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Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

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▶ **Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.**

OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013, or tax year beginning 01-01-2013 , and ending 12-31-2013

Name of foundation DAN D BOOTH TRUST		A Employer identification number 45-2973513
Number and street (or P O box number if mail is not delivered to street address) PO BOX 611	Room/suite	B Telephone number (see instructions) (308) 249-5414
City or town, state or province, country, and ZIP or foreign postal code SIDNEY, NE 69162		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (From Part II, col. (c), line 16) ▶ \$ 5,470,584	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	75,965			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	34,272	1,962		
	4 Dividends and interest from securities.	155,890	152,656		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	16,703			
	b Gross sales price for all assets on line 6a 614,658				
	7 Capital gain net income (from Part IV, line 2)		16,703		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	11,099	3,872			
12 Total. Add lines 1 through 11	293,929	175,193			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	43,400	10,850		32,550
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	985	245		740
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	5,583	583		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	2,286	365		1,921
	24 Total operating and administrative expenses. Add lines 13 through 23	52,254	12,043		35,211
	25 Contributions, gifts, grants paid	192,500			192,500
26 Total expenses and disbursements. Add lines 24 and 25	244,754	12,043		227,711	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	49,175				
b Net investment income (if negative, enter -0-)		163,150			
c Adjusted net income (if negative, enter -0-)					

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

Part II Balance Sheets		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash—non-interest-bearing	8,379	21,736	21,736	
	2 Savings and temporary cash investments				
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____				
	4 Pledges receivable ▶ _____ 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 (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)				
	c Investments—corporate bonds (attach schedule)				
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)	4,693,278	4,729,096	5,448,848	
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____				
15 Other assets (describe ▶ _____)					
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	4,701,657	4,750,832	5,470,584		
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ▶ _____)				
	23 Total liabilities (add lines 17 through 22)		0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg, and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds	4,701,657	4,750,832		
	30 Total net assets or fund balances (see page 17 of the instructions)	4,701,657	4,750,832		
31 Total liabilities and net assets/fund balances (see page 17 of the instructions)	4,701,657	4,750,832			

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	4,701,657
2	Enter amount from Part I, line 27a	2	49,175
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	4,750,832
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	4,750,832

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, 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 See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	16,703
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	46

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2012	132,904	4,801,860	0.027678
2011	4,227	3,436,815	0.001230
2010			
2009			
2008			

2 Total of line 1, column (d)	2	0.028908
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.014454
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5	4	5,283,963
5 Multiply line 4 by line 3	5	76,374
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,632
7 Add lines 5 and 6	7	78,006
8 Enter qualifying distributions from Part XII, line 4	8	227,711

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	1,632
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2.	3	1,632
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	1,632
6	Credits/Payments		
a	2013 estimated tax payments and 2012 overpayment credited to 2013	6a	2,000
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	6d	
7	Total credits and payments Add lines 6a through 6d.	7	2,000
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	368
11	Enter the amount of line 10 to be Credited to 2014 estimated tax 368 Refunded	11	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b	No
c Did the foundation file Form 1120-POL for this year?.	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?.	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?.	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) NE		
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? <i>If "No," attach explanation .</i>	8b	Yes
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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i>	10	Yes

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of LISA CARTER Telephone no (308) 249-5414 Located at PO BOX 611 SIDNEY NE ZIP+4 69162			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.	15		
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes", enter the name of the foreign country	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2013?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20___, 20___, 20___, 20___			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20___, 20___, 20___, 20___			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2013.</i>)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

<p>5a During the year did the foundation pay or incur any amount to</p> <p>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(3) Provide a grant to an individual for travel, study, or other similar purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b</p> <p>Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/></p> <p>c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes," attach the statement required by Regulations section 53.4945–5(d).</p> <p>6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b No If "Yes" to 6b, file Form 8870.</p> <p>7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 7b</p>			
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000.

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). 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. ▶

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See page 24 of the instructions	
3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	5,333,377
b	Average of monthly cash balances.	1b	31,052
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	5,364,429
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	5,364,429
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	80,466
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	5,283,963
6	Minimum investment return. Enter 5% of line 5.	6	264,198

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	264,198
2a	Tax on investment income for 2013 from Part VI, line 5.	2a	1,632
b	Income tax for 2013 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	1,632
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	262,566
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	262,566
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	262,566

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	227,711
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 charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	227,711
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	1,632
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	226,079

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				262,566
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only.			100,296	
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2013				
a From 2008.				
b From 2009.				
c From 2010.				
d From 2011.				
e From 2012.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ <u>227,711</u>				
a Applied to 2012, but not more than line 2a			100,296	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2013 distributable amount.				127,415
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2013 <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2012 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				135,151
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).				
8 Excess distributions carryover from 2008 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a.				
10 Analysis of line 9				
a Excess from 2009.				
b Excess from 2010.				
c Excess from 2011.				
d Excess from 2012.				
e Excess from 2013.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2013, enter the date of the ruling.

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2013	(b) 2012	(c) 2011	(d) 2010	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

c "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)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept 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, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

LISA CARTER
 PO BOX 611
 SIDNEY, NE 69162
 (308) 249-5414
 DANBOOTHTRUST@YAHOO.COM

b The form in which applications should be submitted and information and materials they should include

PAPER APPLICATION SUBMITTED TO ASSIGNED PO BOX ADDRESS ALL INFORMATION AND MATERIALS TO BE INCLUDED ARE FOUND ON THE GUIDELINES AND APPLICATION-SEE EXHIBIT B

c Any submission deadlines

DEADLINE FOR SCHOLARSHIPS APPLICATIONS WILL CHANGE EACH YEAR AND WILL BE ON APPLICATIONS

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

APPLICANT MUST BE A CURRENT HIGH SCHOOL SENIOR OR FORMER GRADUATE, FROM 2010 TO CURRENT, OF ANY ACCREDITED HIGH SCHOOL IN THE FOLLOWING COUNTIES IN THE STATE OF NEBRASKA CHEYENNE, DEUEL, GARDEN, SHERIDAN, DAWES, BOX BUTTE, MORRILL, SIOUX, SCOTTSBLUFF, BANNER, AND KIMBALL

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i> INDIVIDUAL SCHOLARSHIPS VARIOUS VARIOUS, NE 69162	NONE	PAID	SCHOLARSHIPS FOR HIGHER EDUCATION	192,500
Total ▶ 3a				192,500
b <i>Approved for future payment</i>				
Total ▶ 3b				

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of
(1) Cash.
(2) Other assets.
b Other transactions
(1) Sales of assets to a noncharitable exempt organization.
(2) Purchases of assets from a noncharitable exempt organization.
(3) Rental of facilities, equipment, or other assets.
(4) Reimbursement arrangements.
(5) Loans or loan guarantees.
(6) Performance of services or membership or fundraising solicitations.
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [] Yes [x] No

b If "Yes," complete the following schedule
Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: ***** Date: 2014-05-15 Title: *****

May the IRS discuss this return with the preparer shown below (see instr.)? [] Yes [x] No

Paid Preparer Use Only
Print/Type preparer's name, Preparer's Signature, Date 2014-05-15, Check if self-employed [x], PTIN, Firm's name RAUNER & ASSOCIATES PC, Firm's EIN, Firm's address 1037 12TH AVE SIDNEY, NE 69162, Phone no.

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, 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.)
WA MANAGED MUNS FUND CL A	P	2012-06-15	2013-02-13
MUN ENERGY AGY NE PWR SPLY REV	D		2013-04-01
SYWORKS SOLUTIONS INC	D		2013-10-18
WA MANAGED MUNS FUND CL A	P	2012-01-15	2013-02-13
NEBRASKA INVT FIN AUTH REV	D		2013-08-01
WHITING USA TRUST I	D		2013-05-07
ALBEMARLE CORP	D		2013-05-07
NE PUB PWR DIST REV	D		2013-07-01
BROOKFIELD PROPERTY PARTNERS	D		2013-04-16
CORNHUSKER PUB PWR DIST NE	D		2013-09-10
PEREGRINE PHARMACEUTICALS INC	D		2013-05-07
EXELIS INC	D		2013-04-16
TREDEGAR INDUSTRIES INC	D		2013-03-10
GASCO ENERGY INC	D		2013-04-16
WHITING USA TRUST I	D		2013-03-01
GMX RESOURCES INC	D		2013-04-16
XYLEM INC	D		2013-05-07
ITT CORP	D		2013-05-07
ALCATEL LUCENT SPONSORED ADR	D		2013-04-16
IVANHOE ENERGY INC	D		2013-04-16
BROOKFIELD ASSET MGMT INC	D		2013-05-07
WA MANAGED MUNS FUND CL A	D	2012-01-15	2013-02-13
MERITOR INC	D		2013-05-07
LEVEL 3 COMMUNICATIONS INC	D		2013-05-07
MINDSPEED TECHNOLOGIES INC	D		2013-04-16
LIBERTY STAR URANIUM & METALS	P		2013-04-16
PERMIAN BASIN ROYALTY TRUST	D		2013-05-07
LINCOLN NEB ELEC SYS REV RFDG	D		2013-09-03
QWEST CAPITAL FDG INC GTD NT	D		2013-10-29
LINCOLN NE ELEC SYS REV & RFDG	D		2013-09-03

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, 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)
ROCKWELL AUTOMATION INC	D		2013-05-07
MUN ENERGY AGY NE PWR SPLY REV	D		2013-04-01
ROCKWELL COLLINS INC	D		2013-05-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
2,590		2,544	46
5,000		5,112	-112
10,341		7,366	2,975
496		487	9
10,000		10,158	-158
2,147		6,629	-4,482
23,709		15,417	8,292
25,000		26,288	-1,288
18			18
45,000		46,548	-1,548
3,682		3,537	145
997		996	1
8,885		5,843	3,042
737		5,914	-5,177
164			164
10		1,449	-1,439
2,707		2,470	237
1,400		4,287	-2,887
245		499	-254
510		1,570	-1,060
42,546		27,480	15,066
68,275		63,221	5,054
1,785		4,045	-2,260
3,878		2,050	1,828
181		519	-338
		27	-27
36,767		56,250	-19,483
125,000		132,165	-7,165
20,855		19,800	1,055
55,000		57,214	-2,214

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
52,496		30,214	22,282
25,000		25,555	-555
39,237		32,301	6,936






Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			46
			-112
			2,975
			9
			-158
			-4,482
			8,292
			-1,288
			18
			-1,548
			145
			1
			3,042
			-5,177
			164
			-1,439
			237
			-2,887
			-254
			-1,060
			15,066
			5,054
			-2,260
			1,828
			-338
			-27
			-19,483
			-7,165
			1,055
			-2,214

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			22,282
			-555
			6,936

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
D MARK FENSKE  PO BOX 611 SIDNEY, NE 69162	CHAIRMAN 1 00	8,480	0	0
DOYLE MISEGADIS  PO BOX 611 SIDNEY, NE 69162	VICE-CHAIRMA 1 00	8,480	0	0
GARY PUTMAN  PO BOX 611 SIDNEY, NE 69162	SECRETARY 2 00	8,480	0	0
LISA CARTER  PO BOX 611 SIDNEY, NE 69162	TREASURER 5 00	9,480	0	0
MARILYN BOOTH  PO BOX 611 SIDNEY, NE 69162	TRUSTEE 1 00	8,480	0	0

Schedule B
(Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No 1545-0047

▶ Attach to Form 990, 990-EZ, or 990-PF.

2013

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

Name of the organization
DAN D BOOTH TRUST

Employer identification number
45-2973513

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
DAN D BOOTH TRUST

Employer identification number
45-2973513

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAN D BOOTH ESTATE 80120 HIGHWAY 183 WESTERVILLE, NE 68881	\$ 75,965	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization
DAN D BOOTH TRUST

Employer identification number
45-2973513

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	VARIOUS STOCKS FOUND	\$ 75,965	2013-04-15
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization
DAN D BOOTH TRUST

Employer identification number
45-2973513

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry
For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once. See instructions.) \$
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____ _____ _____	_____ _____ _____

TY 2013 Accounting Fees Schedule

Name: DAN D BOOTH TRUST

EIN: 45-2973513

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	985	245		740

TY 2013 Compensation Explanation

Name: DAN D BOOTH TRUST

EIN: 45-2973513

Person Name	Explanation
D MARK FENSKE	
DOYLE MISEGADIS	
GARY PUTMAN	
LISA CARTER	
MARILYN BOOTH	

TY 2013 Investments - Other Schedule

Name: DAN D BOOTH TRUST

EIN: 45-2973513

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
EXH A -ED D. JONES INVESTMENT ACCT	AT COST	4,729,096	5,448,848

TY 2013 Other Expenses Schedule

Name: DAN D BOOTH TRUST

EIN: 45-2973513

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
SUPPLIES	309	77		232
SCHOLARSHIP COMMITTEE	1,500			1,500
STOCK REISSUE	288	288		
POSTAGE	189			189

TY 2013 Other Income Schedule**Name:** DAN D BOOTH TRUST**EIN:** 45-2973513

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
EDWARD JONES	3,622	3,622	
SOCIAL SECURITY ASSOCIATION	185	185	
SEARS HOLDING MGMT CORP	65	65	
PRIOR YEAR TAX REFUND	7,227		

TY 2013 Substantial Contributors Schedule**Name:** DAN D BOOTH TRUST**EIN:** 45-2973513

Name	Address
DAN D BOOTH ESTATE	80120 HWY 183 WESTERVILLE, NE 68881

TY 2013 Taxes Schedule

Name: DAN D BOOTH TRUST

EIN: 45-2973513

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PAID	583	583		
FEDERAL TAX ESTIMATE	2,000			
PRIOR YEAR PAYMENT	3,000			

Exhibit A - Investment Summary
Edward Jones Investment Account

Stock Description	Cost Basis	Fair Market Value 12/31/13
Cash & Money Market		
Money Market	\$ 83,447.89	\$ 83,447.89
Municipal Bonds		
Douglas County NE Hospital Authority #3	54,515.00	51,637.50
Lancaster County NE Correctional Facility	61,703.95	61,140.75
Nebraska Edl Fin Auth Rev	42,883.50	39,825.00
Nebraska Public Power District	25,555.00	25,755.25
Nebraska Public Power District Series C	93,186.90	89,154.90
Pennsylvania State Turnpike Commn Rev Sub Ser D	59,583.70	59,292.60
Phoenix Arizona Civic Impt Corp Revenue Ser A	59,785.95	59,382.00
Public Power Generation Agency	26,834.00	26,344.00
Washington St Higher Ed Facs Auth Reve Rfds Univ Puget Sound	59,104.95	58,642.80
Washoe County Nevada Highway Revenue Fuel Tax Bonds	44,937.45	44,595.90
Stocks		
Albemarle Corporation	15,416.70	24,722.10
Boeing Co	6,150.60	13,921.98
BP PLC Sponsored ADR	148,895.64	208,342.46
Brookfield Asset Mgmt Inc	27,504.66	43,256.62
Centurylink Inc	10,068.48	9,682.40
Chevron Corp	12,263.65	20,859.97
Comcast Corp Cl A	1,438.08	4,365.06
Rockwell Automation Inc	30,214.44	72,313.92
Rockwell Collings Inc	32,301.36	45,239.04
Sempra Energy	205,440.00	359,040.00
Well Fargo & Co	653,333.28	1,270,836.80
Xcel Energy Inc.	3,417.75	4,330.70
Mutual Funds		
Franklin US Government Secs A	2,800,376.00	2,627,621.58
Integrity Nebraska Muni Fund Account	113,172.48	101,043.23
Limited Partnerships		
Brookfield Infrastructure	657.37	2,941.50
Brookfield Property Partners L P	657.38	2,532.38
Other Investments		
Permian Basi Royalty Trust	56,250.00	38,580.00
Total Investments	<u>\$ 4,729,096.16</u>	<u>\$ 5,448,848.33</u>

EXHIBIT B

BOOTH-ENGLERT FAMILIES' SCHOLARSHIP

Guidelines:

- 1 Applicant must (a) be a current high school senior or former graduate (from 2010 to current) of any accredited high school in the following counties in the State of Nebraska Cheyenne, Deuel, Garden, Sheridan, Dawes, Box Butte, Morrill, Sioux, Scotts Bluff, Banner, and, Kimball, (b) demonstrate substantial financial need, and (c) attend an accredited public or private post secondary institution (university, community college, or trade school) in the 2014- 2015 school year
- 2 The scholarship money can only be used for tuition, books, and, housing billed through the institution
- 3 Approximately forty (40) scholarships will be awarded in the amount of \$5,000.00 The Scholarship awards may not be carried over to any subsequent year, however, recipients may re-apply in subsequent years
4. The scholarship shall be applied one half for the fall semester and one half for the spring semester If the student fails to enroll in the fall semester, the full scholarship will be forfeited. Should the student not reenroll for the spring semester one half of the scholarship will be forfeited
5. All checks will be made payable to the college, university, community college, or trade school that the recipient will be attending No funds will be given directly to any recipient
- 6 Scholarship decisions will be made by the Trustees of the Dan D. Booth Trust. Selection criteria also includes, personal history; academic record (at least a 2.5 GPA – C + average); financial need; education and career goals; relevance of planned course of study; character references; motivation; and, ability to succeed.
- 7 In addition to information specifically requested on the application, applications must include: (a) high school and college transcripts (college transcript if applicable), (b) one letter of recommendation from an administrator, teacher, counselor, etc , (c) ACT/SAT test scores if not included in your transcript, (d) resume or a listing of awards, honors, and, academic, extracurricular and community/volunteer activities, (e) essay; and (f) FAFSA.
8. **Application deadline is by March 30, 2014. Applications postmarked after said date will not be considered. Completed application form and student transcript, letter of recommendation, ACT/SAT test score(s), resume, essay, and FAFSA must be submitted in one packet to:**

Dan D. Booth Trust
c/o Booth Englert Families' Scholarship
P.O. Box 611
Sidney, NE 69162
DanDBoothTrust@yahoo.com (if via e-mail)

- 9 Scholarship recipients will be notified in May of 2014, by mail, e-mail and/or phone

EXHIBIT B

DAN D. BOOTH TRUST
SCHOLARSHIP APPLICATION 2014

(For current high school seniors or former graduates (from 2010 to current) of any accredited high school in the following counties in the State of Nebraska - Cheyenne, Deuel, Garden, Sheridan, Dawes, Box Butte, Morrill, Sioux, Scotts Bluff, Banner, and, Kimball)

This application form must be completed by all students applying for scholarships from the DAN D. BOOTH TRUST. Please use the Booth-Englert Families' Scholarship Guidelines for additional reference in filling out the application and attaching all required documents. It is important to include all applicable required attachments with your application. Failure to include all required information will render your application void. Do not include binders or report covers. This application is due **March 30th, 2014**. Please submit this application and required attachments to: **Dan D. Booth Trust, c/o Booth-Englert Families' Scholarship, P.O. Box 611, Sidney, NE 69162**, or DanDBoothTrust@yahoo.com (if via e-mail)

Scholarship Name: BOOTH-ENGLERT FAMILIES' SCHOLARSHIP

STUDENT INFORMATION:

Student First Name: _____ Last Name: _____ Middle Initial: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Primary Phone Number: _____

This is my (X one): Cell Home Work

Additional Phone Number(s): _____

(Please email dandboothtrust@yahoo.com if your contact information changes. If we are unable to contact you when scholarships are awarded, and you were a selected applicant, you will forfeit your award.)

Email: _____

Gender (X one): Female Male

Permanent Address (if not same as Current Address):

City: _____ State: _____ Zip: _____

Last 4-digits of Student's SSN#: _____

Date of Birth: _____

EXHIBIT B

EDUCATION:

Are you a (X one): GED High School Graduate High School Senior
 Undergraduate Student Graduate Student

High School Information:

High School Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Graduation Year: _____; GPA (must be 2.5 {C+} or greater) : _____;

Class Rank: _____; /# in Class: _____

ACT/SAT Score: _____ [Please attach a copy of your test score if it is not included on your high school transcript]

High School Seniors (if applicable):

College or University you Plan to Attend (If known include address/phone):

Will you be registered as a full-time student during upcoming year? (X one): Yes No

If no, please explain: _____

Do you expect to work during the academic year (including work study)? (X one): Yes No

If yes, how many hours per week? Name/phone # of Employer

College (Undergraduate and Graduate) Information (if applicable):

Current College/University Name: _____

Address: _____

City: _____ State: _____ Zip: _____

EXHIBIT B

Graduation Year: _____; GPA (must be 2.5 {C+} or greater): _____; [Please attach a copy of your transcript]

Anticipated Graduation Date: _____; GPA (must be 2.5 {C+} or greater): _____;

Major(s): _____

Minor(s): _____

Will you be registered as a full-time student during upcoming year? (X one):Yes ... No

If no, please explain: _____

Do you expect to work during the academic year (including work study)? (X one): ...Yes No
If yes, how many hours per week? Name/phone # of Employer _____

Previous College/University: (Please provide on an attachment the following information: Name; Address; Dates Attended; GPA; and, Major(s) of other Colleges/Universities attended)

EMPLOYMENT:

Are you currently employed? : _____ Yes; _____ No

If yes, Employer: _____

Is this part-time employment? : _____ Yes; _____ No

How many hours per week do you work? : _____

Job Title and Description of Job: _____

Employer Address: _____

City: _____ State: _____ Zip: _____

PARENT/GUARDIAN INFORMATION (Attach FAFSA):

Marital Status of Parents (X one): .Single Married . . Separated . . Divorced . . Widowed

Father's Name: _____ Age: _____

Current Address: _____

EXHIBIT B

City: _____ State: _____ Zip: _____
Employment Status (employed, unemployed, retired, stay at home parent, etc.): _____
If employed, Employer or Description of Business, if Self Employed: _____

Mother's Name: _____ Age: _____
Address: _____
City: _____ State: _____ Zip: _____
Employment Status (employed, unemployed, retired, stay at home parent, etc.): _____
If employed, Employer or Description of Business, if Self Employed: _____

Guardian's Name: _____ Age: _____
Current Address: _____
City: _____ State: _____ Zip: _____
Employment Status (employed, unemployed, retired, stay at home parent, etc.): _____
If employed, Employer or Description of Business, if Self Employed: _____

ADDITIONAL FAMILY INFORMATION:

of Siblings: _____; # of Siblings in College in 2013-14: _____

ACTIVITIES:

Academic, Extracurricular and Community/Volunteer Activities (Please list your activities on a separate sheet, or attach your current high school or college resume and indicate that a resume is attached) _____

Honors and Awards (Please on a separate sheet list honors and awards you have received, or attached your current high school or college resume and indicate that a resume is attached): _____

ESSAY:

Essay—Why do you need the Booth-Englert Families' Scholarship? Please expand on your need of this scholarship and how this scholarship will help with your educational goals. What future educational, occupational, and personal goals do you have, and again how will this scholarship help you in achieving those goals? What plans have you made for the next five to ten years? Be specific and be thoughtful. (Please attach your essay. Your essay must be 500 words or less.)

EXHIBIT B

OTHER INFORMATION:

Have you previously been awarded a Booth-Englert Families' Scholarship? (X one): ___ Yes ___ No

If so, what year(s)? _____

How did you hear about the Booth-Englert Families' Scholarship?

THE UNDERSIGNED CERTIFIES, that all of the information on this application form is true and complete to the best of my knowledge. If asked by the Trustees of the **Dan D. Booth Trust**, I agree to give documentation for information given on this form, and I realize that failure to comply with this request for information may prevent me from being considered for scholarships. I understand that falsification of any information may result in the termination of a scholarship if one is granted to me. If I am selected as a recipient of a Booth-Englert Families' Scholarship, I agree to permit the Trustees to confer with my school to verify my continuing enrollment during the term of my scholarship. I also agree that my name can be used in announcements made by the **Dan D. Booth Trust** regarding the particular scholarship(s) which I have been awarded. I understand that to receive my scholarship award, I will be required to submit a thank you letter to my scholarship donor(s) and proof of enrollment at my college/university.

Applicant's Signature:

Date: _____

► *Attachments to this application are required. Check the individual guidelines for the Booth-Englert Families' Scholarship for these requirements (i.e. letters of recommendation, transcripts, financial information, resumes, essay, etc.).*