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DLN: 93493256000213

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)

OMB No 1545-0047

Open to Public

Department of the Treasury

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C Name of organization SOUTH DAKOTA PORK PRODUCERS COUNCIL Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 500 N WESTERN AVE ROOM/SUITE 500 City or town, state or country, and ZIP + 4 SIOUX FALLS, SD 57104 F Name and address of principal officer GLENN MULLER 500 N WESTERN AVE SIOUX FALLS, SD 57104 F SIOUX FALLS, SD 57104 SOUTH DAKOTA PORK PRODUCERS COUNCIL Doing Business As Room/suite 100 N WESTERN AVE SIOUX FALLS, SD 57104	e E Telephone (605) 33 G Gross rece H(a) Is this a group reaffiliates? H(b) Are all affiliates in	e number 32-1600 eipts \$ 762,515 eturn for Yes V No
SOUTH DAKOTA PORK PRODUCERS COUNCIL Doing Business As Number and street (or P O box if mail is not delivered to street address) Room/suite 500 N WESTERN AVE ROOM/SUITE 500 City or town, state or country, and ZIP + 4 SIOUX FALLS, SD 57104 F Name and address of principal officer GLENN MULLER 500 N WESTERN AVE SIOUX FALLS, SD 57104 501(c)(3) ▼ 501(c)(5) ◄ (insert no)	H(a) Is this a group reaffiliates? H(b) Are all affiliates if "No," attach a	9257 e number 32-1600 eipts \$ 762,515 eturn for Yes V No ncluded? Yes No
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500 N WESTERN AVE SIOUX FALLS, SD 57104	affiliates? H(b) Are all affiliates if "No," attach a	「Yes ▼ No ncluded?「Yes
SIOUX FALLS, SD 57104 ☐ 501(c)(3)	If "No," attach a	
WW SDPPC ORG	If "No," attach a	
WW SDPPC ORG		•
	H(c) Group exemption	
Corporation Trust Association Other ►		1 number 🟲
Ty corporation Trust Association Other P	L Year of formation	M State of legal domicile SD
nmary	L Tear of formation	14 State of legal doffficile 3D
•		
his box দ if the organization discontinued its operations or disposed of	more than 25% of its no	et assets
of voting members of the governing body (Part VI, line 1a)	1	3 18
	<u> </u>	4 18
	<u> </u>	5 5
imber of volunteers (estimate if necessary)		6 30
related business revenue from Part VIII, column (C), line 12	[7a 5,331
elated business taxable income from Form 990-T, line 34		7b -7,755
	Prior Year	Current Year
	1,11	
		0
	731,87	4 762,515
	100,78	0 89,665
		0
	152.19	7 170,010
•		0
undraising expenses (Part IX, column (D), line 25) ▶0		
and dising expenses (rare by column (b), line bs) :		
expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	400,15	7 416,437
expenses (Part IX, column (A), lines 11a-11d, 11f-24e) expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	400,15 653,13	
	653,13	4 676,112
expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	653,13 78,74 Beginning of Current	4 676,112 0 86,403
expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	653,13 78,74 Beginning of Current Year	4 676,112 0 86,403 End of Year
expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	653,13 78,74 Beginning of Current Year 395,74	4 676,112 0 86,403 End of Year 9 467,609
expenses Add lines 13-17 (must equal Part IX, column (A), line 25) nue less expenses Subtract line 18 from line 12	653,13 78,74 Beginning of Current Year	4 676,112 0 86,403 End of Year 9 467,609 0 22,307
	TING OF THE LIVE HOG, PROCESSING AND MERCHANDISING OF THODUCERS' OPPORTUNITIES FOR PROFIT this box if the organization discontinued its operations or disposed of of voting members of the governing body (Part VI, line 1a)	LUENCE AND AFFECT THE INTERNAL AND EXTERNAL FACTORS RELATING TO PORK PRODUCTING OF THE LIVE HOG, PROCESSING AND MERCHANDISING OF THE PRODUCT TO THE CODUCERS' OPPORTUNITIES FOR PROFIT This box I fithe organization discontinued its operations or disposed of more than 25% of its new of voting members of the governing body (Part VI, line 1a)

YANKTON, SD 57078

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

▼ Yes No

Total program service expenses ► 567,440 Form 990 (2012)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "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, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
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	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f co}$	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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		No
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? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1^2 If "Yes," complete Schedule I, Parts I and II	21	Yes	
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		No
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		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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			
		28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	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		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

Pal	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	 No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 0		103	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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		Νo
b	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			
F-	We a the community of a marky to a marky had been about the translation of any time of marky the tay years?	Fo		NI a
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		IN O
С	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	6a		No
~-	organization solicit any contributions that were not tax deductible as charitable contributions?			
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	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		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
.1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	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			
.3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	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			
c	Enter the amount of reserves on hand	[
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule 0	14h		

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<u>ie Cod</u>	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No_
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12 c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - Own website Another's website Vpon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►SD PORK PRODUCERS COUNCIL 500 N WESTERN AVE SIOUX FALLS, SD (800)830-7675

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

	Average hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations	
) ANDREW ARHART	1 00	х		х				0	0	0	
RESIDENT											
2) BRAD HOHN IRECTOR	1 00	х						0	0	0	
B) LENNY GROSS	1 00										
IRECTOR		х						0	0	0	
) JIM QUACKENBUSH	1 00	х						0	0	0	
IRECTOR		X						١	U	U	
5) JOHN WIPF	1 00	Х						0	0	0	
IRECTOR											
5) FERLYN HOFER	1 00	х						0	0	0	
IRECTOR ') MATTHEW MOELLER	1 00										
IRECTOR		Х						0	0	0	
B) JIM PETRIK	1 00										
IRECTOR		Х						0	0	0	
) JUSTIN ODEGAARD	1 00										
IRECTOR		Х						0	0	0	
.0) LESTER MOELLER	1 00										
RST VICE P		Х		Х				0	0	0	
.1) MIKE LENS	1 00										
IRECTOR		Х						0	0	0	
.2) PAUL BRANDT	1 00	,		,,				_	_	_	
AST PRESIDE		Х		Х				0	0	0	
.3) RYAN STORM	1 00	V		Х				0	0	0	
ECOND VICE		Х									
4) CLARENCE WURTZ	1 00	х						0	0	0	
IRECTOR											
.5) LARON KRAUSE	1 00	х						0	0	0	
IRECTOR								<u>_</u>			
.6) DOUG WEVIK	1 00	х						0	0	0	
IRECTOR		_^_						ď	0		
.7) GLENN MULLER	40 00			х				60,351	0	15,024	
	1	1		. ^	1	ı	1	1 00,331	٧	13,024	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	Name and Title	hours per more than one box, unless compensation compensation week (list person is both an officer any hours and a director/trustee) organization (W-organization (W-organizat				Reportable compensation from related organizations (W	on amount of ot d compensation (W- from the							
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		ganizati relate organiza	ed
												-		
												+		
												_		
1b	Sub-Total							<u> </u>				+		
c	Total from continuation sheet	s to Part VII, S	· · ection A	٠.				►						
d	Total (add lines 1b and 1c) .					•		►		60,351				15,024
2	Total number of individuals (in \$100,000 of reportable compe					lıste	d abov	e) wl	ho receive	d more th	an			
											_		Yes	No
3	Did the organization list any f oon line 1a? <i>If</i> "Yes," complete S					key •	emplo	yee, •	or highes	t compen • •	sated employee	3		No
4	For any individual listed on line organization and related organ													
5	Did any person listed on line 1	a receive or acc	rue cor	npen	• satı	• on fr	om an	• y unr	elated org	• • • anızatıon	or individual for	4		No_
	services rendered to the organ	nization? <i>If</i> "Yes	," compl	ete S	chea	lule 3	for su	ch pe	erson .		[5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your fix compensation from the organiz												ax year	
	N	(A) lame and business	address							Des	(B) cription of services		(C Comper	
												\downarrow		
2	Fotal number of Independent co	ntractore (inclin	dina biit	no+	lımı	- od +	o thac	a lict	ed above)	who roos	wed mare than			

		Check if Schedule O contains a response to any question		<u> </u>		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
2 2	1a	Federated campaigns 1a				
tributions, Giffs, Grants Other Similar Amounts	b	Membership dues 1b				
s, G Am	_	Fundraising events 1c				
Contributions, Giffs, and Other Similar A	d	Related organizations 1d				
Sim.	е	Government grants (contributions) 1e				
utio ner	f	All other contributions, gifts, grants, and similar amounts not included above				
를 를	g	Noncash contributions included in lines 1a-1f \$				
Coni	h	Total. Add lines 1a-1f	132,361			
e e		Business Code				
wen	2a	LEGISLATIVE CHECKOFF FUNDS 541900	· ·	424,313		
9E	b c	FEES & PRODUCT SALES 541900 PORKLINE 541900	<u> </u>	199,547	5,331	
er w c	d	3,1300	3,331		3,331	
ණ ⊑	e					
Program Serwce Revenue	f	All other program service revenue				
Δ	g	Total. Add lines 2a-2f	629,191			
	3	Investment income (including dividends, interest, and other similar amounts)	963			963
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents (1) Near (11) Personal				
	b	Less rental expenses]			
	C	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	(1) Securities (11) Other Gross amount				
		from sales of assets other				
	b	than inventory Less cost or other basis and				
	c	sales expenses Gain or (loss)				
	d	Net gain or (loss)	1			
ən e	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
#	b c	Net income or (loss) from fundraising events				
		Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities]			
	10a	Gross sales of inventory, less returns and allowances .				
	b	Less cost of goods sold b	j			
	c	Net income or (loss) from sales of inventory				
}	11a	Miscellaneous Revenue Business Code				
	ь					
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d				
	12	Total revenue. See Instructions	762,515	623,860	5,331	963

	IX Statement of Functional Expenses				
ectio	n 501(c)(3) and 501(c)(4) organizations must complete all columns All				_
	Check if Schedule O contains a response to any question in this Pa	nrt IX T			
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisin expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	89,665	89,665		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
1	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	60,351	44,183	16,168	
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	67,031	49,102	17,929	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	5,209	4,263	946	
9	Other employee benefits	27,779	20,721	7,058	
)	Payroll taxes	9,640	7,056	2,584	
	Fees for services (non-employees)				
а	Management				
b	Legal				
0	Accounting	10,296		10,296	
i	Lobbying	24,788	24,788		
<u>.</u>	Professional fundraising services See Part IV, line 17				
:	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on				
	Schedule O)	3,203	3,203		
	Advertising and promotion	71,390	71,390		
	Office expenses	46,908	23,675	23,233	
	Information technology				
	Royalties				
	Occupancy	27,920	1,733	26,187	
	Travel	730	730		
	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	25,676	25,676		
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	1,407	1,407		
	Insurance	4,271		4,271	
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	PROMOTIONAL EVENTS	66,200	66,200		
b	STATE FAIR	36,116	36,116		
c	INVOICES	19,426	19,426		
d	TRADE SHOW	14,562	14,562		
e	All other expenses	63,544	63,544		
	Total functional expenses. Add lines 1 through 24e	676,112	567,440	108,672	
5	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
		, ₁	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	312,306	2	399,424
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	67,071	4	55,856
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		_	
ts	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	
Assets	١_			6	
AS	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	2.582	8	4.400
	9 10a	Prepaid expenses and deferred charges	,	9	4,180
	Ь	Part VI of Schedule D Less accumulated depreciation	4	10c	6,896
	111	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	7,740	15	1,253
	16	Total assets. Add lines 1 through 15 (must equal line 34)	395,749		467,609
-	17	Accounts payable and accrued expenses	21,940	17	19,077
	18	Grants payable	,	18	<u> </u>
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
$\ddot{\Box}$	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			,
		D	14,910	25	3,230
	26	Total liabilities. Add lines 17 through 25	36,850	26	22,307
on do		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	130,098	27	144,017
<u>ନ</u>	28	Temporarily restricted net assets	228,801	28	301,285
<u> </u>	29	Permanently restricted net assets	220,001	29	301,203
Ĭ	29	,		29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
0	30	Capital stock or trust principal, or current funds		30	
ě	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	358,899	33	445,302
Ź	34	Total liabilities and net assets/fund balances	395,749	34	467,609
		,	1 222,110		,

Par	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7	62,515
2	Total expenses (must equal Part IX, column (A), line 25)	2		6	76,112
3	Revenue less expenses Subtract line 2 from line 1	3			86,403
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	58,899
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		4	45,302
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both	arate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	it of the	e 2c		
	If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	е	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	d 3b		

DLN: 93493256000213

OMB No 1545-0047

Inspection

Open to Public

Name of the organization

SCHEDULE D (Form 990)

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Department of the Treasury Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. Internal Revenue Service

Employer identification number

SOU	ITH DAKOTA PORK PRODUCERS COUNCIL			46-0	309257		
Pa	rt I Organizations Maintaining Donor Adv	ised Funds or Othe	r Similar Fur			Comple	te if the
	organization answered "Yes" to Form 990	, Part IV, line 6.					
		(a) Donor advise	ed funds	(b) Funds and c	ther accou	ınts
1	Total number at end of year						
2	Aggregate contributions to (during year)						
3	Aggregate grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or			advis	sed	┌ Yes	┌ No
6	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the beneficonferring impermissible private benefit?				- purpose	┌ Yes	┌ No
Pai	t II Conservation Easements. Complete if	the organization ansv	vered "Yes" to	Form	990, Part IV	, lıne 7.	
2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education) Pre	servation of an h servation of a ce	rtıfıed	historic struct	cure	
	easement on the last day of the tax year		Г				
а	Total number of conservation easements		-	2a	Held at the	End of the	Year
_	Total acreage restricted by conservation easements		_				
b	Number of conservation easements on a certified histo	ric ctructure included in	<u> </u>	2b			
С.			· · · —	2c			
d	Number of conservation easements included in (c) acq historic structure listed in the National Register		L	2d			
3	Number of conservation easements modified, transferr	ed, released, extinguishe	d, or terminated	by the	e organization (during	
	the tax year 🗠						
4	Number of states where property subject to conservat	on easement is located I	<u> </u>	_			
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	he periodic monitoring, ii	nspection, handli	ng of	violations, and	┌ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing cons	ervation easeme	nts du	uring the year		
7	A mount of expenses incurred in monitoring, inspecting	. and enforcing conserva	tion easements o	durina	the vear		
,	► \$,			,		
8	Does each conservation easement reported on line 2(of and section 170(h)(4)(B)(II)?	d) above satisfy the requi	rements of secti	on 17	0(h)(4)(B)(ı)	┌ Yes	┌ No
9	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organiza					
Par	Organizations Maintaining Collection			r Oth	er Similar <i>i</i>	Assets.	
	Complete if the organization answered "Y If the organization elected, as permitted under SFAS 1			o ctat	coment and hal	anca chaat	
1a	works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibiti	on, education, or	resea	arch in furthera		
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ts held for public exhibiti					lıc
	(i) Revenues included in Form 990, Part VIII, line 1				► \$		
	(ii) Assets included in Form 990, Part X				► \$		
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS			financ	ial gain, provid	le the	

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>llections of Ar</u>	t, His	tori	cai i	<u>reasur</u>	<u>es, or O</u>	<u>tner</u>	<u>Similar As</u>	sets ((continued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other reco	rds, cl	neck	any of	the follo	wing that a	re a	sıgnıfıcant use	of its	
а	Public exhibition		d	Γ	Loan	or excha	ange progr	ams			
b	Scholarly research		e	Γ	Othe	r					
С	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and expl	aın hov	w the	y furth	er the or	ganızatıon	's exe	empt purpose (n	
5	During the year, did the organization solicit o									_	_
Do.	assets to be sold to raise funds rather than t									Yes	No
Pal	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an arr						answere	u Ye	es to Form s	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	ford	ontrib	utions or	other ass	ets n	ot	┌ Yes	□ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	e follov	wing	able		_				
									An	nount	
C	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 Fo	orm 990, Part X, Iır	ne 21?							☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatı	on has	been pro	ovided in P	art X	III		<u> </u>
Pa	rt V Endowment Funds. Complete										
4_	Degraping of week belongs	(a)Current year	(b) Prior	year	b (c) Two	o years back	. (d) ⊺	hree years back	(e)Four	years back
1a b	Beginning of year balance										
C	Net investment earnings, gains, and losses							+			
	wet investment earnings, gams, and losses							<u> </u>			
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent vear end balan	ice (lir	ne 1 a	. colum	nn (a)) he	eld as	1			
a	Board designated or quasi-endowment	,		5	,	(-,,,					
b	Permanent endowment ►										
c	Temporarily restricted endowment										
	The percentages in lines 2a, 2b, and 2c show										
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	2a LION	ınat	аге пет	u and ad	mmstered	וטרנ	.iie	Ye	s No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
	If "Yes" to 3a(II), are the related organization							•	31)	
4 Date	t VI Land, Buildings, and Equipme					10					
Par	Description of property	int. See roilli 9:	90, Pa			or other	(b)Cost or	other	(c) Accumulate	ed (d) Book value
	,			b	asis (Inv	estment)	basis (oth	ner)	depreciation		
	Land										
b	Buildings										
С	Leasehold improvements		•								
d	Equipment						1	9,024	12,	128	6,896
Tota	I. Add lines 1a through 1e <i>(Column (d) must e</i>	qual Form 990, Part	X, colu	ımn (B), line	10(c).)					6,896

Part VII Investments—Other Securities. Se	e Form 990, Part X, line 12	···	
(a) Description of security or category	(b)Book value	(c) Metho	od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
T-1-1 (Column (h)	F		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		<u> </u>	
(a) Description of investment type			d of voluntion
(a) Description or investment type	(b) Book value		od of valuation f-year market value
		00010101111	, you manner take
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	 -		
Part IX Other Assets. See Form 990, Part X,	line 15.		
(a) Desc			(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability			
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability	t X, line 25.		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25.		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS DUE TO OTHER FUNDS	(b) Book value 3,230		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes AMOUNT HELD FOR OTHERS	t X, line 25. (b) Book value		

ınformatıon

Identifier

The state of	Reconciliation of Revenue per Audited Financial Statements with Revenue	pei ketuili
1	Total revenue, gains, and other support per audited financial statements	1 762,515
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	7
c	Recoveries of prior year grants	7
d	Other (Describe in Part XIII)	7
e	Add lines 2a through 2d	
3	Subtract line 2e from line 1	3 762,515
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 . 4a	
b	Other (Describe in Part XIII)	7
С	Add lines 4a and 4b	4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5 762,515
Part	Reconciliation of Expenses per Audited Financial Statements With Expense	es per Return
1	Total expenses and losses per audited financial statements	1 676,112
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities	
b	Prior year adjustments	
C	Other losses	
d	Other (Describe in Part XIII)	
e	Add lines 2a through 2d	2e
3	Subtract line 2e from line 1	3 676,112
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 4a	
b	Other (Describe in Part XIII)	
C	Add lines 4a and 4b	4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5 676,112

Return Reference

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

OMB No 1545-0047

2012

DLN: 93493256000213

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization
SOUTH DAKOTA PORK PRODUCERS COUNCIL

Employer identification number

46-0309257

Part I General Inform	nation on Grants	and Assistance					
 Does the organization ma the selection criteria used Describe in Part IV the or 	d to award the grants	orassistance?					▽ Yes ┌ N
					s. Complete if the or plicated if additional :		l "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SOUTH DAKOTA STATE UNIVERSITY PO BOX 2201 BROOKINGS,SD 57007			37,564				RESEARCH PROJECTS
(2) MITCHELL TECHNICAL INSTITUTE 1800 E SPRUCE ST MITCHELL,SD 57301			10,000				FARM BUSI MGMT PROGR
(3) AG UNITED FOR SD PO BOX 507 SIOUX FALLS,SD 57101			17,600				RESEARCH PROJECTS
2 Enter total number of sect	tion 501(c)(3) and go	vernment organizations	listed in the line 1 tabl	e			
3 Enter total number of other							
For Paperwork Reduction Act Noti	ice, see the Instruction	s for Form 990.		Cat No 50055P		Sch	edule I (Form 990) 2012

(b) Number of recipients	(c) A mount of cash grant	(d) A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
1		1		I
				recipients cash grant non-cash assistance (book,

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier Return Reference Explanation

Schedule I (Form 990) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493256000213

OMB No 1545-0047

2012

Supplemental Information to Form 990 or 990-EZ

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

Open to Public Inspection

Name of the organization SOUTH DAKOTA PORK PRODUCERS COUNCIL

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

46-0309257

ldentifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	TO INFLUENCE AND AFFECT THE INTERNAL AND EXTERNAL FACTORS RELATING TO PORK PRODUCTION ON THE FARM, MARKETING OF THE LIVE HOG, PROCESSING AND MERCHANDISING OF THE PRODUCT TO THE CONSUMER TO ENHANCE THE PRODUCERS' OPPORTUNITIES FOR PROFIT
EXPLANATION ON VOLUNTEERS AND TYPES OF SERVICES OR BENEFITS	FORM 990, PAGE 1, PART I, LINE 6	VOLUNTEERS PARTICIPATE IN PROMOTION EVENTS AND EDUCATION BOARD SERVES WITHOUT COMPENSATION
ALL OTHER ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	THE FOLLOWING PROGRAMS ARE INCLUDED PUBLIC POLICY, ASSOCIATION SERVICES AND MEMBERSHIP, ADMINISTRATIVE SERVICES, ANNUAL MEETING AND TRADE SHOWS THESE ARE NON CHECKOFF PROGRAMS
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	MEMBERS ELECT THE GOVERNING BODY
DECISIONS SUBJECT TO APPROVAL OF MEMBERS	FORM 990, PAGE 6, PART VI, LINE 7B	BOARD IS DECISION MAKING BODY
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	REVIEWED BY EXECUTIVE DIRECTOR AND THE EXECUTIVE BOARD AND THE BUDGET COMMITTEE
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	ANNUAL REVIEW BY BOARD
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	PERSONNEL COMMITTEE REVIEWS/BOARD APPROVES SALARY AND BENEFITS
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	EXECUTIVE DIRECTOR REVIEWS/BOARD APRROVES SALARIES AND BENEFITS
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	ON REQUEST

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -**Depreciation and Amortization**

DLN: 93493256000213 OMB No 1545-0172

► See separate instructions. ► Attach to your tax return.

(Including Information on Listed Property)

Sequence No 179

Department of the Treasury Internal Revenue Service (99)

Business or activity to which this form relates

	shown on return AKOTA PORK P	RODUCERS CO			or activity to w Γ DEPRECIAT		n relates		Identifying number
									46-0309257
Part I		To Expense (ou have any li					nnlete Part I		
1 Max	ımum amount (s							1	500,000
	al cost of section	•						2	
	eshold cost of se							3	2,000,000
	uction in limitation		•		•			4	_,,
	ar limitation for t					-0- If marri	ed		
	g separately, see							5	
	<u> </u>							<u> </u>	
6	(a)	Description of pr	roperty		(b) Cost (bu		(c) Elected	cost	
6						177			1
7 Listed	property Enter	the amount from	line 29 .			. 7			
8 Tota	al elected cost of	f section 179 pro	operty Add amo	unts ın col	lumn (c), lines	6 and 7 •		8	
9 Ten	tative deduction	Enter the small	er of line 5 or lin	e 8 • •				9	
10 Car	ryover of disallov	wed deduction fro	om line 13 of you	ur 2011 Fo	orm 4562 •			10	
11 Bus	iness income lim	nitation Enter the	e smaller of busi	ness incoi	me (not less th	nan zero) or l	ıne 5 (see		
ınst	ructions) •							11	
12 Sec	tion 179 expens	e deduction Add	d lines 9 and 10,	but do no	t enter more th	nan line 11		12	
13 Carry	over of disallowe	d deduction to 2	013 Add lines 9	and 10, le	ess line 12	. 13			
Note: D	o not use Part	II or Part III b	elow for listed	d property	y. Instead, u	se Part V.			
Part II	Special D	epreciation A	Allowance an	d Other	Depreciation	on (Do no	t include listed	proper	ty) (See instructions)
14 Spe	cıal deprecıatıon	allowance for qu	ualified property	(other tha	n listed proper	ty) placed in	service during		
the	tax year (see ins	structions)						14	
15 Pro	perty subject to s	section 168(f)(1) election					15	
	er depreciation (16	1,407
Part III	MACRS De	preciation (I	Do not include			e instruction	ons.)		
17 N/A		far acata place	d		ction A	2012		17	
	CRS deductions 1							17	
•	ou are electing to	• • •	•	_	•		· —		
	et accounts, che							<u> </u> preci	ation System
	ction b-Ass		(c) Basis		Z TAX TEAT		General De	<u>pi eci</u>	ation System
(a) (l)	assification of	(b) Month and	depreciati	ion I	(d) Recovery				(g)Depreciation
	property	year placed in	(business/inve	estment	period	(e) Conven	tion (f) Metl	hod	deduction
		service	use only—see instri	uctions)					
L 9a 3-yea	ar property		,						
b 5-yea	ar property								
c 7-yea	ır property								
	ear property								
	ear property								
	ear property	_			2.5		6.11		
	ear property				25 yrs	MM	S/L S/L		
n Kesia prope	ential rental				27 5 yrs 27 5 yrs	MM	S/L		
	sidential real				39 yrs	ММ	5/L		
prope					/	ММ	S/L		
		on C—Assets Plac	ced in Service Du	ıring 2012	Tax Year Using	the Alterna		on Sys	tem
20a Class	lıfe						S/L		
b 12-y					12 yrs		S/L		
c 40-y		<u>L</u> ,	<u> </u>		40 yrs	ММ	S/L		
Part IV		r y (see instruc						1	
	I property Enter							21	
	Add amounts fro								
	and on the appr			•	•		tructions • •	22	1,407
	sets shown abov n of the basıs att					23			

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Sepecial depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 1.	(i) Elected ection 179 cost
(a) Date placed in particular type of property (list vehicles first) Type of property (list vehicles first) Date placed in service precentage in service with the property placed in service during the tax year and used more than 25% in a qualified business use (see instructions) 15. Special deprecation allowance for qualified listed property placed in service during the tax year and used more than 25% in a qualified business use (see instructions) 15. Property used more than 50% in a qualified business use 15. Property used 50% or less in a qualified business u	Elected ection 17' cost
50% in a qualified business use 6 Property used more than 50% in a qualified business use 7 Property used 50% or less in a qualified business use 7 Property used 50% or less in a qualified business use 8 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), lines 26 Enter here and on line 7, page 1 29 Add amounts in column (i), lines 26 Enter here and on line 7, page 1 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year (do not include commuting) miles driven during the year (do not include commuting) miles driven during the year (a) 31 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees who are no % owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	(f)
17 Property used 50% or less in a qualified business use 17 Property used 50% or less in a qualified business use 18 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B—Information on Use of Vehicles 19 Openies this section for vehicles used by a sole proprietor, partner, or other "more than 55% owner," or related person rough even fix answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 20 Total business/investment miles driven during the year (do not include commuting miles) . 31 Total commuting miles driven during the year Add lines 30 through 32	(f)
7 Property used 50% or less in a qualified business use	(f)
77 Property used 50% or less in a qualified business use	(f)
7 Property used 50% or less in a qualified business use % %	(f)
8 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 29 Section B—Information on Use of Vehicles Section C—Information on Use of Vehicles Section B—Information on Use of Vehicles Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Section C—Questions for Employers Who Provide Vehicles, including commuting, by your Yes Yes The information on Use of Vehicles Section C—Questions for Employers Who Provide Vehicles including commuting, by your Yes Yes Section C—Vehicle 3 Section C—Questions for Employers Who Provide Vehicles, including commuting, by your Yes Yes Section C—Vehicles Section S—Vehicles Section S—Vehicles	(f)
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees in Source of the completing Section B for vehicles used by employees who are no wowners or related persons (see instructions)	(f)
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees in Section B for vehicles used by employees who are no ow owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	(f)
Section B—Information on Use of Vehicles omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (vehicle 1 Vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 Vehicle 5 (vehicle 2 Vehicle 3 Vehicle 4 Vehicle 5 (vehicle 4 Vehicle 5 (vehicle 3 Vehicle 4 Vehicle 5 (vehicle 4 Vehicle 5 (vehicle 4 Vehicle 5 (vehicle 5 (vehicle 6 (ve	(f)
Section B—Information on Use of Vehicles omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles 30 Total business/investment miles driven during the year (do not include commuting miles)	(f)
omplete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles 30 T otal business/investment miles driven during the year (do not include commuting miles)	(f)
you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles 30 Total business/investment miles driven during the year (do not include commuting miles)	(f)
Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees nswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are no womers or related persons (see instructions) 76 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	
year (do not include commuting miles)	venici
32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32	
32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32	
33 Total miles driven during the year Add lines 30 through 32	
through 32	-
during off-duty hours?	
Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees nswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are no owners or related persons (see instructions) To you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	Yes
owner or related person?	
Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees nswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are no % owners or related persons (see instructions) 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Ye:	
nswer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are no % owners or related persons (see instructions) 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your	
% owners or related persons (see instructions) 7 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes	
	ot more
' '	es N
<u> </u>	$-\!\!\!\!+\!\!\!\!\!-$
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners	
9 Do you treat all use of vehicles by employees as personal use?	
10 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received?	
11 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)	+
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles	
Part VI Amortization	
(h) (e)	
(a) Date Amortizable amortization begins (c) (d) Code section period or percentage (f)	
12 Amortization of costs that begins during your 2012 tax year (see instructions)	
13 A mortization of costs that began before your 2012 tax year	
44 Total Add amounts in column (f) See the instructions for where to report	

TY 2012 GeneralDependencySmall

Name: SOUTH DAKOTA PORK PRODUCERS COUNCIL

EIN: 46-0309257

Business Name or Person Name:

Taxpayer Identification Number:

Form, Line or Instruction

Reference:

Regulations Reference:

Description: GENERAL FOOTNOTE

Attachment Information: SOUTH DAKOTA PORK PRODUCERS COUNCIL 46-0309257 NET

OPERATING LOSS DEDUCTION FORM 990T LINE REFERENCE 31 NOL

CARRYFORWARD-1986 1,545 -1987 24,407 -1988 24,078 -1989 12,382 -1990 3,245 -1991 10,496 -1992 8,777 -1995 2,215 -----

-- CARRYFORWARD TO 2007 87,145 AMOUNT USED IN 2007

(1,650) ----- CARRYFORWARD TO 2008 85,495

DLN: 93493256000213

TY 2012 GeneralDependencySmall

Name: SOUTH DAKOTA PORK PRODUCERS COUNCIL

EIN: 46-0309257

Business Name or Person Name:

Taxpayer Identification Number:

Form, Line or Instruction

Reference:

Regulations Reference:

Description: WAIVE NOL CARRYBACK

Attachment Information: YEAR ENDING: DECEMBER 31, 2012 46-0309257 SOUTH DAKOTA

PORK PRODUCERS COUNCIL SOUTH DAKOTA PORK PRODUCERS COUNCIL 500 N WESTERN AVE SIOUX FALLS, SD 57104 NOL CARRYBACK ELECTION UNDER IRC SECTION 172(B)(3), THE TAXPAYER ELECTS TO RELINQUISH THE ENTIRE CARRYBACK PERIOD WITH RESPECT TO ANY REGULAR TAX AND AMT NET

OPERATING LOSS INCURRED DURING THE CURRENT TAX YEAR.