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EXTENDED TO SEPTEMBER 15, 2016

Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

▶ 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. Open to Public Inspection

OMB No 1545-0047

<u> A F</u>	or the	2014 calendar year, or tax year beginning NOV 1, 2014 and er	nding <u>C</u>	CT 31, 2015	
Вс	heck if	C Name of organization		D Employer identific	ation number
	Addre:	UPPER MISSOURI VALLEY FAIR ASSOCIATION			
	Name change	Doing business as		45-04	03610
	initial return	,	loom/suite	E Telephone number	
	Final return/ termin			701-5	572-3338
	ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	<u>578,932.</u>
	Amend return Applic	WILLISTON, ND 58802-0785		H(a) Is this a group ref	
	Ition pendir	F Name and address of principal officer REACHELL LITTLEFTED.	D	for subordinates?	
		PO BOX 215, RAY, ND 58849		H(b) Are all subordinates inc	
		empt status	527	1	st (see instructions)
		te: ► N/A organization: X Corporation Trust Association Other ►	I Voor	H(c) Group exemption	State of legal domicile: NL
	rt I	Summary	L Teal	or formation. 1937 M	State of legal domicile. INL
ě		Briefly describe the organization's mission or most significant activities AN AS			
Activities & Governance		FAIR, INCLUDING VARIOUS ACTIVITIES, EXHIB	ITS,	ENTERTAINMEN	IT, ETC.
eru	2	Check this box 🕨 🔲 if the organization discontinued its operations or dispose	ed of more	than 25% of its net ass	_
١٥	3	Number of voting members of the governing body (Part VI, line 1a)		3	9
8	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	
ies	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		5	
ĭ <u>₹</u>		Total number of volunteers (estimate if necessary)		6	200
Act		Total unrelated business revenue from Part VIII, column (C), line 12		7a	46,917.
	b	Net unrelated business taxable income from Form 990-T, line 34	1	7b	<239.
			<u> </u>	Prior Year	Current Year
ne ne		Contributions and grants (Part VIII, line 1h)	<u> </u>	175,213.	109,139.
Revenue		Program service revenue (Part VIII, line 2g)	<u> </u>	268,182.	135,452.
₽ B		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		84.	74.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		180,459.	230,971.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		623,938.	<u>475,636.</u>
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	2,513.	6,750.
		Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
Expenses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	0.	58,631.
ĕ	16a	Professional fundraising fees (Part IX, column (A), line 11e)	<u>,</u> ⊢	0.	0.
X	ь		<u>0. </u>	E00 003	160 600
-		Other expenses (Fart IX, Column (A), lines 174-14-14-24-9)	<u> </u>	588,903.	468,608
		Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25		591,416.	533,989. <58,353.
S	19	Revenue less expenses Subtract line 18 from Intent2 1 7 2016		32,522.	
Balances	00		Be	ginning of Current Year 589,802.	End of Year 522,382.
龗		Total assets (Part X, line 16) Total liabilities (Part X, line 26)	-	249,000.	239,933.
ء		Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20	<u> </u>	340,802.	282,449.
	rt II	Signature Block		340,0020	202,447
		Ities of perjury, I declare that I have examined this return, including accompanying schedules a	and statem	ents, and to the hest of my	knowledge and belief, it is
		t, and complete. Declaration of <u>preparer (st</u> her than officer) is based on all <u>informa</u> tion of whic			,aga anta aonor, reto
		A STATE OF THE STA	F Par. 91	ILLIA	
Sigr	,	Signature of officer		Date	
lere		JEREMY WRIGHT , FAIR MANAGER			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	[[Date Check	PTIN
aid		NICHOLAS LEE, EA NICHOLAS LEE, EA	0	9/20/16 self-employed	P00442651
rep'	arer	Firm's name EIDE BAILLY LLP		Firm's EIN	45-0250958
	Only	Firm's address PO BOX 1387			
	-	WILLISTON, ND 58802-1387		Phone no. 701	_577-2157
 Mav	the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
		7-14 LHA For Paperwork Reduction Act Notice, see the separate instruction			Form 990 (2014)

	1990 (2014) UPPER MISSOURI VALLEY FAIR ASSOCIATION 45-0403610 Page 2	<u>-</u>
Pa	rt III Statement of Program Service Accomplishments	,
	Check if Schedule O contains a response or note to any line in this Part III	<u>_</u>
1	Briefly describe the organization's mission	
	AN ASSOCIATION CONDUCTING A FAIR, INCLUDING VARIOUS ACTIVITIES,	
	EXHIBITS, ENTERTAINMENT, ETC. FOR THE BENEFIT OF THE PUBLIC.	_
		_
		_
2	Did the organization undertake any significant program services during the year which were not listed on	-
-	the prior Form 990 or 990-EZ?	
_	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? 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 services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a	(Code) (Expenses \$ 471,687. including grants of \$ 6,750.) (Revenue \$ 227,967.	<u> </u>
	AN ASSOCIATION CONDUCTING A FAIR, INCLUDING AGRICULTURAL, ART AND	′
	SCIENCE EXHIBITS, MIDWAY SHOWS, FOOD & BEVERAGES, RODEOS, RACES, AND	-
	DANCES FOR THE BENEFIT OF THE PUBLIC.	-
	DANCES FOR THE BENEFIT OF THE PUBLIC.	_
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41-		_
4b	(Code) (Expenses \$)
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4c	(Code) (Expenses \$)
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		-
	Other program convece (Decembe in Schodule O.)	-
4d	,	
	(Expenses \$ including grants of \$) (Revenue \$)	_
<u>4e</u>	Total program service expenses ► 471,687.	_
	Form 990 (2014)

Form 990 (2014) UPPER MISSOURI VALLEY FAIR ASSOCIATION

Part IV Checklist of Required Schedules 45-0403610 Page 3

				$\overline{}$
	·		Yes	_No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		<u>x</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		37
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5_		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	_		37
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			X
_	Schedule D, Part III	8		
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	9		- 21
10	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, VII, VIII, IX, or X	10		- 11
•	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	.	X
d	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			1
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
14a		14a		<u> </u>
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_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			37
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to		İ	v
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u> </u>
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	10		X
2 ∩	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	
	100 to mio 200, ord the organization attach a copy of its addited infancial statements to this feturit:	200	000	

-	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals 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_		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			1
	Schedule K If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		X
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		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		l	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		<u> </u>	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Form 990 (2014) UPPER MISSOURI VALLEY FAIR ASSOCIATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	X	<u></u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	_X_	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country.			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X_
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	ı _ [
_	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	ı -		.
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
Ť	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		\vdash
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		\vdash
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	-		\vdash
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make any taxable distributions under section 4500. Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			$\overline{}$
а	Initiation fees and capital contributions included on Part VIII, line 12	.		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:	.		ĺ
а	Gross income from members or shareholders	,		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	.		
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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			
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			
С	Enter the amount of reserves on hand	[
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>x</u> _
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Fa	$\alpha \alpha \alpha$	(2014)

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 circumstances, processes, or changes in Schedule O. See instructions

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 8			
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			,
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	_X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
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?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		Х
	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?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cıal	
	statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records -			
	JEREMY WRIGHT - 701-572-3338			
	14501 74TH STREET NW. ZAHL, ND 58856			

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

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

Check this box if neither the organiza (A) Name and Title	(B) Average hours per	(do	Position (do not check more than one box, unless person is both an		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of			
	week (list any hours for related organizations below line)	officer and a director/trustee) fro th organiz ons ons ons officer and a director/trustee) fro th organiz (W-2/109)		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations				
(1) REACHELL LITTLEFIELD	3.00								_	_
PRESIDENT	22.22	X		X	_	ļ		0.	0.	0.
(2) RON BINGEMAN	20.00			,,	Ì					0
VICE PRESIDENT	10.00	X		X		-		0.	0.	0.
(3) STEPHANIE FUCHS	10.00	X		.				0.	- 0.	0
SECRETARY	1.00	Λ		X	-	-				0.
(4) STEFANIE FISHER TREASURER	1.00	X		x				0.	0.	0.
(5) JEREMY WRIGHT	50.00	A		^		┢		- 0.		0.
FAIR MANAGER	30.00	x		X				60,000.	0.	0.
(6) FALON JUSTICE	2.00							00,000		
DIRECTOR		x						0.	0.	0.
(7) SCOTT HAUGEN	2.00		-							
DIRECTOR		X						0.	0.	0.
(8) BRANDY LADUE	2.00									
DIRECTOR		X	_					0.	0.	0.
(9) CHARRETT BRUNNELLE	1.00		ŀ						_	_
DIRECTOR		X				ļ		0.	0.	0.
(10) LAVINA DOMAGALA	2.00								•	0
DIRECTOR	0.50	X		_				0.	0.	0.
(11) KARLA OLSON	0.50	x						0.	0.	0.
DIRECTOR		_			_			- 0.		
		ł								
								-		
		İ								
								-	·	
		1								
		<u>L</u>	L							
				_	<u> </u>	Щ				
		ļ			ŀ					
			<u> </u>	<u> </u>						

\$100,000 of compensation from the organization

Total number of independent contractors (including but not limited to those listed above) who received more than

		Check if Schedule O cont	ains a response	or note to any lin	e in this Part VIII			
	,	,	<u>amo a 100 por 100</u>	or mote to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns	1a		1-7			012 014
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues	1b					
		Fundraising events	1c					ļ
		Related organizations	1d					
nia		Government grants (contribut	—	59,564.				
Sir		All other contributions, gifts, gran	· —	39,304.				
her	•	similar amounts not included abo	1 1	49,575.				
QĘ	~	Noncash contributions included in lines		49,313.				
Son	_	Total. Add lines 1a-1f	i ia-ir \$		109,139.			
				Business Code	203,203			
ø.	2 a	GROUNDS ADMISSI	ON	713990	70,720.	70,720.		
Š		CARNIVAL INCOME		713990	41,750.	41,750.		
Sei		ENTERTAINMENT		711130	22,642.	22,642.		
am		MISCELLANEOUS		900099	340.	340.	-	
Program Service Revenue	e							
Pr	f		enue					
	q	Total. Add lines 2a-2f			135,452.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		•	74.			74.
	4	Income from investment of ta	x-exempt bond p	roceeds 🕨			_	
	5	Royalties		▶ [1,919.			1,919.
			(ı) Real	(II) Personal				
	6 a	Gross rents	48,110.	800.				
	b	Less: rental expenses	0.	0.				
	С	Rental income or (loss)	48,110.	800.	_	*		-
	d	Net rental income or (loss)		>	48,910.	9,290.		39,620.
	7 a	Gross amount from sales of	(ı) Securities	(II) Other				
		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)		—				
<u>o</u>	8 a	Gross income from fundraising	g events (not					
Ę		including \$	of					
ا ۾		contributions reported on line	1c) See					
Other Revenu		Part IV, line 18	а					
퉏		Less direct expenses	b					
		Net income or (loss) from fund	•	•	-		.	
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	а					
		Less direct expenses	b	L				
		Net income or (loss) from gam	_	•				
	10 a	Gross sales of inventory, less		220 750				
		and allowances	a	230,750.				
		Less: cost of goods sold		103,296.	107 454	00 527	46 017	
ŀ	<u>c</u>	Net income or (loss) from sale			127,454.	80,537.	46,917.	
		Miscellaneous Revenu		Business Code	E0 000	i		F0 000
		FORFEITED EARNE	DI MONE	900099	50,000. 899.	899.		50,000.
		OTHER		900099		033.		
	C C	All other revenue		900099	1,789.	1,789.		
	a -	Total. Add lines 11a-11d		300033	52,688.	1,103.		
	12	Total revenue. See instructions.			475,636.	227,967.	46,917.	91,613.
43200 11-07-		TOTAL TOTAL DEC. DOC MISH DOLIONS.			=10,0000	221,7011	<u> </u>	Form 990 (2014)

Sec	ion 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must co	mplete column (A)	
	Check if Schedule O contains a respons				X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	6,750.	6,750.		
2	Grants and other assistance to domestic				
	ındıvıduals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	FF		FF F03	
_	trustees, and key employees	55,583.		55,583.	 _
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				<u> </u>
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	i			
9	Other employee benefits				
10	Payroll taxes	3,048.		3,048.	
11	Fees for services (non-employees)	3,040.		3,040.	
''				:	
b		894.		894.	
	Accounting	730.		730.	
4	Lobbying	730.		, 500	
e					
f	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,	· · · · · · · · · · · · · · · · · · ·			
3	column (A) amount, list line 11g expenses on Sch O.)	70,487.	68,440.	2,047.	
12	Advertising and promotion	22,733.	22,733.		, -
13	Office expenses	50,951.	50,951.	-	
14	Information technology				
15	Royalties				
16	Occupancy	59,113.	59,113.		
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,833.	6,833.		
20	Interest .	15,145.	15,145.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	71,510.	71,510.		
23	Insurance	15,849.	15,849.		
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 0.)				
а	CONCERN DESCRIPTION	108,168.	108,168.		
b	TATE DIFFERENCE A ADMITSHED	15,000.	15,000.		
c	SPECIAL EVENTS	7,217.	7,217.		
d		5,974.	5,974.		
е	All other expenses	18,004.	18,004.		
25	Total functional expenses. Add lines 1 through 24e	533,989.	471,687.	62,302.	0
26	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)				

Pai	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
		·	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	186,588.	1	59,474.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	528.	4	528.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
S.		employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other			
		basis Complete Part VI of Schedule D 10a 1,150,475.			
	ь	Less accumulated depreciation 10b 688,095.	402,686.	10c	462,380.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	
	13	investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	589,802.	16	522,382.
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
S	22	Loans and other payables to current and former officers, directors, trustees,			
Liabilities		key employees, highest compensated employees, and disqualified persons.			
abil		Complete Part II of Schedule L		22	
∵	23	Secured mortgages and notes payable to unrelated third parties	249,000.	23	239,933.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	249,000.	26	239,933.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
S		complete lines 27 through 29, and lines 33 and 34.			
nce	27	Unrestricted net assets		27	
ala	28	Temporarily restricted net assets		28	, , ,
d B	29	Permanently restricted net assets		29	
'n.		Organizations that do not follow SFAS 117 (ASC 958), check here			
or F		and complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	0.	30	0.
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund	0.	31	0.
ž A	32	Retained earnings, endowment, accumulated income, or other funds	340,802.	32	282,449.
ž	33	Total net assets or fund balances	340,802.	33	282,449.
	34	Total liabilities and net assets/fund balances	589,802.	34	522,382.

	990 (2014) UPPER MISSOURI VALLEY FAIR ASSOCIATION	<u>45-040</u>	<u> 3610</u>	Page 12
Pa	rt 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		<u>,636.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2		989.
3	Revenue less expenses Subtract line 2 from line 1	3		353.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	340	,802.
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	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,			
	column (B))	10	282	<u>,449.</u>
Pa	rt XII Financial Statements and Reporting			
	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	Ο.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis		}	
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		
	consolidated basis, or both:			!
	Separate basis Consolidated basis Both consolidated and separate basis		1 1	
¢	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt		
	Act and OMB Circular A:133?		3a	X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9	990 (2014)

SCHEDULE A

(Form 990 or 990-EZ)

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 at www.irs.gov/form990.

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HPPER MISSOURT VALLEY FAIR ASSOCIATION

Employer identification number

		UPPE	R MISSOURI	VALLEY FAIR	ASSC	CIATI	ON	4	5-0403610		
Рa	rt I	Reason for Public (Charity Status (All organizations must c	omplete th	ns part) Se	ee instructions				
he ·	organi	zation is not a private found			-				- ·		
1		A church, convention of ch		·							
2	\Box	A school described in secti					.,,,,,,				
3	一	A hospital or a cooperative			action 170	λ/51/ 41/ Δ1/ii	ii)				
4	Ħ	A medical research organiz						\ Enter	the hospital's name		
•		city, and state:	ation operated in co	injunction with a nospita	i describe	u III sectio	11 170(0)(1)(A)(111	<i>J.</i> Linco.	the hospital s hame,		
_		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in									
5				nlege of university owne	u or opera	iteu by a g	overimental unit	describ	ed III		
_	_	section 170(b)(1)(A)(iv). (C	•								
6	님	A federal, state, or local gov									
7	ш	An organization that norma	-	intial part of its support	rrom a gov	rernmental	unit or from the	generai	public described in		
		section 170(b)(1)(A)(vi). (C									
8	닠	A community trust describe									
9	X	An organization that norma	• • • • • • • • • • • • • • • • • • • •		•						
		activities related to its exen	npt functions - subje	ct to certain exceptions	and (2) ne	o more tha	n 33 1/3% of its	support	from gross investment		
		income and unrelated busing	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	ired by the organ	nızatıon	after June 30, 1975.		
		See section 509(a)(2). (Cor	mplete Part III.)								
10		An organization organized a	and operated exclus	ively to test for public sa	afety. See	section 50)9(a)(4).				
11		An organization organized a	and operated exclus	ively for the benefit of, t	o perform	the functio	ns of, or to carry	out the	purposes of one or		
		more publicly supported or	ganızatıons describe	ed in section 509(a)(1) o	r section	509(a)(2)	See section 509	(a)(3). C	theck the box in		
		lines 11a through 11d that	describes the type o	of supporting organization	n and con	nplete lines	s 11e, 11f, and 1	1g.			
а		Type I. A supporting orga	anızatıon operated, s	supervised, or controlled	by its sup	ported org	janization(s), typi	cally by	giving		
		the supported organization	on(s) the power to re	gularly appoint or elect	a majority	of the dire	ctors or trustees	of the s	upporting		
		organization You must o	omplete Part IV, Se	ections A and B.				-	=		
b		Type II. A supporting org	anızatıon supervised	for controlled in connec	tion with i	ts supporte	ed organization(s), by ha	ving		
		control or management o	f the supporting orga	anization vested in the s	ame perso	ons that co	ontrol or manage	the sup	ported		
		organization(s) You mus	t complete Part IV,	Sections A and C.							
С		Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with, a	and functionally i	ntegrate	ed with,		
		its supported organization	n(s) (see instructions	You must complete	Part IV, Se	ections A,	D, and E.				
đ		Type III non-functionally	<mark>/ integrated.</mark> A supp	orting organization opei	ated in co	nnection v	vith its supported	d organi	zation(s)		
		that is not functionally int	egrated The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and ar	n attenti	veness		
		requirement (see instruct	ions) You must con	nplete Part IV, Sections	s A and D	, and Part	V.				
е		Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II,	Type III			
		functionally integrated, or	Type III non-functio	nally integrated support	ıng organı	zation.					
f	Ente	r the number of supported o	organizations								
g	Prov	ide the following information	about the supporte	ed organization(s)							
	(i	Name of supported	(ti) EIN	(III) Type of organization	(iv) is the c	irganization in your			(vi) Amount of		
		organization		(described on lines 1-9 above or IRC section		document?	support (see		other support (see Instructions)		
			·	(see instructions))	Yes	No	matractions	''			
						<u> </u>					
					_						
											
	_										

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)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants ")						
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities					1	
	furnished by a governmental unit to						
	the organization without charge						
4	Total, Add lines 1 through 3						
5	The portion of total contributions	İ					
	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)						
	Public support. Subtract line 5 from line 4			<u> </u>			
	ction B. Total Support	4 3 2 2 4 2			4 11 0040	4.20044	/0 T-1-1
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	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				<u> </u>		
	assets (Explain in Part VI)	-					
	Total support. Add lines 7 through 10					40	L
	Gross receipts from related activities,			سما فالمرافق المرافق ا	av vaar oo o oostio	12 n 501(a)(3)	
13	First five years. If the Form 990 is for organization, check this box and stor		s nrst, second, trii	ra, iourin, or illin ta	ax year as a sectio	11 30 1(0)(3)	ightharpoonup
Se	ction C. Computation of Publ	ic Support Pe	rcentage	·			
	Public support percentage for 2014 (I			column (fl)		14	%
	Public support percentage from 2013		•	(-)/		15	%
	33 1/3% support test - 2014. If the o			n line 13, and line	14 is 33 1/3% or n		x and
	stop here. The organization qualifies	-					ightharpoons
t	33 1/3% support test - 2013. If the	organization did no	ot check a box on	line 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			▶□
17a	10% -facts-and-circumstances tes				e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-		J	ightharpoons
Ł	10% -facts-and-circumstances tes	-	-		_	17a, and line 15 is	10% or
	more, and if the organization meets th	-					
	organization meets the "facts-and-circ				•		
18	Private foundation. If the organization						s >
						edule A (Form 990	

Schedule A (Form 990 or 990 EZ) 2014 UPPER MISSOURI VALLEY FAIR ASSOCIATION 45-0403610 Page 3 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

<u>-</u>	qualify under the tests listed b	elow, please comp	olete Part II.)				
	ction A. Public Support		_		r		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")	1,900.	1,200.	111,250.	128,438.	49,575.	292,363.
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	242,686.	339,146.	393,534.	326,964.	278,921.	1581251.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organization's benefit and either paid to						
	or expended on its behalf	46,685.	53,344.	55,365.	46,775.	59,564.	261,733.
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	291,271.	393,690.	560,149.	502,177.	388,060.	2135347.
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						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.
c	Add lines 7a and 7b						0.
	Public support (Subtract line 7c from line 6)					· - ··	2135347.
Sec	ction B. Total Support						21333471
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	291,271.	393,690.	560,149.	502,177.	388,060.	2135347.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	46,360.	45,057.	93,187.	67,408.	50,903.	302,915.
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	46,360.	45,057.	93,187.	67,408.	50,903.	302,915.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				3,013.	2,688.	5,701.
13	Total support (Add lines 9, 10c, 11, and 12)	337,631.	438,747.	653,336.	572,598.	441,651.	2443963.
	First five years. If the Form 990 is for						
_	check this box and stop here	5	, ,	, , , , , , , , ,		(),() - 3	· •
Sec	tion C. Computation of Publ	ic Support Per	rcentage				<u> </u>
	Public support percentage for 2014 (I		<u> </u>	olumn (fl)		15	87.37 %
	Public support percentage from 2013	• •	•		Ì	16	80.62 %
_	tion D. Computation of Inves					.0	<u> </u>
	· · · · · · · · · · · · · · · · · · ·			o 13 column (f)		47	12.39 %
	Investment income percentage for 20	•		e 13, COIUITIN (I))	}	17	
	Investment income percentage from 2				ا ۱۳ مسطف مسمور ۱۳ م	18	
193	33 1/3% support tests - 2014. If the more than 33 1/3%, check this box as	-					7 is not ►X
	33 1/3% support tests - 2013. If the	organization did n	ot check a box on	line 14 or line 19a	, and line 16 is mo	re than 33 1/3%, a	•
	line 18 is not more than 33 1/3%, che		-				▶⊨┤
20	0 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions						

Part IV | Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)
 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b	_	
	9c		
	10a		
	10b		
n 99	90 or 99	0-EZ)	2014

Sche	dule A (Form 990 or 990-EZ) 2014 UPPER MISSOURI VALLEY FAIR ASSOCIATION 45-04	0361	0 Pa	age 5
Ра	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	L	
Sec	tion B. Type I Supporting Organizations			
	Did the disease to store as seemble of the second store of the sec		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	•		
~	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		:	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
	tion of Type it dupper ting of game attention		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		
Sec	tion D. Type III Supporting Organizations	· · · · · · · · · · · · · · · · · · ·		
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	11		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see Instructions):			
а	The organization satisfied the Activities Test Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
_	that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

	dule A (Form 990 or 990-EZ) 2014 UPPER MISSOURI VALLEY F			45-0403610 Page 6
Pai	1,00			
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust o	n Nov. 20, 1970 See inst	ructions. All
	other Type III non-functionally integrated supporting organizations must co	mplete S	Sections A through E	
Sect	ion À - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
_2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3_		
4	Add lines 1 through 3	4	<u> </u>	
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
_7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	<u> </u>	
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year).			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,		•	
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly-integra	ated Type III supporting o	rganization (see
=	instructions)			

	dule A (Form 990 or 990 EZ) 2014 UPPER MISSOUR			5-0403610 Page 7
Par		(a)(3) Supporting Orga	anizations (continued)	
	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	is	
<u>4</u>	Amounts paid to acquire exempt-use assets	· - -		<u> </u>
5	Qualified set-aside amounts (prior IRS approval required)			
<u>6</u>	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6.	·		
8	Distributions to attentive supported organizations to which the	ne organization is responsive	e e e e e e e e e e e e e e e e e e e	
	(provide details in Part VI) See instructions			
9_	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Sect	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	<u> </u>		Pre-2014	Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)	· · · · · · · · · · · · · · · · · · ·		
3	Excess distributions carryover, if any, to 2014			
<u>a</u>				
<u>b</u>				
<u>c</u>				
<u>d</u>	From 2012		<u>. </u>	
	From 2013			
	Total of lines 3a through e	 -		
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u> </u>	Carryover from 2009 not applied (see instructions)	_		
<u> </u>	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7 \$			
	Applied to underdistributions of prior years Applied to 2014 distributions of prior years		<u> </u>	
	Applied to 2014 distributable amount Remainder. Subtract lines 4a and 4b from 4			
 5	Remaining underdistributions for years prior to 2014, if			
5	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions)			
6	Remaining underdistributions for 2014 Subtract lines 3h			
Ü	and 4b from line 1 (if amount greater than zero, see			
	Instructions)			
7	Excess distributions carryover to 2015. Add lines 3			=
7	and 4c			
8	Breakdown of line 7:			
	DISANDOWITO IIIIE 1.			
<u>a</u> b				
C				-
	Excess from 2013			<u> </u>
	Excess from 2014			

Schedule A (Form 990 or 990-EZ) 2014

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12
	Also complete this part for any additional information (See instructions).

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 45-0403610

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 1 Total number at end of year 2 Aggregate value of grants from (during year) 3 Aggregate value of grants from (during year) 4 Aggregate value of grants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, choners, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or dinor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or dinor advisor, or for any other purpose conferring interpretation of land for public use (e.g., recreation or education) 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 a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a conflied historic structure Preservation of pen space 2 Complete intens 2st through 2d if the organization held a qualified conservation easement on the last day of the tax year. a Total number of conservation easements in a confided historic structure included in (a) 2c. 3 Number of conservation easements in modified, transferred, released, extinguished, or terminated by the organization during the tax year 2d. 4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 2d. 5 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the text of the forganization reports conservation easements shoulds 2c. 6 Number of conservation easements modified, transferred, released, extinguished, or terminated		UPPER MISSOURI VALLEY FAIR ASSOCIATION	45-0403610
(a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of contributions to (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantess, 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 incompanies benefit? Part III Conservation Easements. Complete if the organization assets held in donor advisor or any other purpose conferring incompanies benefit? Preservation of land for public use (e.g., recreation or education) Preservation of a net for public use (e.g., recreation or education) Preservation of a net for public use (e.g., recreation or education) Preservation of a net for public use (e.g., recreation or education) Preservation of a net for public use (e.g., recreation or education) Preservation of a certified histone structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement or a certified histone structure is to a structure of conservation easements in the form of a conservation easement to a certified histone structure included in (a) 4 Number of conservation easements on a certified histone structure included in (a) 5 Total armiber of conservation easements on a certified histone structure included in (a) 6 Staff and volunteer hours devoted to monitoring, inspection, and enforcement of the conservation easement is located by variable to the structure of the conservation easement is located by variable to the structure of the conservation easement is located by and section 170(h)(4)(B)(b) 9 In Part XIII, describe how the organization reports conservation easements unit in revenue and expense str	Pai	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or A	Accounts. Complete if the
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of and identify the contributions to (during year) 4 Aggregate value at end of year 5 Dot the organization from (during year) 5 Out the organization informal disconse and disconse in writing that the assets held in donor advised funds are the organization for property, subject to the organization's exclusive legal control? Out the organization informal 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 more making that the proposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring more making to the organization of the proposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring more making to the organization of the organization of the proposes and the proposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring more making to the proposes and the organization of a conservation organization of the proposes and the pro		organization answered "Yes" to Form 990, Part IV, line 6	
2. Aggregate value of contributions to (during year) 4. Aggregate value at end of year 5. Did the organization inform all donors and donor advisors in writing that the assets held in donor advisored funds are 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 advisors or or any other purpose conferring impermisable purposes and not for the the end of the donor or donor advisor, or for any other purpose conferring impermisable purposes and not for the the organization of a working 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 impermisable private benefit? Part Conservation Easements. Complete if the organization check all that apply		(a) Donor advised funds	(b) Funds and other accounts
A Aggregate value of grants from (during year) 6 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all 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 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 impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissable purposes benefit? Part III Conservation Easements. Complete if the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of a certified historic structure included in (a) the formation of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements b Total acreage restricted by conservation easements in conservation (a) the tax year is likely in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year A Number of states where property subject to conservation easements is located ▶ Does the organization have a written policy regarding the penodic monitoring, inspection, handling of wolations, and enforcement of the conservation easements during the year ▶ S Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ S Does each conservation easement reports conservation easements in its revenue and expenses statement, and balance sheet, and included in formation to the organizati	1	Total number at end of year	
4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charatable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring importance benefit? Part II Conservation Easements. Complete if the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area 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. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included in (e) 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 Number of states where property subject to conservation easement to hidde No beside to reganization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement to hidde No line and the property subject to conservation easements to make the policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement reported on line 2(d) above a finite finite property No line and the property subject to conservation	2	Aggregate value of contributions to (during year)	
5 Det the organization inform all donors and clonor advisors in writing that the assets held in donor advised funds are the organization in properly, subject to the organization's exclusive legal control? 6 Det 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 purposes conferring impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring impermissable purposes and not for the benefit of the donor or donor advisor, or for any other purposes conferring impermissable purposes benefit? Part III Conservation Easements. Complete if the organization check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Preservation of a natural habitat. Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure in Preservation of a certified historic structure in Preservation of a certified historic structure included in (a) 2 Complete lines 2 at 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. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements in a certified historic structure included in (a) Number of conservation easements in modified, transferred, released, extinguished, or terminated by the organization during the tax year. 9 Number of states where property subject to conservation easement is located ▶ 10 Des the organization during the period in monitoring, inspecting, and enforcing conservation easements during the year ▶ 10 Des the organization have a written policy regarding the period in monitoring, inspecting, and enforcing conservation easements during the year ▶ 11 Des to conservation eas	3	Aggregate value of grants from (during year)	
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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)? 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 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part 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) Revenue included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items. a Revenue included in Form 990, Part VIII, line 1			
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a Revenue included in Form 990, Part VIII, line 1		- · · · · · · · · · · · · · · · · · · ·	-
	а		▶ \$
	b	·	> \$

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Par	t III Organizations Maintaining C										
3	Using the organization's acquisition, accessi	on, and other recor	ds, chec	k any of the	following that	at are a s	significant	use of its	collection	items	
	(check all that apply)										
а	Public exhibition	•			hange progr	ams					
b	Scholarly research	•	e 🗀	Other				_			
C	Preservation for future generations										
4	Provide a description of the organization's co			-				ose in Par	t XIII		
5	During the year, did the organization solicit of					er sımıla	ır assets		_		
	to be sold to raise funds rather than to be m								Yes		No
Par	t IV Escrow and Custodial Arran		lete if the	organizatio	n answered	"Yes" to	Form 990	, Part IV,	line 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	ssets no	t included	_	_		
	on Form 990, Part X?							L	Yes	Ш	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table							
									Amount		
	Beginning balance						1c				
	Additions during the year						_1d_				
е	Distributions during the year						1e				
f	Ending balance						1f		7		
	Did the organization include an amount on F						ılıty?		」Yes	\vdash	No
	If "Yes," explain the arrangement in Part XIII	Check here if the e	xplanatio	on has been	provided in	Part XIII	10	_			—
Par	t V Endowment Funds. Complete				Í						
٠.	December	(a) Current year	(b) F	rior year	(c) Two yea	rs dack	(d) Three y	ears back	(e) Four	ears b	ack_
	Beginning of year balance		 								
	Contributions		ļ								
	Net investment earnings, gains, and losses					-					
	Grants or scholarships		 								
е	Other expenditures for facilities										
	and programs	· · · · · · · · · · · · · · · · · · ·									
	Administrative expenses						_				
g	End of year balance										
2	Provide the estimated percentage of the cur	•	•	g, column (a	a)) neid as						
	Board designated or quasi-endowment		%								
	Permanent endowment										
C	Temporarily restricted endowment	%									
20	The percentages in lines 2a, 2b, and 2c show		otion the	at ara bald a	nd administr	rad for t	ho organia	ration			
Sa	Are there endowment funds not in the posse	ssion of the organiz	alion in	at are rielu a	inu auministe	ered for t	ile organiz	ation	Г	/es	No.
	(i) unrelated organizations								3a(i)	es	iAO
	(ii) related organizations								3a(ii)		
h	If "Yes" to 3a(ii), are the related organizations	e lietad ae raguirad /	on Schoo	Nula P2					3b		
4	Describe in Part XIII the intended uses of the				**				_ <u>3</u> D		
	t VI Land, Buildings, and Equipm		OWITHETH	iuius							
	Complete if the organization answere) Part IV	line 11a S	ee Form 990	Part X	line 10.				
	Description of property	(a) Cost or o			or other		ccumulate	-d	(d) Book	value	
	Description of property	basis (investi		\ - <i>,</i>	(other)	٠,	preciation		(u) Dook	valuo	
19	Land		,		5,000.				125	. 0.0	0 -
	Buildings				1,994.		245,9	26.	146		
	Leasehold improvements				<u> </u>		<u> </u>		<u> </u>	, , , ,	<u> </u>
	Equipment			63	3,481.		442,1	69.	191	, 31	2 -
	Other				J , 101 •		<u> / - '</u>			, <u> </u>	<u></u>
	. Add lines 1a through 1e (Column (d) must e	gual Form 990. Part	X. colun	nn (B). line 1					462	, 38	0.

Schedule D (Form 990) 2014

UPPER MISSOURI VALLEY FAIR ASSOCIATION

432053 10-01-14

Schedule D (Form 990) 2014

Schedule D (Form 990) 2014

45-0403610 Page 3

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

$\overline{}$	dule D (Form 990) 2014 UPPER MISSOURI VALLEY I		45-0403610 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial St	atements With Revenue pe	r Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, Iir	ne 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:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	. 2b	
C	Recoveries of prior year grants	. 2c	
d	Other (Describe in Part XIII)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	<u> </u>
С	Add lines 4a and 4b		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	.)	5
Pai	t XII Reconciliation of Expenses per Audited Financial S		er Return.
	Complete if the organization answered "Yes" to Form 990, Part IV, Iir	ne 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:	1 - 1	
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	_
C	Other losses	2c	
d	Other (Describe in Part XIII.)	_2d_	\dashv .
е 3	Add lines 2a through 2d Subtract line 2e from line 1		2e
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		3
a	Investment expenses not included on Form 990, Part VIII, line 7b	40	
b	Other (Describe in Part XIII)	4a 4b	
	Add lines 4a and 4b	40	4c
- 5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 1	8)	5
	t XIII Supplemental Information.	0.,	1 3 1
٠	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and	4 Part IV lines 1h and 2h Part V li	ne 4 Part X line 2 Part XI
	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide a		,, , are 1, mile 2, r are 11,
	, , , , , , , , , , , , , , , , , , , ,	.,	
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			<u>, , , , , , , , , , , , , , , , , , , </u>
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

2014
Open to Public Inspection

Name of the organization

UPPER MISSOURI VALLEY FAIR ASSOCIATION

Employer identification number 45-0403610

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FOR THE BENEFIT OF THE PUBLIC.
FORM 990, PART VI, SECTION A, LINE 1:
THE OFFICERS OF THE BOARD OF DIRECTORS SHALL MAKE UP AN EXECUTIVE BOARD
THAT SHALL HAVE THE ABILITY TO CONDUCT BUSINESS BETWEEN REGULARLY SCHEDULED
BOARD OF DIRECTORS MEETINGS IN THE EVENT THAT ANY BUSINESS AND/OR DECISION
NEEDS TO BE MADE BEFORE THE REGULARLY SCHEDULED MEETING. THIS BOARD SHALL
REPORT ANY DECISION TO THE BOARD OF DIRECTORS AT THE NEXT AVAILABLE
SCHEDULED MEETING.
FORM 990, PART VI, SECTION A, LINE 4:
THE BYLAWS WERE AMENDED WHICH INCLUDED THE FOLLOWING SIGNIFICANT CHANGES:
1. ARTICLE V SECTION 1: UPDATED THE NUMBER OF THE BOARD OF DIRECTORS TO
ELEVEN (11) VOTING MEMBERS AND TWO (2) NONVOTING MEMBERS. ELEVEN (11) OF
THE DIRECTORS SHALL BE ELECTED FROM THE COUNTY AT LARGE; ONE (1) OF THE
NONVOTING DIRECTORS SHALL BE APPOINTED BY THE COUNTY 4-H; ONE (1) OF THE
NONVOTING DIRECTORS SHALL BE APPOINTED BY THE COUNTY EXTENSION AGENTS.
2. THE CLAUSE RELATING TO THE LIMITED TWO (2) CONSECUTIVE TERMS WILL NOT
APPLY TO THE FAIR MANAGER/GENERAL MANAGER IF THIS PERSON IS ALSO ON THE
BOARD OF DIRECTORS.
3. THE BOARD OF DIRECTORS MAY ALLOW BOARD MEMBERS TO CONTINUE ON THE BOARD

AFTER TWO (2) CONSECUTIVE TERMS BY A MAJORITY VOTE.

THE ORGANIZATION'S GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC DURING NORMAL BUSINESS HOURS AT THE ORGANIZATION'S BUSINESS OFFICE.

FORM 990, PART IX, LINE 11G, OTHER FEES:

SECURITY:

PROGRAM SERVICE EXPENSES

13,120.

MANAGEMENT AND GENERAL EXPENSES

UPPER MISSOURI VALLEY FAIR ASSOCIATION FUNDRAISING EXPENSES TOTAL EXPENSES	45-0403610 0. 13,120.
MOMAI EVERNORG	
TOTAL EXPENSES	13,120.
CONCERT CONTRACTS:	
PROGRAM SERVICE EXPENSES	38,300.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	38,300.
CONTRACT SERVICES:	
PROGRAM SERVICE EXPENSES	17,020.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	17,020.
CONSULTING:	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	2,047.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,047.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	70,487.