

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



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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Intern	Internal Revenue Service Note The foundation may be able to use a copy of this return to satisfy state reporting requirements									
For	For calendar year 2011 or tax year beginning , and ending									
Name of foundation DENT COUNTY LIVESTOCK EDUCATIONAL										
Α	SSO	CIATION,	INC.					43	-1608213	
			nber if mail is not delivered to street address))		Ro	om/suite	•	hone number (see instruction	s)
1541 CR 2540								57:	<u>3-308-5415 </u>	
		, state, and ZIP code	350 CEEC	- ^				C If exer	mption application is pending	, check here
	ALE		<u>MO 6556</u>						, ,,	
G	heck a	all that apply.			n of a former public	c ch	arity	D 1. Fo	reign organizations, check h	ere 🕨 📘
				ended					reign organizations meeting	
			Address change Nan	me cha	nge			85	% test, check here and attac	h computation
H C	heck t	ype of organization	on X Section 501(c)(3) exempt	private	foundation			E if priva	ate foundation status was ten	minated under
	Section	1 4947(a)(1) none	xempt charitable trust Other	taxabl	e private foundation	<u> </u>		sectio	n 507(b)(1)(A), check here	▶ _
I Fa	air mari	ket value of all as	sets at J Accounting me	ethod:	X Cash A	\ccr	rual	F If the	foundation is in a 60-month to	ermination
er	nd of ye	ear (from Part II, o		ecify)				under	section 507(b)(1)(B), check	here 🕨 📘
lin	ie 16) I	\$	64,239 (Part I, column (d)) must	be on cash basis)					
Pa	art I _.	amounts in columns	venue and Expenses (The total of (b), (c), and (d) may not necessarily equal nn (a) (see instructions))		(a) Revenue and expenses per books		(b) Net inv		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions aifts	, grants, etc , received (attach schedule)	,		\dashv	*	 		(cash basis only)
	2		he foundation is not required to attach \$					£ 40,0 }		
	3	_	igs and temporary cash investmen	r	88		** ********** **	888		
	4		iterest from securities							8 2 C 2 2 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2
	5a	Gross rents				ヿ				
a	b	Net rental incom	ne or (loss)		A 44 A	T	. " » .	,	V , 340	5-5 /4: 4 x 1 4/4/4/4
Ž	Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales pince for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)							. S. S.	Ř. t v.	,
Ş.	b	Gross sales price for a	Il assets on line 6a	- 1	1, x		* :	% (* ×\$		14.18.18.18.18.18.18.18.18.18.18.18.18.18.
æ	7	Capital gain net	income (from Part IV, line 2)		1,4 (1) × %, 1) × (1)	•	-	0	y 3.24	1 44 1 7 1 73 5 5 6
	8 Net short-term capital gain			**		Z Z Z		C)	
	9	Income modifica	ations		Carl de vire			/ 1		. A A LL & . A.K.
	10a	Gross sales less re	eturns & allowances							144.19
	b	Less. Cost of go	ods sold			83			_ 3	
	c	Gross profit or (oss) (attach schedule)			\Box				
	11	Other income (a	ttach schedule)							,», , , , , , , , , , , , , , , , , , ,
	12	Total. Add lines	1 through 11		88	88		888	C) 🖟 🚵 🦚
Ś	13	Compensation of	of officers, directors, trustees, etc.			0				
enses	14	Other employee	salaries and wages			_				
	15	Pension plans, e	employee benefits			_	·			
X	16a	Legal fees (attac				_				<u> </u>
è	b		(attach schedule) STMT 1	L	25	50				<u> </u>
Ę	S	· · · · · · · · · · · · · · · · · · ·	fees (attach schedule)			_	<u>.</u>		<u> </u>	
ita	(T)	Interest								
nj:	18	Taxes (attach sche	edule) (see instructions)							V
Ξ	29		h schedule) and depletion D			\dashv				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b Accounting fees (attach schedule) b Accounting fees (attach schedule) Cother professional fees (attach schedule) Interest Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion Travel, conferences, and receipings Printing and publications Cother expenses (attach schedule) and depletion Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25					\dashv					
					28				 	
						40				
<u>.i.</u>	23		and administrative expenses		-	\dashv				
- - -	24				2.	78		0	(0
Add lines 13 through 23 25 Contributions, gifts, grants paid					7 0 3 0	S153/2 21	. %		730	
Ŏ	25 26		unis paid I nd disbursements. Add lines 24 and 2	25	1,00		*	0		
	27	Subtract line 26			3.00	- 3 1		13:4	***	
	a a		ue over expenses and disbursement	ts	-12	20				
	b		income (if negative, enter -0-)				* * ** ********************************	888		
	c		come (if negative, enter -0-)		Ÿ	., %v.	. P. Y.C.	3,77	(200 W 200 90 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
	<u> </u>	,					···		<u> </u>	* * * * * * * * * * * * * * * * * * *

,	Part I	Balance Sheets Attached schedules and amounts in the description colum	m	Beginning of year	En	nd of year
	<u> </u>	should be for end-of-year amounts only (See instructions	5)	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	1	Cash—non-interest-bearing				
-	2	Savings and temporary cash investments		64,359	64,23	
-	3	Accounts receivable ▶			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
-		Less allowance for doubtful accounts ▶				
-	4	Pledges receivable ▶		11.		
١		Less. allowance for doubtful accounts ▶				
-	5	Grants receivable				
-	6	Receivables due from officers, directors, trustees, and other				
-		disqualified persons (attach schedule) (see				
-		instructions)				
-	7	Other notes and loans receivable (att. schedule)			- 4	
		Less allowance for doubtful accounts ▶	0			
S	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
B	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
- 1	С	Investments—corporate bonds (attach schedule)				
1	11	Investments—land, buildings, and equipment basis				
		Less accumulated depreciation (attach sch.)			***************************************	Makalan I terbenarah mengan Peranta mendikan berhasian di kemelan dan berhasian dan be
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment basis			· · · · ·	. * * } }
		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)		64,359	64,23	39 64,239
٦	17	Accounts payable and accrued expenses		,	· · · · · · · · · · · · · · · · · · ·	Y 27 (18)
١	18	Grants payable				
es	19	Deferred revenue		· ·		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
용	21	Mortgages and other notes payable (attach schedule)		· · · · · · · · · · · · · · · · · · ·		
긔	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	,	0		a
٦		Foundations that follow SFAS 117, check here	•		, , , , , ,	
ş		and complete lines 24 through 26 and lines 30 and 31.	۔ ۔			
nces	24	Unrestricted				
흶	25	Temporarily restricted				
ĕ	26	Permanently restricted				
Net Assets or Fund Bala		Foundations that do not follow SFAS 117, check here	▶ 🗓			
피		and complete lines 27 through 31.	. (55)			
ō	27	Capital stock, trust principal, or current funds				
es	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds		64,359	64,23	39
긻	30	Total net assets or fund balances (see instructions)		64,359	64,23	. 16. c/ // 28. 28. 27. 14
ž	31	Total liabilities and net assets/fund balances (see				
		instructions)		64,359	64,23	39
Γ	Part I		ices	0 - 7 0 0 3		99[
_		net assets or fund balances at beginning of year—Part II, column (a), lir		st agree with		
•		of-year figure reported on prior year's return)	(1110		1	64,359
2		amount from Part I, line 27a			2	
3		r increases not included in line 2 (itemize)			3	
4		ines 1, 2, and 3			1 4	-
5		eases not included in line 2 (itemize)			5	
		net assets or fund balances at end of year (line 4 minus line 5)—Part II,	column /	o), line 30	6	
	, 9101	at the second of the or your time 4 miles mile of the firm	Solution (-/ ₁ mio oo		04,433

Form 990-PF (2011) DENT COUNT Part IV Capital Gains and			43-1608213		Page		
	the kind(s) of property sold (e.g., real estate, ouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a N/A							
b							
С							
d							
<u>e</u>		<u> </u>					
(e) Gross sales price	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale						
a							
b							
С							
		_			· · · · · · · · · · · · · · · · · · ·		
e Complete and for a section of		<u> </u>	100				
Complete only for assets showing ga	ain in column (n) and owned by the	foundation on 12/31.	/69		Col (h) gain minus		
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col (i) ol (j), if any		not less than -0-) or s (from col (h))		
a		 -	,				
b							
С		-	 .				
d							
е	If gain, also enter	n Dord Libra 7		<u> </u>			
2 Capital gain net income or (net capit	2						
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co		· ·					
Part I, line 8	-			3			
	er Section 4940(e) for Redu			ome			
(For optional use by domestic private for	undations subject to the section 49	40(a) tax on net inves	stment income)				
If section 4940(d)(2) applies, leave this p	oart blank.				N/A		
Was the foundation liable for the section		• •	base penod?		Yes No		
If "Yes," the foundation does not qualify		·					
1 Enter the appropriate amount in each	th column for each year; see the ins	structions before mak	ring any entries.				
(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributio	ons Net valu	(c) ue of nonchantable-use asse		(d) Distribution ratio (b) divided by col (c))		
2010			· · · · · · · · · · · · · · · · · · ·				
2009							
2008							
2007							
2006				- -			
0. Table (1. 4. 1. 4.)							
2 Total of line 1, column (d)				2			
3 Average distribution ratio for the 5-ye number of years the foundation has			e	3			
4 Enter the net value of nonchantable-	use assets for 2011 from Part X, li	ne 5		4			
5 Multiply line 4 by line 3	_5						
6 Enter 1% of net investment income	6						
7 Add lines 5 and 6	·			7			
8 Enter qualifying distributions from Pa	8	<u> </u>					
If line 8 is equal to or greater than line. Part VI instructions		1b, and complete tha	t part using a 1% tax i				
r art vi motructions					000 DE		

	990-PF (2011) DENT COUNTY LIVESTOCK EDUCATIONAL	43-1608213				<u>Pa</u>	age 4	
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940()					
1a	Exempt operating foundations described in section 4940(d)(2), check here X and 6		· .	• •				
	Date of ruling or determination letter: 11/07/95 (attach copy of letter if necessary—see instructions)							
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check N/A							
	here ▶ ☐ and enter 1% of Part I, line 27b			14		, c.	20	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter	4% of □				1/2/		
_	Part I, line 12, col. (b)		1 1				_	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only.	Others enter -0-)	2				0	
3	Add lines 1 and 2		3				_	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only.	. Others enter -0-)	4				<u>0</u>	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				0	
6	Credits/Payments	a_	1,34	S. 3. 4.				
a	2011 estimated tax payments and 2010 overpayment credited to 2011	6a					<i>′</i> ,	
b	Exempt foreign organizations—tax withheld at source	6b	~		`\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		. *	
C	Tax paid with application for extension of time to file (Form 8868)	6c	-	() () () () () () () () () () () () () (* .	,	.	
d	Backup withholding erroneously withheld Tatal gradity and payments Add lines So though Sd	6d	 -					
7 8	Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here from 2220 is at	Maraba d	7					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	ttached	8					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaint.	id .	9					
11	Enter the amount of line 10 to be. Credited to 2012 estimated tax	Refunded >	10					
_	rt VII-A Statements Regarding Activities	Refunded P	1 11 1			_	—	
1a	During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it				Yes	No	
	participate or intervene in any political campaign?							
b								
	of the instructions for definition)?							
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copie	es of any materials			,,	•	X	
	published or distributed by the foundation in connection with the activities						.	
С	c Did the foundation file Form 1120-POL for this year?							
d	·							
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expe		_					
	on foundation managers. > \$				4 54		أحنسا	
2	Has the foundation engaged in any activities that have not previously been reported to the	ne IRS?			2		<u>X</u>	
	If "Yes," attach a detailed description of the activities.				Ĭ	٠ - ١	· ***	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	ng instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy	~			3		<u>X</u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the y	year?	_		4a		<u>X</u>	
ь -	If "Yes," has it filed a tax return on Form 990-T for this year?		1	I/A	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			-	5		X	
c	If "Yes," attach the statement required by General Instruction T.	1 a.M. a			* 4		-	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied • By language in the governing instrument, or	either:			, ~ ,	****	. l	
		ata a ata a ata a ata a a			1,	3		
	By state legislation that effectively amends the governing instrument so that no manda conflict with the state law remain in the governing instrument?	atory directions that				- 	لنكلا	
7	conflict with the state law remain in the governing instrument?	complete Doct II, and (a), and Dr		ł	_ 6 _ 7	X		
								
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ► MO								
b 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								
9 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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"							
	complete Part XIV							
10								
							Х	
					10 om 99	0-PF		

Form	990-PF (2011) DENT COUNTY LIVESTOCK EDUCATION		608213		Page 6				
Pa	art VII-B Statements Regarding Activities for Which Form 4	720 May Be R	lequired (cont	inued)					
5a	During the year did the foundation pay or incur any amount to:				1 1 2 2 2 2 2 1 1				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?	Y	res 🗓 No					
	(2) Influence the outcome of any specific public election (see section 4955), or to		_	. 7					
	directly or indirectly, any voter registration drive?			/es X No /es X No					
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		∕es X No	[s T 1					
(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 instructions)	res X No							
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational	_	_					
	purposes, or for the prevention of cruelty to children or animals?		` \	res 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	lescribed in	_					
	Regulations section 53.4945 or in a current notice regarding disaster assistance	(see instructions)?	?	N/A	5b				
	Organizations relying on a current notice regarding disaster assistance check he	re		▶ 🗍	工程 (2000年)				
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro	m the tax		_					
	because it maintained expenditure responsibility for the grant?		N/A 🗍 Y	res 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			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	on a personal benefit contract?		\	res X No					
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal benefit conti	ract?	_	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 she	elter transaction?	\ \	res X No					
<u>b</u>	If Yes, did the foundation receive any proceeds or have any net income attributa			N/A	7b				
P	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,								
	and Contractors								
1 1	ist all officers, directors, trustees, foundation managers and their compens	ation (see instruc	tions).						
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expense account,				
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred	other allowances				
		· .	<u>'</u>	compensation	-				
SE	E STATEMENT 2		İ						
					•				
_									
	Compensation of five highest-paid employees (other than those included o	n line 1—see inst	tructions) If non-	e enter	l				
-	"NONE."		iractions). Ir non	c, cittoi					
				(d) Contributions to					
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	(e) Expense account,				
		devoted to position		plans and deferred compensation	other allowances				
NO	ONE								
			· -						
		<u> </u>	<u> </u>						
Tota	l number of other employees paid over \$50,000				<u>▶</u> 0				
				F	orm 990-PF (2011)				

Form 990-PF (2011) DENT COUNTY LIVESTOCK EDUCATIONAL	43-1608213	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation	ion Managers, Highly Paid Em	ployees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see instruction	ons). If none, enter "NONE."	
(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		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such organizations and other beneficianes served, conferences convened, research papers produced, etc.	as the number of	Expenses
1 AGRICULTURAL SCHOLARSHIP ACTIVITIES (RECIPI	IENTS LISTED IN	
PART XV)		
		700
2 FAIR TROPHIES FUNDED FOR COUNTY 4-H PROGRAM	M.	
		20
		30
3		
4		
Part IX-B Summary of Program-Related Investments (see instruction	ons)	
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 instructions		
3		
Total. Add lines 1 through 3		

Total. Add lines 1 through 3

а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	730
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chantable, etc,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	4	 730
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 instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6_	 730
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2011)

	rt XIII : Undistributed Income (see instructions)	JDO CIT	TOTALIE		<u> </u>	0002		_			ige J
	TEXAM : Ondistributed income (see instructions)				463				<u> </u>	(d)	-
1	Distributable amount for 2011 from Part XI,	(a Con	-	Ye	(b) ars pnor to 2	2010	(c) 201			2011	
•	line 7								 	<u> </u>	
2	Undistributed income, if any, as of the end of 2011								-	:	
	Enter amount for 2010 only										
	Total for prior years: 20 , 20 , 20	·									
3	Excess distributions carryover, if any, to 2011										
	From 2006										
b	From 2007										
c	From 2008										
d	From 2009										
	From 2010								,		
f	Total of lines 3a through e										
4	Qualifying distributions for 2011 from Part XII,							,	†		
•	line 4 ▶ \$ 730	*3									
а	Applied to 2010, but not more than line 2a								1		
	Applied to undistributed income of prior years	*							†		
~	(Election required—see instructions)	Ri.					* >	4			
С	Treated as distributions out of corpus (Election		•							······ ····· · · -··	
•	required—see instructions)			*		25.		24	ā.	2	
d	Applied to 2011 distributable amount			ex.		23.0	*		T		
	Remaining amount distributed out of corpus		730						<u> </u>		
5	Excess distributions carryover applied to 2011			`	1/4	r (r	d)		1		
_	(If an amount appears in column (d), the same							· 20			
	amount must be shown in column (a))	, 2		,	٧.	ν,				, or	
6	Enter the net total of each column as	j)	3		N.	· [7]	******	4.4	6 ?	<i>i</i> .	
	indicated below:					ŕ		·			
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5		730	<i>A</i> 100.	. Alexander		di			21.56	Ş
	Prior years' undistributed income. Subtract		163			ĺ	***	#	*	18/	
	line 4b from line 2b										
С	Enter the amount of prior years' undistributed	ů.					,	24.5	**		200
	income for which a notice of deficiency has	3,77						*	1 8.4	&r. ć	* 35
	been issued, or on which the section 4942(a)										
	tax has been previously assessed	š	* *				<i>\b</i> -	¥	İ		
d	Subtract line 6c from line 6b. Taxable										
	amount—see instructions										
е	Undistributed income for 2010 Subtract line		′ 🤻	â.					*	¥	13
	4a from line 2a. Taxable amount—see			*					l		¥
	instructions										
f	Undistributed income for 2011. Subtract lines			,	,		,				
	4d and 5 from line 1. This amount must be										
	distributed in 2012										
7	Amounts treated as distributions out of corpus										
	to satisfy requirements imposed by section								1		
	170(b)(1)(F) or 4942(g)(3) (see instructions)									<u>.</u>	
8	Excess distributions carryover from 2006 not								1		
	applied on line 5 or line 7 (see instructions)			<u> </u>							
9	Excess distributions carryover to 2012.								1		
	Subtract lines 7 and 8 from line 6a			<u> </u>					<u> </u>		
10	Analysis of line 9.										
а	Excess from 2007										
b	Excess from 2008										
C	Excess from 2009									,	
d	Excess from 2010										
е	Excess from 2011										

 Pa	rt:XIV Private Operating For	indations (see in	structions and Par	t VII-A, question 9)			
1a	If the foundation has received a ruling or							
	_	s effective for 2011, enter the date of the ruling						
b	Check box to indicate whether the foundation	•	•	ped in section X 49	942(j)(3) or 4942			
2a	Enter the lesser of the adjusted net	Tax year		Pnor 3 years				
	income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total		
	investment return from Part X for							
	each year listed	0	1,256	1,883	2,776	5,915		
b	85% of line 2a		1,068	1,601	2,360	5,029		
С	Qualifying distributions from Part XII,					· · · · · ·		
	line 4 for each year listed	730	1,230	1,530	2,430	5,920		
d	Amounts included in line 2c not used directly							
_	for active conduct of exempt activities							
е	Qualifying distributions made directly							
	for active conduct of exempt activities.							
	Subtract line 2d from line 2c	730	1,230	1,530	2,430	5,920		
3	Complete 3a, b, or c for the	, 30	1,230		2,430			
•	alternative test relied upon.							
а	"Assets" alternative test—enter:							
•	(1) Value of all assets	64,239	64,359	64,614	64,532	257,744		
	(2) Value of assets qualifying under	04,233	04,337	04,014	04,332	231,14		
	section 4942(j)(3)(B)(i)	64,239	64,359	64,614	64,532	257,744		
b	"Endowment" alternative test—enter 2/3	04,233	04,337	04,014	04,332	237,745		
D	of minimum investment return shown in							
_	Part X, line 6 for each year listed							
С	"Support" alternative test—enter.							
	(1) Total support other than gross investment income (interest,							
	dividends, rents, payments on							
	securities loans (section							
	512(a)(5)), or royalties) N/A				_			
	(2) Support from general public			· <u>-</u>				
	and 5 or more exempt							
	organizations as provided in							
	section 4942(j)(3)(B)(III) N/A							
	(3) Largest amount of support from							
	an exempt organization N/A							
-	(4) Gross investment income N/A		41.1					
, Pa	Supplementary Inform		•	the foundation h	ad \$5,000 or more	in assets at		
_	any time during the ye		tions.)					
1	Information Regarding Foundation Ma	-						
а	List any managers of the foundation who				•			
	before the close of any tax year (but only	of they have contribute	ed more than \$5,000).	(See section 507(d)(2)))			
	N/A			 				
b	List any managers of the foundation who				portion of the			
	ownership of a partnership or other entity	r) of which the foundat	tion has a 10% or great	ter interest.				
_	N/A							
2	Information Regarding Contribution, C							
	<u> </u>		to preselected charitat	-	-			
	unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under							
	other conditions, complete items 2a, b, c							
а	The name, address, and telephone number		nom applications shoul	d be addressed				
	DARRELL SKILES 573-3							
	1541 CR 2540 SALEM N							
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include				
	SEE STATEMENT 3				<u>-</u>			
С	Any submission deadlines	-						
	SEE STATEMENT 4							
d	Any restrictions or limitations on awards,	such as by geographi	ical areas, charitable fi	elds, kınds of ınstitutio	ns, or other			
	factors							
	SEE STATEMENT 5							
DAA		 -			-	Form 990-PF (201		

PartiXV Supplementary Information (continued) 3 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 WHITNEY LORTS 17845 CR 1300 NONE ST JAMES MO 65559 EDUC SCHOLARSHIP 700 DENT COUNTY 4-H COUNCIL DENT COUNTY JUDICIAL BLD NONE SALEM MO 65560 FAIR TROPHIES 30 730 ▶ 3a Approved for future payment N/A Total ▶ 3b

Rart XVI-A Analysis of Income-Producing Activities

nter gross am	ross amounts unless otherwise indicated.		f business income	Excluded by section 512, 513, or 514		(a)	
4 Dansen		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)	
_	ervice revenue:			 		(000 menosition)	
		-					
°		- 		+-			
ď		•		 			
<u> </u>							
		-		+			
σ Fees a	nd contracts from government agencies	- 					
-	p dues and assessments						
	savings and temporary cash investments			14	888	<u> </u>	
	and interest from securities	-		1			
	ncome or (loss) from real estate:		× ," ,				
	nanced property				,,		
	ot-financed property						
	ncome or (loss) from personal property						
7 Other inves				1			
8 Gain or (los	ss) from sales of assets other than inventory						
	e or (loss) from special events						
	t or (loss) from sales of inventory						
-	nue. a						
е							
2 Subtotal. A	dd columns (b), (d), and (e)	357		0 🔆 🕷 🚉	888	0	
3 Total. Add	line 12, columns (b), (d), and (e)				13	888	
See workshee	t in line 13 instructions to venfy calculations.)						
Part XVI-B	Relationship of Activities to the	Accomplishm	ent of Exempt F	Purpose	s		
Line No.	Explain below how each activity for which incom	ne is reported in co	olumn (e) of Part XV	I-A contrib	outed importantly to the	e	
▼	accomplishment of the foundation's exempt pur	poses (other than	by providing funds f	or such p	urposes). (See instruct	ions.)	
N/A							
				 			
			·				
					· <u> · · · · · · · · · · · · · · · · ·</u>		
						·	
			_			·-·	
			<u> </u>				
· · · · · · · · · · · · · · · · · · ·							

orm 990)-PF (201	 DENT COUN 	TY LIV	ESTOCK E	DUCATION	AL 43-1	608213	Page 13
Part)	(VÎÎ)∙ ∣	Information Rega Exempt Organiza	rding Tra					
1 Did		nization directly or indi		a in any of the fo	llowing with any o	ther organization o	lescribed	Yes No
ın s org	section 50 janization	11(c) of the Code (others?	r than section	n 501(c)(3) organ	nizations) or ın se	ction 527, relating		
(1)	Cash	om the reporting found	ation to a nor	ichantable exem	ipt organization of	r		1a(1) X
	Other as							1a(2) X
	ner transa		able averes	raanization				
		assets to a noncharitate es of assets from a no	-	-	ion			1b(1) X 1b(2) X
	_	f facilities, equipment,			1011			1b(3) X
		sement arrangements						1b(4) X
٠.		r loan guarantees						1b(5) X
(6)	Perform	ance of services or me	embership or	fundraising solic	itations			1b(6) X
c Sh	aring of fa	acilities, equipment, m	ailing lists, otl	her assets, or pa	ud employees			1c X
		r to any of the above is			-	• •	•	
		goods, other assets, o	_		-			
val (a) Li		transaction or sharing (b) Amount involved		t, show in colum of nonchantable exer				ces received. Insactions, and sharing arrangements
N/A	ne no	(b) Ambant involved	(c) Name	Of Horicianiable exer	THE OTGANIZATION	(a) Descrip	adir or transfers, tra	insactions, and sharing arrangements
IV/ FI				·		· - -		
		·						
						<u></u>		
					· -			
-								
						ļ		
de	scribed in	ation directly or indired in section 501(c) of the implete the following so	Code (other t			-	ions	Yes X No
		a) Name of organization		(b) Type of	organization		(c) Descrip	tion of relationship
N/	<u> </u>							
		· ··						
		 						······································
		-						
	Under per	nalties of perjury, I declare th	at I have examin	ed this return, includ	ing accompanying sch	edules and statements,	and to the best of	my knowledge and belief, it is true,
	correct, a	nd complete Declaration of	preparer (otner tr	nan taxpayer) is base	ed on all (niormation of	which preparer has any	Knowledge	May the IRS discuss this return with the preparer shown below (see instructions)? \overline{X} Yes No
Sign	1	00	$\leq U$	• (سر ۱	14 7000		
Here	<u>~</u>	<u> </u>		<u> </u>	Date	14-2012	SECY Title	/TREASURER
		ature of officer or trustee	·				11000	Data
Paid Prepare		rpe preparer's name $\Gamma ER \ E. \ PRATT,$	JR.		Prenarer's ggnatu	to Etis		Date Check I desert-employee
Use Onl		name ▶ PRAT		HELL & C	CO. PC		1//	PTIN P00796654
-		address ► 303 1			O BOX 1	50	70	Firm's EIN ▶ 43-1265062
		SALE		<u>65560</u>				Phone no 573-729-611

DCLIVESTOCK DENT COUNTY LIVESTOCK EDUCATIONAL
43-1608213

43-1608213

FYE: 12/31/2011

Statement 1 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	· \$\dag{\sigma}	\$
Adjusted Net	\$	w
Net Investment	w	8
Total	250	250
	φ,	₩
Description	INDIRECT ACCOUNTING FEES	TOTAL

DCLIVESTOCK DENT COUNTY LIVESTOCK EDUCATIONAL 43-1608213 FYE: 12/31/2011	EDUCATIONAL Federal Sta	atements			5/14/2012
Statement 2 - Form 990-PF, Part		List of Offi	VIII, Line 1 - List of Officers, Directors, Trustees, Etc.	rustees, Etc.	•
Name and Address	<i>A</i> Title	Average Hours	Compensation	Benefits	Expenses
GEORGE A BARNITZ 2699 CR 2070 LAKE SPRING MO 65532	MBER	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
BOB PARSON 405 SOUT WARFEL 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	PRESIDENT	0.20	0	0	0
JIM FREEMAN 535 CR 5190 SALEM MO 65560	BOARD MEMBER	00.00	0	0	0
CHARLES CAMPBELL 20170 HWY 32 LICKING MO 65542	BOARD MEMBER	00.00	0	0	0
				į	2

•

! ! ! 43-1608213 FYE: 12/31/2011 **Federal Statements**

Statement 3 - 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 4 - 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 5 - 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.