

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



Form '990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public
Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Open to Public Inspection

Α	For the	2013 calen	dar year, or ta	x year begir	ıning		, 2013,	and endir	ng .		,	
В	Check if a	pplicable	С							D Employer I	dentification N	lumber
	Addr	ess change	Pima Cou	ntv Juni	or Livesto	ck Sale	s. Inc			86-05	43984	
	H-1	e change			de Las Qui		0, 10	•		E Telephone		
	\vdash	return	Sahuarit							520 6	22 0421	i
	\vdash			•						320-6	23-0421	
	Terminated									١_	A	
	Ame	nded return							,	G Gross recei		464,436.
	Appli	cation pending	I		al officer					a group return fo		
			Same As	C Above					H(b) Are all If 'No.'	subordinates ind attach a list (se	luded? e instructions)	Yes No
ı	Tax-exe	empt status	X 501(c)(3)	501(c) () ◀ (ınsert	no) 49	47(a)(1) or	527]		,	
J	Webs	ite: > N/	'A						H(c) Group	exemption numb	er ►	
ĸ	Form o	organization	X Corporation	Trust	Association C	Other -	LY	ear of format	tion	M State	of legal domi	cile A7
Pa	ırt I	Summar	v	<u> </u>	- - -							
ت	1 B	riefly descri	be the organiz	ation's miss	ion or most sign	ificant activ	ities: Fo	incatio	n - As	cict /-F	Progra	ame
		•			3		<u></u>	raca r ro	m – vs	2125 -4- [i Trodro	3m2
Governance	-											·
ם	-											
ĕ	2 c	heck this be	ox ► Tuf the	organizatio	n discontinued i	ts operation	s or dispo	osed of mo	ore than 2	5% of its net	assets	. – – – – – –
යි	3 N				rning body (Part			555G 01 111	oro triair E		3	4
વ્હ					s of the governir			1b)			4	0
Activities &	5 T	otal numbei	r of individuals	employed ii	n calendar year :)		<u> </u>	5	0		
ĕ	6 T	otal numbei	r of volunteers	(estimate if	necessary)	•	·			<u> </u>	5	0
Ac	7a T∙	otal unrelat	ed business re	venue from	Part VIII, columi	n (C), line 1	2				7 a	0.
	ЬN	et unrelated	d business tax	able income	from Form 990-	T, line 34					7 b	0.
			•						Р	rior Year	Cu	rrent Year
	8 C	ontributions	and grants (E	art VIII, line	<u>1h)</u>	,				2,150),	8,550.
Revenue	9 P	rogram serv	vice revenue (l	Part VIII, Ime	2g)\/ED					395,180		455,769.
Ş	10 Ir	vestment ir	ncome (Part 🎖	III, column (A), lines 3, 4, an	nd (7d)				10:		117.
æ					nes <u>5,</u> 6d, 8c, 96		l1e) .		—		-	
					(must equal Pa			ne 12)		397,43		464,436.
					IX, column (A),			<u>-</u>	- 			
					Xrcolumn (A), li			 				
	15 S	alaries oth	er compensati		benefits (Bart							
es	I		ner compensation, employee benefits (Part IX, column (A), lines 5-10) I fundraising fees (Part IX, column (A), line 11e)									
Expense			_	-		•		•	ļ			
×	b ™	otal fundra	sıng expenses	(Part IX, co	lumn (D), line 25	5) ▶						
Ú	17 0	ther expens	ses (Part IX, c	olumn (A), li	nes 11a-11d, 11	f-24e)				393,460	5.	452,827.
	18 T	otal expens	es. Add lines	13-17 (must	equal Part IX, co	olumn (A), l	ine 25)			393,460		452,827.
	1	=		•	8 from line 12	• //	•			3,96		11,609.
Ats of Expense	 								Poginnu	ng of Current Y		nd of Year
. t a	20 T	otal assets	(Part X, line 1	6)					beginnin	76,26	* * * * * * * * * * * * * * * * * * * *	
Assed Bala			es (Part X, line			•		•		328		87,875. 328.
ڃَ ڇَ			•	•	. 01 form less	00						
				s. Subtract I	ine 21 from line	20				75,938	3.	87,547.
Pa	Part II Signature Block											
Unde	er penaltie	s of perjury, I d	eclare that I have e	emined this ret	urn, including accomp	anying schedule	s and staten	nents, and to	the best of m	ny knowledge and	belief, it is tru	ue, correct, and
COIT	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge											
										2 +9-	19	
Siç	gn	Signati	are of onices						Da	ate		
He	re		<u>rett Ham</u>						Treas	surer		
		Type o	r print name and tit	le								
		Print/Type (preparer's name		Preparer's Signature	e		Date		Check	PTIN	
Pa	id	David	M. Manci	ni, CPA	David 4.	Mancini	, CPA	2/11,	/14	self-employed	P0052	29205
	eparer				nt Service						12002	
	e Only			E. Gran		<u>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<u> </u>			Firm's EINI >	46_2702	2264
_		5 0001									46-3792	
Max	the IP	S discuss th	Tucso		shown above?	(ann unah	4			Phone no (6-0800
							uons)	•				es No
DA	M FOFP	aperwork h	reduction Act	notice, see	the separate ins	tructions.		TE	EA0113L 11.	/08/13	F	orm 990 (2013)

Form **990** (2013)

TEEA0113L 11/08/13

orn	n 990 (2013) Pima County Junior Livestock Sales, Inc.	<u>86-054398</u>	34 Page 2
Par	rt III Statement of Program Service Accomplishments		Г
	Check if Schedule O contains a response or note to any line in this Part III .		
1	- many - a common a management of the common		
	Education - Assist 4-H Programs		
2	Did the organization undertake any significant program services during the year which were not listed on the prior	r	
	Form 990 or 990-EZ?		Yes X No
	If 'Yes,' describe these new services on Schedule O	_	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	/ices?	Yes X No
	If 'Yes,' describe these changes on Schedule O		_
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of others, the total expenses, and revenue, if any, for each program service reported	ces, as measure grants and alloca	ed by expenses. Itions to
4 8	a (Code:) (Expenses \$ 448,938. including grants of \$ 6,325.) (Re	evenue \$)
	Auction of livestock for the 4-H was carried out at the Pima Coun		2012
	All livestock legally entered in the sale was sold, with net proc		
	participants.		
			······································
4 5	b (Code:) (Expenses \$ including grants of \$) (Re	evenue \$)
40	C (Code:) (Expenses \$ including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$ including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$ including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$ including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$ including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
40	c (Code:) (Expenses \$including grants of \$) (Re	evenue \$	
		evenue \$)
	d Other program services. (Describe in Schedule O)	evenue \$	
4 c		evenue \$)

			res	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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
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		Х
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 I.	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III .	8		Х
9	Did the organization report an amount in Part X, line 21, 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	9		Х
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		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
ā	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	-
t	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	11 b		Х
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 .	11 c		Х
C	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	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
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	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	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	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions).	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
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		Х
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
Ł	o If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		
_		_		

	10.000mster Heganies Continues		Yes	No
21	Did the second first second was the dE 000 (162	140
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or 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		Х
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		х
24 a	a 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 25a	24a		х
ı	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	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?	24c		
	a 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		Х
l	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		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		х
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		Х
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):			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M .	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
ł	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		х
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		Х
38	Note. All Form 990 filers are required to complete Schedule O.	38		X
BAA		Form	990 (2013

Check if Schedule O contains a response or note to any line in this Part V			Г
		Yes	No
1 a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b 0			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
(gambling) winnings to prize winners?	ī c		
2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-	\neg		-
ments, filed for the calendar year ending with or within the year covered by this return . 2a			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	-	Х
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule 0</i>	3 b		
4 a 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)?	4 a		Х
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	1		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?.	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6.3 Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	\neg		
6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were			
not tax deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and			_
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			7,
Form 8282?	7 c		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	, a		
Form 1098-C?	7 h		
8 Sponsoring organizations maintaining donor advised funds and section 509(aV3) supporting organizations. Did the			
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.			
a Did the organization make any taxable distributions under section 4966?	9 a		
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter:			
a Initiation fees and capital contributions included on Part VIII, line 12 10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			İ
11 Section 501(c)(12) organizations. Enter.			
a 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.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		l
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	124		-
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		-
Note. See the instructions for additional information the organization must report on Schedule O.	.3a		-
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 13b			
c Enter the amount of reserves on hand			ĺ
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14 b		<u> </u>
PAA .			

Form 990 (2013) Pima County Junior Livestock Sales, Inc. 86-0543984 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the cırcumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 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 1 b 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 Х 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 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . 4 X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? X 6 7 a 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? 7 a Х b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7 b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a Х b Each committee with authority to act on behalf of the governing body? X 8 b 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х b 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 . . . 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12_b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 120 13 Did the organization have a written whistleblower policy? X 13 14 Did the organization have a written document retention and destruction policy? X 14 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? a The organization's CEO, Executive Director, or top management official 15 a Х **b** Other officers of key employees of the organization $\overline{\mathbf{x}}$ 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х 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 taken steps to safeguard the organization's exempt status with respect to such arrangements? 16_b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Another's website Own website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. See Schedule O 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

							.	_	06.0540	004
Form 990 (2013) Pima County Jun Part VII Compensation of Officers	or Li	vest	OC.	K S	aı	es, Kev	In Fm	c. Inlovees Highes	86-0543 t Compensated F	
Independent Contractors		•				-			t domponsated L	pioyees, and
Check if Schedule O contains a										
Section A. Officers, Directors, Tru	stees, K	ey E	mp	loy	ees	, and	iH t	ighest Compensa	ited Employees	
1 a Complete this table for all persons required organization's tax year.								_		. ,
• List all of the organization's current o compensation Enter -0- in columns (D), (E)), and (F)	ıf no c	om	pens	atio	n was	s pai	d.		imount of
 List all of the organization's current k 										
 List the organization's five current hig who received reportable compensation (Box organization and any related organizations. 	5 of Forn	n W-2	and	l/or E	Зох	7 of F	orm	1099-MISC) of more	than \$100,000 from	he
List all of the organization's former of of reportable compensation from the organization.	on and any	relate	d or	ganı	zatio	ons		· ·		than \$100,000
 List all of the organization's former director organization, more than \$10,000 of reportable 										
List persons in the following order: individual employees; and former such persons	al trustees	or dır	ecto	ors; ı	nstı	tution	al tr	ustees; officers; key e	employees, highest co	ompensated
X Check this box if neither the organization n	or any rela	ted org	ganı	zatio	n co	mpens	sate	d any current officer, di	rector, or trustee.	
				(C	;)					
(A) Name and Title	(B) Average hours per week (list	one bo	x, un	iless p	perso	more to soll or/trusted	h an	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	the organ		the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) Celia Burkel	0							0.	0.	0
Secretary (2) Patty Todd	0							0.	0.1	0.
President	 	 					1	0.	0.	0.
(3) Laura Levin	0		\vdash	\vdash				<u> </u>	0.1	<u> </u>
Vice President	10							0.	0.	0.
(4) Garrett Ham	0									<u></u>
Treasurer	0	Ì						0.	0.	0.
(5)										

(7)

(10)

(11)

(13)

(12)

Part VII Section A. Officers, Directors, Tru		Key	En	ıplo ()		es,	and	d Highest Com	pensated Emp	loyees	(contu	nued)
(A) Name and title	Average hours per	box	Position do not check more than one ox, unless person is both an fficer and a director/trustee)				h an	(D) Reportable compensation from	(E) Reportable compensation from	E:	(F) stimated unt of oth	her
	week (list any hours for related organiza - tions below dotted line)			Officer			Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	com fi org an	intersation from the fanization d related anization	n d
15)											-	
16)												
(17)		-					-					
[18]												
[19]	 	 										
(20)		<u> </u>										
(21)												
(22)												
(23)												
(24)												
(25)												
1 b Sub-total	•	٠	•				F	0.	0.			0
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	on A	•				•	•	0.	0.			0
2 Total number of individuals (including but not limited from the organization ▶ 0	to those I	isted	abo	ve) '	who	recei	ved			ensatio	n	
		ıctoo	ko		2010		or h	ughost compans	ted employee		Yes	No
on line 1a? If 'Yes,' complete Schedule J for such	h ındıvıdı	ıal				-				3		Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual.	r than \$1	150,0	00?	lf "	Yes'	com	plet	te Schedule J for	irom	4	-	_x
5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If 'Yes	comper , ' comple	nsatio	on fi che	om dule	any J fo	unre or suc	elate ch p	ed organization or person	ındıvıdual	5		Х
1 Complete this table for your five highest compensation from the organization Report compen	sated ind	lepen	iden	it co	ntra	ctors	tha	at received more t	han \$100,000 of	,		
(A) Name and business addi		4100		iuu.	yea	Cila	ng ,	(B Description)		C) ensatio	n
					-							
Total number of independent contractors (including by	ut not lim	nited t	o th	ose	liste	d abo	ve)	who received more	than			
\$100,000 of compensation from the organization	<u>► 0</u>	TEFA					/				990	

	Check if Schedule O contains a response or note to any	line in this Part V	III		
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
13 13	1 a Federated campaigns 1 a				!
E S	b Membership dues 1 b				
S. G	c Fundraising events 1 c				
등목	d Related organizations				
SIS.	e Government grants (contributions)				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1 f 8,550.				
울	g Noncash contributions included in lines 1a-1f. \$ h Total. Add lines 1a-1f				
끸	Business Code	8,550.			
옯	2a Livestock Sales	455,769.			455,769.
즱	p p procedures	433, 103.			455,765.
띨	c			<u></u>	
€	d				
S =	e				
8	f All other program service revenue			-	
쭕	g Total. Add lines 2a-2f	455,769.			
\neg	3 Investment income (including dividends, interest and				
- 1	other similar amounts). 4 Income from investment of tax-exempt bond proceeds.	117.	117.		
	Income from investment of tax-exempt bond proceeds.Royalties				
l	(i) Real (ii) Personal				
	6 a Gross rents				
	b Less: rental expenses				,
1	c Rental income or (loss)				
	d Net rental income or (loss)				,
ŀ	7 a Gross amount from sales of (i) Securities (ii) Other			,	
	assets other than inventory .				'
	b Less: cost or other basis				
	and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ▶				
핔	8a Gross income from fundraising events				
OTHER REVEN	(not including .\$ of contributions reported on line 1c).				
E	See Part IV, line 18				
崩	b Less: direct expenses b				
5	c Net income or (loss) from fundraising events.				-
	9 a Gross income from gaming activities. See Part IV, line 19			·-·	
Į	b Less direct expenses b				
	c Net income or (loss) from gaming activities		, - 		
	10a Gross sales of inventory, less returns and allowances a				
	b Less. cost of goods sold b		 -		
}	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
ł	11a				-
	b				
	c				
	d All other revenue				-
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	464,436.	117.	0.	455,769.

Pima County Junior Livestock Sales, Inc. 86-0543984 Page 10 Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (A) (B) (C) **(D)** Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 0 0 0 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management **b** Legal c Accounting 1,096 1.096 **d** Lobbying e Professional fundraising services. See Part IV, line 17 f Investment management fees Other (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion 546. 546. 13 Office expenses 168. 168 14 Information technology 510. 510 15 Royalties Occupancy. 17 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates Depreciation, depletion, and amortization 2,659 2,659 23 2,625 2,625 24 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) 434,267 434,267 Sale Proceeds to Participants b Buyer Recognition _ 3,747 3,747 c <u>Luncheons</u> _ 2,130 2,130 d Auctioneer, Inspector _ _ _ 1,738 1,738 e All other expenses 3,341. 3,341 25 Total functional expenses. Add lines 1 through 24e 452,827 448,938. 3,889 0. 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

Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash - non-interest-bearing 12,816 10,894. Savings and temporary cash investments 2 2 48,539 52,414. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L $\,$. 5 5 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 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10 a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 55,169 b Less: accumulated depreciation 10b 14,911 10 c 30,602 24.567 11 Investments – publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 76,266 16 87,875 17 Accounts payable and accrued expenses <u>17</u> 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties. 23 24 Unsecured notes and loans payable to unrelated third parties 24 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 25 328 328. Total liabilities. Add lines 17 through 25 26 26 328 328. Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 75,938 27 87,547. Temporarily restricted net assets 28 Permanently restricted net assets 29 õ Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund . 31 BALAZOES Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances... 75,938 33 87,547. 34 Total liabilities and net assets/fund balances 34 76.266 87,875. BAA Form 990 (2013)

TEEA0111L 07/08/13

Forh	n 990 (2013) Pima County Junior Livestock Sales, Inc.	<u>86-0543984</u>		_Pa	ige 12		
Par	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	64,4	136.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	52,8	327.		
3	Revenue less expenses Subtract line 2 from line 1	3		11,6	509.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			938.		
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			0.		
10	10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))						
Pai	t XII Financial Statements and Reporting	+ +		<u> </u>	547.		
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: X Cash Accrual Other						
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re separate basis, consolidated basis, or both.	eviewed on a					
	Separate basis Consolidated basis Both consolidated and separate basis						
I	Were the organization's financial statements audited by an independent accountant?		2 b		Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a statement basis, consolidated basis, or both Separate basis Both consolidated and separate basis	separate					
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2 c				
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii Audit Act and OMB Circular A-133?	•	3 a		Х		
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ed audit	3 b				
BAA			Form	990	(2013)		

SCHEDULE A (Form 990 or 990-EZ)

Total

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service at www.irs.gov/form990. Employer identification number Pima County Junior Livestock Sales, 86-0543984 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 7 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h 11 Type II Type III - Functionally integrated d | Type III - Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) below, the governing body of the supported organization? A family member of a person described in (i) above? 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s). h (ii) EIN (v) Did you notify the organization in column (i) of your support? (i) Name of supported (III) Type of organization (iv) is the (vi) Is the (vii) Amount of monetary (described on lines 1-9 above or IRC section (see instructions)) organization in column (i) organized in the US? organization organization in column (i) listed in your governing document? No Yes No No Yes Yes (A) (B) (C) (D) (E)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	tion A. Public Support					· · · · · · · · · · · · · · · · · · ·	
	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge.						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activ	ities, etc (see in	structions)	·		12	
13	First five years. If the Form 990 is organization, check this box and		on's first, second, th		tax year as a section	on 501(c)(3)	▶
Sec	tion C. Computation of Pu	blic Support I	Percentage				
	Public support percentage for 20	·	•	ne 11, column (f))		14	%
15	Public support percentage from	2012 Schedule A	, Part II, line 14			15	%
16 a	a 33-1/3% support test — 2013. If and stop here. The organization	the organization qualifies as a pu	did not check the iblicly supported o	box on line 13, a organization	nd the line 14 is 3	33-1/3% or more, c	heck this box
ł	33-1/3% support test — 2012. If fand stop here. The organization	the organization of qualifies as a pu	did not check a boublicly supported o	ox on line 13 or 16 organization	5a, and line 15 is 3	33-1/3% or more, o	check this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-	and-circumstance	s' test, check this	box and stop her	e. Explain in Part	IV how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- d-circumstances'	and-circumstance test. The organiz	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Part ed organization	IV how the ►
	Private foundation. If the organi	zation did not ch	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	tructions ►
DAA							

Part III

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants ')						0.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 						0.
6 Total. Add lines 1 through 5	0.	0.	0.	0.	0.	0.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		0.	0.	0.	0.	
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 Public support (Subtract line 7c from line 6.)	0.	0.	0.	0.	0.	0.
Section B. Total Support		_			 	
Calendar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	0.	0.	0.	0.	0.	0.
 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. 						0.
c Add lines 10a and 10b	0.	0.	0.	0.	0.	0.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						0.
13 Total Support. (Add Ins 9,10c, 11 and 12)	0.	0.	0.	0.	0.	0.
14 First five years. If the Form 990 organization, check this box and	stop here .		d, third, fourth, o	r fifth tax year as	a section 501(c)(3	▶ X
Section C. Computation of Pu			- 10!			
15 Public support percentage for 216 Public support percentage from		,,,	ie 13, column (f))		15	
					16	<u></u>
Section D. Computation of Inv 17 Investment income percentage				mn (f)	17	<u> </u>
18 Investment income percentage			•	11111 (1))	17	90
				and line 15 is more	18 e than 33-1/3% ar	=
19a 33-1/3% support tests — 2013. I is not more than 33-1/3%, check b 33-1/3% support tests — 2012. I	f the organization	did not check a b	ox on line 14 or l	ine 19a, and line	16 is more than 33	1/3% and
line 18 is not more than 33-1/39	%, check this box a	and stop here. The	e organızatıon qu	ialifies as a public	ly supported organ	nization -
20 Private foundation. If the organ	ization did not che	ck a box on line		neck this box and	see instructions.	► <u></u>

	(Form 990 or 990-EZ) 2013	Pima County J	unior Livestoc	<u>ck Sales, Inc.</u>	86-0543984	Page 4
Part IV	Supplemental Informati or 17b; and Part III, line (See instructions).	on. Provide the e 12. Also complete	xplanations require this part for any	ed by Part II, line additional informa	10; Part II, line 17a ation.	
	- 					
	·					
- -						
						
	-					
	· 					
	·					

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Pima County Junior Livestock Sales, Inc. 86-0543984 Part Lie Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990. Part IV. line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? No Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2 a b Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations. No and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Nο In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X ÞŚ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 . ▶\$ **b** Assets included in Form 990, Part X ÞŚ

Part III Organizations Mainta	ining Colle	ctions	of Art, Histo	orical Trea	sures, or (Other Similar Ass	ets (c	ontinu	ied)
3 Using the organization's acquisition items (check all that apply)	i, accession, a	ind other	records, check a	ny of the follo	owing that are	a significant use of its o	collectio	'n	
a Public exhibition			d Loan	or exchange	programs				
b Scholarly research			e Other						
c Preservation for future gener	rations		_						
4 Provide a description of the organiz Part XIII	ation's collect	ions and	explain how they	further the c	rganization's	exempt purpose in			
5 During the year, did the organiza to be sold to raise funds rather ti	ition solicit or han to be ma	receive intained	donations of ar	t, historical i organization's	reasures, or s collection?	other similar assets	Yes	[No
Part IV Escrow and Custodia line 9, or reported an	I Arrange r amount on	nents. Form	Complete if t 990, Part X,	he organi line 21	zation ansv	vered 'Yes' to For	m 990), Part	īV,
1 a Is the organization an agent, trus on Form 990, Part X? b If 'Yes,' explain the arrangement					tions or othe	assets not included [Yes		No
							Amoun	t	
c Beginning balance				i	•	1 c			
d Additions during the year	•				•	1 d			
e Distributions during the year		•				1 e			
f Ending balance			_			1 f	_		
2 a Did the organization include an a b If 'Yes,' explain the arrangement		-	•		en provided ii	n Part XIII	Yes		No
Part V Endowment Funds. C	omplete ıf	the or	ganizatıon an	swered 'Y	es' to Forr	n 990, Part IV, lin	e 10.		
_	(a) Curren	t year	(b) Prior year	r (c) 1	wo years back	(d) Three years back	(e) l	Four year:	s back
1 a Beginning of year balance									
b Contributions									
c Net investment earnings, gains, and losses	,								
d Grants or scholarships									
e Other expenditures for facilities and programs									
f Administrative expenses									
g End of year balance									
2 Provide the estimated percentag		ent year	end balance (lin	ie 1g, colum	n (a)) held as	3'			
a Board designated or quasi-endowm	ent 🕨 🚤		- %						
b Permanent endowment	⁸	5	_						
c Temporarily restricted endowmer			[%]						
The percentages in lines 2a, 2b,	and 2c shoul	id equal	100%.						
3a Are there endowment funds not in to organization by:	the possession	of the o	organization that a	are held and a	administered fo	or the	ſ	Yes	No
(i) unrelated organizations			•			•	3a(i)		
(ii) related organizations				•			3a(ii)	-	<u> </u>
b If 'Yes' to 3a(ii), are the related of							3b		
4 Describe in Part XIII the intended	d uses of the	organiz	ation's endowme	ent funds					
Part VI Land, Buildings, and									
Complete if the organ	ızation ans	wered	'Yes' to Forn	n 990, Par	t IV, line 1	1a. See Form 990	, Part	. X, Iir	ıe 10.
Description of property			t or other basis evestment)	(b) Cost basis (or other other)	(c) Accumulated depreciation	(d) !	Book va	alue
1 a Land									
b Buildings .	•								
c Leasehold improvements					22,791.	13,576.		9	,215.
d Equipment .					32,378.	17,026.			,352.
Total. Add lines 1a through 1e. (Colum	nn (d) must e	qual For	rm 990, Part X, o	column (B),	line 10(c).)				,567.
BAA						Schedi	le D (F	orm 990	V 5013

Schedule **D** (Form 990) 2013

osta i n) (F 000) 0012					_	0.5 0.5	
		Pima County Junion Other Securities.	r Li	vestock Sal	es,	Inc. N/A	86-054	13984 Page 3
	Complete if the	e organization answered	l 'Yes	s' to Form 990	, Pai		See Form 99	90, Part X, line 12.
(a) Descr	ription of security or cate	egory (including name of security)		(b) Book value		(c) Method of val	uation: Cost or end-o	f-year market value
(1) Financi	ial derivatives							
	-held equity interes	sts						
(3) Other			ļ					
(A) (B)								
(B)								
(C) (D)								
(E)								
(F)								
(G)								
(H)								
(l)								
Total (Colun	nn (b) must equal Form S	990, Part X, column (B) line 12.)	1					
Part VIII	Investments -	- Program Related. e organization answered	1 'Ye	s' to Form 990	Pa	N/A	See Form 90	90 Part X line 13
		investment type		b) Book value				of-year market value
(1)	(-,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ·	,	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
(2)			<u> </u>		<u> </u>			
(3)								
(4)								
(5)			ļ		<u> </u>			
(6)			ļ		ļ	 		
(7)			<u> </u>					
(8)			 		 			
(9) (10)			-		1			
• •	nn (b) must equal Form :	990, Part X, column (B) line 13)	1					
Part IX	Other Assets.			N/A			0 5 0	00 D IV II 15
	Complete if th	e organization answered (a) De			, Pa	rt IV, line I I a	. See Form 9	90, Part X, line 15. (b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·	(a) DC	Script					(b) Book value
(2)				*				
(3)								
(4)								,
(5) (6)								
(7)								
(8)								
(9)								
(10)	 	 						
		al Form 990, Part X, column (B), lin	ne 15.)				<u> </u>
Part X	Other Liabiliti	es. ganization answered 'Yes' to F	orm 9	90 Part IV line 11	e or	L1f See Form 990	Part X Jine 25	
		otion of liability	<u> </u>	(b) Book value		000 101111 000	, , , , , , , , , , , , , , ,	
	eral income taxes				\Box			
	ds Held for	Other Organization	s	32	28.			
(3)				· · · · · · · · · · · · · · · · · · ·				
(5)		· · · · · · · · · · · · · · · · · · ·			\dashv			
(6)					\dashv			
(7)								
(8)			\Box		\Box			
(9)								
(10)					\dashv			
	nn (h) must equal Form	990, Part X, column (B) line 25)	_	32	, 			
2	(=)	, raising column (b) line 20 /	1_	32				

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

BAA

	-0543984 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn. N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	
1 Total revenue, gains, and other support per audited financial statements .	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.	
a Net unrealized gains on investments 2a	
b Donated services and use of facilities 2b	1
c Recoveries of prior year grants 2c	1
d Other (Describe in Part XIII.)	1 1
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII) 4b	1
c Add lines 4a and 4b	4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return, N/A
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.	• • • • • • • • • • • • • • • • • • • •
1 Total expenses and losses per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	<u>'</u>
a Donated services and use of facilities	
b Prior year adjustments	
c Other losses 2c	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	
3 Subtract line 2e from line 1	3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a Investment expenses not included on Form 990, Part VIII, line 7b	
b Other (Describe in Part XIII.) . 4b	1 1
c Add lines 4a and 4b.	4 c
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5
Part XIII Supplemental Information.	
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Par line 4, Part X, line 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	t V, additional information
BAA	Schedule D (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number 86-0543984 Pima County Junior Livestock Sales, Inc Form 990, Part VI, Line 11b - Form 990 Review Process No review was or will be conducted. Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available No documents available to the public.

2013	Federal	Workshee	ets		Page 1
	Pima County Jun	ior Livestock	Sales, Inc.		86-0543984
2/11/14					05.42AN
Form 990, Part III, Line 4e Program Services Totals					
	Program Services Total	Form 990		Source	
Total Expenses Grants Revenue	448,938. 0. 0.	(O. Part I	X, Line 25, Col X, Lines 1-3, C III, Line 2, Co	Col. B
Form 990, Part IX, Line 24e Other Expenses					*****
	(P	P	(B) rogram rvices	(C) Management & General	(D) Fundraising
Drug Tests/Ear Tags Miscellaneous Photography Postage and Shipping Printing and Publications		1,060. 727. 526. 376. 652. 3,341. \$	1,060. 727. 526. 376. 652.	\$ 0. \$	0.

12/31/13		20	2013 Fec	leral	Воо	ok Dep	deral Book Depreciation Schedule	ion S(hedu	e				Page 1
			Pi	ma Co	unty J	unior Li	Pima County Junior Livestock Sales, Inc.	Sales, Ir	<u>ن</u>					86-0543984
2/11/14 Description	Date Acourted	Date Sold	Cost/ Basis	Bus Pet	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ So. Deor.	Prior Dec Bal Deor.	Salvage /Basis Reductn	Depr Basis	Prior Deor.	Method Life Rate	Lufe Rat	05:42AM Current Deor.
990/990-PF				l 							-			
Improvements														
1 Livestock pens	2/26/96		3,058							3,058	2,217	150DB	20	83
2 Livestock pens	3/26/96		503							500	151	15008	20	4
4 Recognition wall	3/31/97		370							370	260	150DB	20	8
6 Hog Panels	3/30/98		425							425	287	15008	20	10
12 Fence panels	3/04/01		2,729							2,729	2,410	200DB	10	0
15 Fence panels	3/21/10		8,000							8,000	3,648	200 DB	10	870
16 Fence panels	4/05/11	ı	8,000	J		İ				8,000	2,560	200DB	01	1,088
Total improvements			22,791		0	0	0	0	0	22,791	11,533			2,043
Machinery and Equipment														
3 Pulley system for signs	4/14/96		182							182	132	15008	70	4
5 Equipment	3/31/97		5,623							5,623	3,940	150DB	80	126
7 Picture wall/frames	3/31/98		755							755	511	15008	20	18
8 Picture wall/frames	6/15/98		089							089	460	150DB	70	17
9 Picture wall/frames	7/03/98		584							284	395	150DB	02	14
10 Two scales	3/20/99		5,348							5,348	4,734	200DB	5	0
11 Beef scale	3/25/01		4,287							4,287	3,795	20008	01	0
13 Computer	5/08/02		2,131							2,131	1,997	200DB	5	0
14 Printer	6/30/02		473							473	446	200DB	2	0
17 Scale - beef	3/31/13		2,915							2,915		200DB	10	437
18 Scale - lamb	12/27/13	'	9,400	l		j				9,400		200DB	01	0
Total Machinery and Equipment			32,378		0	0	0	0	0	32,378	16,410			919

7	द्वी	Σ	8	65	
Page 2	74398	05·42AlM Current Depr.	2,659	2,659	
Ра	86-0543984) 3d			
	~	Rate			
		Method Life Rate.			
		poq			
		Met			
		5 7	27,943	27,943	
		Prior Depr.			
		j	55,169	55,169	
a		Depr Basis		L	
Ing		हेड -			
2013 Federal Book Depreciation Schedule	<u>ان</u>	Salvage /Basis Reductn			
n S	Pima County Junior Livestock Sales, Inc.	Prior Dec Bal. Depr.		0	
atio	k Sal	Ì	 	0	
eci	stoc	Prior 179/ Bonus/ Sp. Depr.			
epr	Live	}		∥ ○∥	
Α O	unio	Special Depr. Allow.			
300	L QT	ļ.			
al E	Cour	Cur 179 Bonus			
der	ima	Bus	. ഗ ∥	හ li	
» Fe	٦	Cost/ Basis	55,169	55,169	
013		3 9			
7		Date Sold			
		!			
		Date Acquired			
		j			
		Description	-	eciation	
		Des	eciation	al Depre	
13			Total Depreciation	Grand Total Depreciation	
12/31/13		1/14 	70	&	
7		2/11/14			