		6	
set	7	Notes and loans receivable, net			·	7	
Assets	8	Inventories for sale or use _		8			
•	9	Prepaid expenses and deferred charges	1 * 1	ļ		9	
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	841,179			
	b	Less accumulated depreciation	10b	532,388	320,312		<u>308,791</u>
	11	Investments—publicly traded securities			525,672	11	519,794
	12	Investments—other securities See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets		<u> </u>		14	
	15	Other assets See Part IV, line 11		<u> </u>		15	
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)		870,643		869,378
	17	Accounts payable and accrued expenses	•		1,026	17	
	18	Grants payable		1		18	·
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		1		20	<del> </del>
<u>es</u>	21	Escrow or custodial account liability Complete Part IV				21	
Liabilities	22	Payables to current and former officers, directors, truste	<u> </u>				
ap		employees, highest compensated employees, and disq	ualified persons				
⊐		Complete Part II of Schedule L		-		22	
	į.	Secured mortgages and notes payable to unrelated thir	-	-		23	
	24	Unsecured notes and loans payable to unrelated third p	parties	-		24	
	25	Other liabilities Complete Part X of Schedule D		-		25	
40	26	Total liabilities. Add lines 17 through 25	<del></del>		1,026	26	0
Balances		Organizations that follow SFAS 117, check here ▶	and complete				
ä		lines 27 through 29, and lines 33 and 34.					
ë	27	Unrestricted net assets		-		27	
	28	Temporarily restricted net assets	-		28		
Ĕ	29	Permanently restricted net assets	ļ		29	······································	
正	l	Organizations that do not follow SFAS 117, check he	ere ► X and				
ō		complete lines 30 through 34.			_		
ets	30	Capital stock or trust principal, or current funds			<del></del>	30	
SS(	31	Paid-in or capital surplus, or land, building, or equipmen	•	. }	000 015	31	0.60 250
Ä	32	Retained earnings, endowment, accumulated income,	or other funds	}	869,617	32	869,378
Net Assets or Fund	33	Total net assets or fund balances		}	869,617		869,378
_	34	Total liabilities and net assets/fund balances		1	870,643	34	869,378

Form **990** (2010)

om	1 990 (2010) SOUTHEASTERN LIVESTOCK EXPOSITION 23-7207500			Page <b>12</b>
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			X
	•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>5,482</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		644
3	Revenue less expenses Subtract line 2 from line 1	3		<u>,162</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		617
5	Other changes in net assets or fund balances (explain in Schedule O)	5	14	1,923
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,			
	column (B))	6	869	3,378
Pa	Int XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
			<u> </u>	es No
1	Accounting method used to prepare the Form 990		$ \parallel$	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
_	Schedule O			
	Were the organization's financial statements compiled or reviewed by an independent accountant?		_ <del>                                    </del>	X
	Were the organization's financial statements audited by an independent accountant?	•	2b	<u> </u>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		1 1.	_
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a separate basis, consolidated basis, or both			
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form \$	90 (2010)

#### SCHEDULE C (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

2010

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► See separate instructions.

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only

#### If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

• Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• 5	Section 501(c)(4), (5), or (6) organizations Complete Part III								
Nai	ne of organization SOUTHEASTERN LIVESTOC			Employer identifi 23 - 72075	00				
Pa	rt I-A Complete if the organization is exem	pt under section 501(c	or is a section	on 527 organizatio	on.				
1	Provide a description of the organization's direct and indire	ct political campaign activities	ın Part IV.						
2	Political expenditures			<b>▶</b> \$ _					
3	Volunteer hours .								
Pa	rt I-B Complete if the organization is exem	pt under section 501(c	)(3).		<u></u>				
1	Enter the amount of any excise tax incurred by the organization	ation under section 4955		▶\$_					
2	Enter the amount of any excise tax incurred by organization	n managers under section 495	5	<b>▶</b> \$_					
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 for this year?			Yes No				
4a	Was a correction made?				Yes No				
b	If "Yes," describe in Part IV								
Pa	rt I-C Complete if the organization is exem	pt under section 501(c	), except sect	ion 501(c)(3).					
1	Enter the amount directly expended by the filing organization	on for section 527 exempt fund	tion						
	activities			<b>▶</b> \$_					
2	Enter the amount of the filing organization's funds contribu-	ted to other organizations for s	ection						
	527 exempt function activities								
3	3 Total exempt function expenditures. Add lines 1 and 2 Enter here and on Form 1120-POL,								
	line 17b ▶ \$								
4	Did the filing organization file Form 1120-POL for this year	?			Yes No				
5	Enter the names, addresses and employer identification nu	ımber (EIN) of all section 527 p	oolitical organizati	ons to which the filing					
	organization made payments For each organization listed,	enter the amount paid from th	e filing organization	on's funds Also enter					
	the amount of political contributions received that were pro	mptly and directly delivered to	a separate politica	al organization, such					
	as a separate segregated fund or a political action committ	ee (PAC) If additional space is	s needed, provide	information in Part IV					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-				
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									

* .					
Schedule C (Form 990 or 990-EZ) 2010	UTHEASTERN	LIVESTOCK	EXPOSITIO	N 23-72075	500 Page <b>2</b>
Part II-A Complete if the organ	nization is exemp	t under section (	501(c)(3) and	filed Form 5768 (el	
section 501(h)).	<del></del>			·····	<del></del>
A Check ▶ ☐ if the filing organize	•				
B Check ▶ ☐ if the filing organize			ontrol" provisi	ons apply.	
	bbying Expendit			(a) Filing organization's totals	(b) Affiliated
(The term "expenditures"				Organization's totals	group totals
1a Total lobbying expenditures to influence	· · · · · · · · · · · · · · · · · · ·		<u> </u>		
b Total lobbying expenditures to influence	-	ct lobbying)	<u> </u>		
c Total lobbying expenditures (add lines 1	a and 1b)	•	-		
d Other exempt purpose expenditures		•	-		·
e Total exempt purpose expenditures (add	•	4 - 1 . 1 1 41-	· -		
f Lobbying nontaxable amount Enter the	amount from the follow	ing table in both		1	
columns.	T				
If the amount on line 1e, column (a) or (b) is:	The lobbying nonta				
Not over \$500,000	20% of the amount o				
Over \$500,000 but not over \$1,000,000	<u> </u>	f the excess over \$500,0			
Over \$1,000,000 but not over \$1,500,000		f the excess over \$1,000			
Over \$1,500,000 but not over \$17,000,000		the excess over \$1,500,0	1	Į	
Over \$17,000,000	\$1,000,000				
g Grassroots nontaxable amount (enter 25	•				<del></del>
<ul> <li>h Subtract line 1g from line 1a. If zero or le</li> <li>i Subtract line 1f from line 1c. If zero or le</li> </ul>			<b> </b>		<del></del>
	•	did the ergenization	L∟ filo Eorm 4720		<u>.</u>
j If there is an amount other than zero on	either line in or line in	, ulu tile organization	ille Foliti 4720		☐ Yes ☐ No
reporting section 4911 tax for this year?	<del></del>	<del></del>			
		ng Period Under			
(Some organizations the				_	the five
columns b	elow. See the ins	tructions for line	es 2a through	2f on page 4.)	
Lol	bying Expenditu	res During 4-Yea	ar Averaging	Period	1
Calendar year (or fiscal year	(-) 0007	(h) 0000	4-1.0000	13,0040	(a) **-1-1
beginning in)	(a) 2007	(b) 2008	(c) 2009	( <b>d)</b> 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

Page	3

	(election under section 501(h)).					
		(a)		(b)		
		Yes	No	A	mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(	c)(5),	or s	ection		
	501(c)(6).					
				_	Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by members?				1 X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2 X	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				3	X
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(	c)(5),	or se	ection		
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A,				l	
	"Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political					
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
	Carryover from last year		2b			
c			2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	į	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		-			
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			·
	Takable amount of hobbying and pointed experiences (see instructions)			L		

#### Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2010 SOUTHEASTERN LIVESTOCK EXPOSITION 23-7207500

Supplemental Information (continued)

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements

► Complete if the organization answered "Yes." to Form 990. Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public

Inspection Name of the organization Employer identification number SOUTHEASTERN LIVESTOCK EXPOSITION 23-7207500 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part E organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? 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 (ASC 958), 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 b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 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 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

<u>Sche</u>		ERN LIVESTOCE			<u> 23-7207500</u>			Page <b>2</b>
Pa	rt III Organizations Maintaining	Collections of Art,	Historical Trea	sures, or	Other Similar	Assets (	continue	ed)
3	Using the organization's acquisition, accession collection items (check all that apply)	n, and other records, che	ck any of the follows	ng that are a	a significant use of	ts		
а	Public exhibition	d Loan	or exchange progran	ns				
b	Scholarly research	e Other	3- p3					
С	Preservation for future generations							
4	Provide a description of the organization's colle	ections and explain how	they further the orga	ınızatıon's e	xempt purpose in P	art		
	XIV	•			, , , ,			
5	During the year, did the organization solicit or i	receive donations of art,	historical treasures,	or other sim	nılar			
	assets to be sold to raise funds rather than to						Yes	No
Pa	rt IV Escrow and Custodial Arra				wered "Yes" to	Form 9		
	line 9, or reported an amour						•	•
1a	Is the organization an agent, trustee, custodiar	or other intermediary fo	r contributions or oti	her assets n	iot			
	included on Form 990, Part X?	·					Yes	No
b	If "Yes," explain the arrangement in Part XIV a	nd complete the following	g table					_
							Amount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e	,		
f	Ending balance				1f			
2a	Did the organization include an amount on For	m 990, Part X, line 21?					Yes	No
	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Comple	ete if organization a	nswered "Yes"	to Form 9	90, Part IV, line	e 10.		
		(a) Current year	(b) Pnor year	(c) Two ye	ears back (d) Three	years back	(e) Four ye	ars back
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships		<del></del>					
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses						·····	
g	End of year balance							
2	Provide the estimated percentage of the year of	end balance held as						
	Board designated or quasi-endowment ▶	%						
	Permanent endowment ▶ %							
	Term endowment ▶ %							
3a	Are there endowment funds not in the possess	sion of the organization th	nat are held and adm	ninistered fo	r the		_	
	organization by						Ye	s No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
	If "Yes" to 3a(II), are the related organizations i						3b	
	Describe in Part XIV the intended uses of the c			10	<del></del>			<del></del>
га	tt VI Land, Buildings, and Equip					T		
	Description of investment	(a) Cost or other basis (investment)	(b) Cost or other (other)	Dasis	(c) Accumulated depreciation		(d) Book val	ue
	Land	(iiiiodinenty		042	depredation			040
	Land			,942	166 04	5 1		,942
	Buildings Leasehold improvements		/ / / /	,617	466,96	<u> </u>	257	,656
						<del></del>		
	Equipment Other					-		<del></del>
	. Add lines 1a through 1e (Column (d) must eq	ual Form 990 Post V and	lump (R) line 10(c) )			<del>.  </del>	300	EOO
ı Juli	. Add intes to anough te (Column (d) must eq	uai FUIIII 990, Part X, COI	umin (D), line 10(C)	<u> </u>		<u> </u>		<u>,598</u>

	orm 990) 2010 SOUTHEASTERN LIVESTOC		23-7207500	Page 3
Part VII	Investments—Other Securities. See Form 99			
	(a) Description of security or category	(b) Book value	(c) Method of value	
•	(including name of security)		Cost or end-of-year ma	arket value
(1) Financial of	•			
· ·	ld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)	••			
(E)				
(F)				
(G)				
(H)				
(l)				
	n (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments—Program Related. See Form 9	<del></del>		
	(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year m	
(1)				
(2)				
_(3)			· · · · · · · · · · · · · · · · · · ·	
(4)				
_(5)				
(6)		<u> </u>		
_(7)				
(8)				
<u>(9)</u>				
(10)		<u>-   </u>		
	n (b) must equal Form 990, Part X, col (B) line 13 )	<u> </u>	<u> </u>	
Part IX	Other Assets. See Form 990, Part X, line 15.	· · · · · · · · · · · · · · · · · · ·		4) 5
	(a) Description			(b) Book value
(1)		<del></del>		
(2)				
(3)		- '		
(4)	· · · · · · · · · · · · · · · · · · ·			
(5)				
(6)				<del> </del>
(7)				
(8)				
(9)				
(10)	n (b) must equal Form 990, Part X, col (B) line 15)			
Part X	Other Liabilities. See Form 990, Part X, line 2	25		
1.	(a) Description of liability	(b) Amount		
	income taxes	(-,		
	moorne taxes			
(3)	<del></del>		·	
(4)				
(5)				
(6)	<del></del>			
(7)				
(8)			1	
(9)			†	
		<del></del>	†	
(10) (11)	<del>-</del>			
	n (b) must equal Form 990, Part X, col (B) line 25 )		1	
	CC 740) Footnote In Part XIV, provide the text of the footnote		al statements that reports the	<u></u>
•	liability for uncertain tax positions under FIN 48 (ASC 740)	o.gameadon o midro		
<u></u>				

che	dule D (Form 990) 2010 SOUTHEASTERN LIVESTOCK EXPOSITION 23-	7207500	Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	ial Statements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
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	
4	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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Pa	Int XII Reconciliation of Revenue per Audited Financial Statements With Revenue	ue per Return	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
C	Recoveries of prior year grants 2c		
đ	Other (Describe in Part XIV )		
е	Add lines 2a through 2d	2e	·
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
þ	Other (Describe in Part XIV )		
C	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pa	时XIII Reconciliation of Expenses per Audited Financial Statements With Exper	ses 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		
а	Donated services and use of facilities 2a		
b	Prior year adjustments . 2b		
C	Other losses 2c		
d	Other (Describe in Part XIV )		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV )		
С	Add lines 4a and 4b	4c	
5		5	
Pa	art XIV Supplemental Information		···

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information.

Schedule D (Form 990) 2010 SOUTHEASTERN LIVESTOCK EXPOSITION 23-7207500

Part XIV Supplemental Information (continued)

Page **5** 

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

. . . . . .

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

SOUTHEASTERN LIVESTOCK EXPOSITION

Employer identification number 23 - 7207500

Form 990, Part VI, Line 6 - Classes of Members or Stockholders
The Exposition is made up of members.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The form 990 will be reviewed by the executive vice president and the treasurer of the organization.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents are available to the public.

Form 990, Part XI, Line 5 - Other Changes in Net Assets Explanation Net Unrealized gain on investments 14,923