

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation**  
**or Section 4947(a)(1) Trust Treated as Private Foundation**  
 ▶ Do not enter social security numbers on this form as it may be made public.  
 ▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No 1545-0052  
**2018**  
**Open to Public Inspection**

**For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018**

Name of foundation AGSOURCE DHI FOUNDATION INC		<b>A Employer identification number</b> 39-1909207
Number and street (or P O box number if mail is not delivered to street address) PO BOX 930230	Room/suite	<b>B Telephone number (see instructions)</b> (608) 845-1900
City or town, state or province, country, and ZIP or foreign postal code VERONA, WI 535930230		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>369,535</u>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		<b>(a)</b> Revenue and expenses per books	<b>(b)</b> Net investment income	<b>(c)</b> Adjusted net income	<b>(d)</b> Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)				
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities	6,955	6,955		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	29,257			
	<b>b</b> Gross sales price for all assets on line 6a <u>158,058</u>				
	<b>7</b> Capital gain net income (from Part IV, line 2)		29,257		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	36,212	36,212			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	400	100		300
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	2,400	600		1,800
	<b>c</b> Other professional fees (attach schedule)	1,126	1,056		70
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	135	0		0
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings	145	36		109
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	1,254	0		1,254
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	5,460	1,792		3,533
	<b>25</b> Contributions, gifts, grants paid	27,030			27,030
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	32,490	1,792		30,563	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	3,722				
<b>b Net investment income</b> (if negative, enter -0-)		34,420			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .			
	<b>2</b> Savings and temporary cash investments . . . . .	4,910	26,154	26,154
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	291,293	287,004	265,584
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	92,440	79,207	77,797
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	388,643	392,365	369,535	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b>			
	<b>24</b> Unrestricted . . . . .	388,643	392,365	
	<b>25</b> Temporarily restricted . . . . .			
	<b>26</b> Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 31.</b>			
	<b>27</b> Capital stock, trust principal, or current funds . . . . .			
	<b>28</b> Paid-in or capital surplus, or land, bldg , and equipment fund			
<b>29</b> Retained earnings, accumulated income, endowment, or other funds				
<b>30 Total net assets or fund balances</b> (see instructions) . . . . .	388,643	392,365		
<b>31 Total liabilities and net assets/fund balances</b> (see instructions) .	388,643	392,365		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	388,643
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	3,722
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	0
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	392,365
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	<b>6</b>	392,365

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1 a SECURITIES</b>	P		
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b> 158,058		128,801	29,257
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			29,257
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	29,257
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

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

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

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

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	46,130	420,072	0.109815
2016	49,352	421,314	0.117138
2015	28,488	463,320	0.061487
2014	19,933	494,544	0.040306
2013	31,969	472,307	0.067687

<b>2</b> Total of line 1, column (d)	2	0.396433
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	0.079287
<b>4</b> Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	403,182
<b>5</b> Multiply line 4 by line 3	5	31,967
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	6	344
<b>7</b> Add lines 5 and 6	7	32,311
<b>8</b> Enter qualifying distributions from Part XII, line 4	8	30,563

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

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, domestic foundations, tax under section 511, subtitle A tax, and total tax due/overpayment. Total tax due is 695.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, unrelated business income, and substantial contributors. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A
14 The books are in care of PAUL JANDRIN Telephone no (608) 845-1900
Located at 135 ENTERPRISE DR VERONA WI ZIP+4 535939122
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year 15
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.
1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ).
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions
Organizations relying on a current notice regarding disaster assistance check here.
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years 20, 20, 20, 20
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions ).
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018 ).
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?



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

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total number of others receiving over \$50,000 for professional services.</b>		0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
<b>1</b> IN 2018, AGSOURCE DHI FOUNDATION AWARDED 22 SCHOLARSHIPS AND SPONSORSHIPS TO INDIVIDUALS IN AGRICULTURE-RELATED FIELDS OF STUDY AND 9 GRANTS TO ORGANIZATIONS FOR AGRICULTURE-RELATED EDUCATIONAL AND SCIENTIFIC ACTIVITIES	27,030
<b>2</b>	
<b>3</b>	
<b>4</b>	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments. See instructions	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3	0

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	400,928
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	8,394
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	409,322
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	409,322
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	6,140
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	403,182
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	20,159

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

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	20,159
<b>2a</b>	Tax on investment income for 2018 from Part VI, line 5.	<b>2a</b>	688
<b>b</b>	Income tax for 2018 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	688
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	19,471
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	0
<b>5</b>	Add lines 3 and 4.	<b>5</b>	19,471
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	19,471

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	30,563
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	30,563
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	30,563

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

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
<b>1</b> Distributable amount for 2018 from Part XI, line 7				19,471
<b>2</b> Undistributed income, if any, as of the end of 2018				
<b>a</b> Enter amount for 2017 only. . . . .			0	
<b>b</b> Total for prior years 20___, 20___, 20___		0		
<b>3</b> Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013. . . . .	9,348			
<b>b</b> From 2014. . . . .				
<b>c</b> From 2015. . . . .	5,555			
<b>d</b> From 2016. . . . .	28,476			
<b>e</b> From 2017. . . . .	25,530			
<b>f</b> Total of lines 3a through e. . . . .	68,909			
<b>4</b> Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ _____ 30,563				
<b>a</b> Applied to 2017, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2018 distributable amount. . . . .				19,471
<b>e</b> Remaining amount distributed out of corpus	11,092			
<b>5</b> Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				0
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	80,001			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019 . . . . .				0
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .		0		
<b>8</b> Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions). . . . .	9,348			
<b>9</b> Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a . . . . .	70,653			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2014. . . . .				
<b>b</b> Excess from 2015. . . . .	5,555			
<b>c</b> Excess from 2016. . . . .	28,476			
<b>d</b> Excess from 2017. . . . .	25,530			
<b>e</b> Excess from 2018. . . . .	11,092			

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

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

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

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2018</b>	<b>(b) 2017</b>	<b>(c) 2016</b>	<b>(d) 2015</b>	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

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

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

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

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

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  
 AGSOURCE DHI FOUNDATION INC  
 135 ENTERPRISE DR  
 VERONA, WI 535939122  
 (608) 845-1900

**b** The form in which applications should be submitted and information and materials they should include  
 THE FORM AND CONTENT OF EACH APPLICATION VARIES BY INDIVIDUAL SCHOLARSHIP OR SPONSORSHIP

**c** Any submission deadlines  
 SUBMISSION DEADLINES VARY BY INDIVIDUAL SCHOLARSHIP OR SPONSORSHIP

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
 SCHOLARSHIPS AND SPONSORSHIPS ARE GENERALLY AWARDED TO RESIDENTS OF SPECIFIED COUNTIES AND PREFERENCE IS USUALLY GIVEN TO STUDENTS IN AGRICULTURE-RELATED FIELDS OF STUDY

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				





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

<b>(a)</b> Name and address	Title, and average hours per week <b>(b)</b> devoted to position	<b>(c)</b> Compensation (If not paid, enter -0-)	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	Expense account, <b>(e)</b> other allowances
DALE JENSEN 135 ENTERPRISE DR VERONA, WI 535939122	PRESIDENT 1 00	100	0	0
LIZ HASBURGH 135 ENTERPRISE DR VERONA, WI 535939122	VICE PRESIDENT 1 00	25	0	0
PAUL JANDRIN 135 ENTERPRISE DR VERONA, WI 535939122	SECRETARY/TREASURER 1 00	0	0	0
DEBBIE BULGRIN 135 ENTERPRISE DR VERONA, WI 535939122	TRUSTEE 1 00	100	0	0
MICHAEL KOHN 135 ENTERPRISE DR VERONA, WI 535939122	TRUSTEE 1 00	100	0	0
KENT LONNING 135 ENTERPRISE DR VERONA, WI 535939122	TRUSTEE 1 00	75	0	0
TERRI DALLAS 135 ENTERPRISE DR VERONA, WI 535939122	TRUSTEE 1 00	0	0	0

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AMANDA GEHRKE135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	1,500
AMBER SHAW135 ENTERPRISE DR VERONA, MN 535939122	NONE	I	SCHOLARSHIP	500
ANNA LARSEN135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	500
<b>Total . . . . . ▶ 3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ASHLEY BREU135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	1,500
CHARLES RICHARDS 135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	700
CLARK COUNTY FAIR 1121 E DIVISION ST NEILLSVILLE, WI 544562122	N/A	PC	MILK FOR CLARK COUNTY FAIR	400
<b>Total . . . . . ▶ 3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
DONALD DRUMS135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	1,250
JAKE BROKISH135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	700
JAYNIE RULE135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	700
<b>Total . . . . . ▶ 3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
JENNIFER STOLP135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	750
JOSEPH TOMANDL135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	750
KARA RUDOPH135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	500
<b>Total . . . . . ▶ 3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KARI BROKISH135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	700
KYLE NANKEY135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	700
MEIKAH DADO135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	500
<b>Total . . . . . ▶ 3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
NATHAN LIMMEX135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	700
NICOLE DITTBRENNER 135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	500
POLK COUNTY 4-H2218 140TH AVE SAINT CROIX FALLS, WI 540248308	N/A	PC	DAIRY YOUTH EDUCATION ACTIVITIES	500
<b>Total . . . . . ▶ 3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
PORTAGE COUNTY HOLSTEIN ASSOCIATION 13140 BIRCH DR PLOVER, WI 544678947	N/A	PC	CALF AWARD GRANTS AND SUPPORT FOR THE JUNIOR DAIRY EXHIBITORS BOWLING AND PIZZA PARTY	3,430
RAEANNA JOHNSTON 135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	1,000
RIB LAKE HIGH SCHOOL 1236 KENNEDY ST RIB LAKE, WI 544709457	N/A	PC	SPONSOR WILD FLOWER GARDEN BEING DEVELOPED AT SCHOOL	300
<b>Total . . . . . ▶ 3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TAYLER ELWOOD135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	500
TAYLOR ADLEMAN135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	750
TAYLOR COUNTY FAIR W4857 PERKINS ST MEDFORD, WI 544519231	N/A	PC	AG ADVENTURE ACTIVITIES AT THE COUNTY FAIR AND UPDATES TO THE MILKHOUSE ON FAIRGROUNDS	500
<b>Total . . . . .</b>				<b>27,030</b>

**▶ 3a**

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TAYLOR COUNTY FARM BUREAU W2072 STATE HIGHWAY 64 MEDFORD, WI 544519190	N/A	PC	SPONSOR AG IN THE CLASSROOM PROGRAM AND SPONSOR TRAINING PROGRAM FOR THE FARM BUREAU	950
TAYLOR COUNTY LITTLE BRITCHES N3842 EDDY LN GILMAN, WI 544339606	N/A	PC	LITTLE BRITCHES DAIRY SHOW	50
TIFFANY LIMMEX135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	700
<b>Total . . . . .</b> ▶ <b>3a</b>				27,030

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
TRENT DADO135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	500
UNIVERSITY OF WISCONSIN SYSTEM 432 NORTH LAKE ST MADISON, WI 537061498	N/A	PC	SUMMER ASSISTANT FOR 4-H YOUTH IN CLARK COUNTY	3,500
VANESSA LAHER135 ENTERPRISE DR VERONA, WI 535939122	NONE	I	SCHOLARSHIP	500
<b>Total . . . . . ▶ 3a</b>				27,030

<b>Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WOOD COUNTY FARM TECHNOLOGY DAYS 9885 COUNTY ROAD H MARSHFIELD, WI 544499701	N/A	PC	GENERAL SUPPORT	1,000
<b>Total</b> . . . . .			<b>3a</b>	27,030

**TY 2018 Accounting Fees Schedule****Name:** AGSOURCE DHI FOUNDATION INC**EIN:** 39-1909207

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	2,400	600		1,800

**TY 2018 Investments Corporate Bonds Schedule****Name:** AGSOURCE DHI FOUNDATION INC**EIN:** 39-1909207**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
FIXED INCOME MUTUAL FUNDS	79,207	77,797

**TY 2018 Investments Corporate Stock Schedule****Name:** AGSOURCE DHI FOUNDATION INC**EIN:** 39-1909207**Investments Corporation Stock Schedule**

<b>Name of Stock</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
EQUITY MUTUAL FUNDS	287,004	265,584

**TY 2018 Other Expenses Schedule****Name:** AGSOURCE DHI FOUNDATION INC**EIN:** 39-1909207**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	1,104	0		1,104
OFFICE EXPENSES	150	0		150

**TY 2018 Other Professional Fees Schedule****Name:** AGSOURCE DHI FOUNDATION INC**EIN:** 39-1909207

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT FEES	1,056	1,056		0
OTHER PROFESSIONAL FEES	70	0		70

**TY 2018 Taxes Schedule****Name:** AGSOURCE DHI FOUNDATION INC**EIN:** 39-1909207

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
EXCISE TAX ON NET INVESTMENT INCOME	135	0		0