

Form **990**Department of the
Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax****Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)**

► Do not enter social security numbers on this form as it may be made public

► Go to www.irs.gov/Form990 for instructions and the latest information.**2018****Open to Public
Inspection****A For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018**

B Check if applicable

Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
KANSAS JUNIOR LIVESTOCK SHOW**D Employer identification number**

48-0684350

Doing business as**E Telephone number**

(316) 706-9750

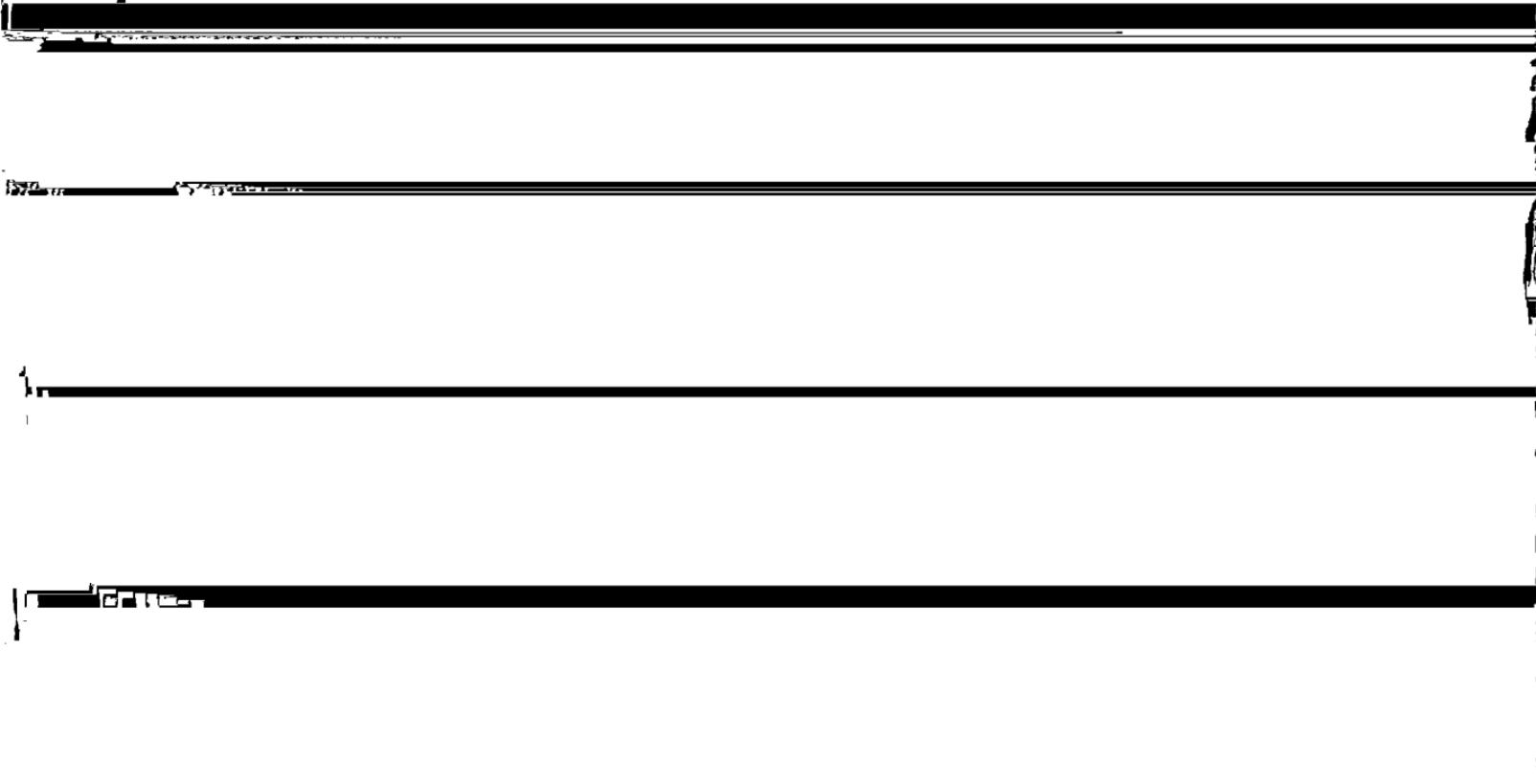
Number and street (or P O box if mail is not delivered to street address)
PO BOX 462**Room/suite****City or town, state or province, country, and ZIP or foreign postal code**
COLWICH, KS 67030**G Gross receipts \$ 346,289****F Name and address of principal officer**

H/2018 Form 990 (Rev. 12-15-17)

Part III

Statement of Program Service Accomplishments

Program Service Accomplishments



Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, *Schedule of Contributors* (see instructions)?

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

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

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets?

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		No
6		No
7		No

Program Service Revenue	Business Code			
		90,382	90,382	
2a LIVESTOCK SALES	900099	90,382	90,382	
b ENTRY FEES	900099	51,322	51,322	
c BEEFEATER BANQUET	900099	48,727	48,727	
d NOMINATION FEE	900099	29,369	29,369	
e CONTRIBUTED SCHOLARSHI	900099	20,000	20,000	
f All other program service revenue				
g Total. Add lines 2a-2f		239,800		
3 Investment income (including dividends, interest, and other similar amounts)		295		
4 Net assets released from restrictions				295

Part IV **Checklist of Required Schedules (continued)**

		Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 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	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and		

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? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No	
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b			
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		No	
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		No	
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No	
c 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		No	
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).	7a		No	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7b			
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Q. See instructions.

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee, 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 others.

10.1 **Employers** shall not discriminate against any employee or former employee on the basis of age, sex, race, color, national origin, disability, or any other protected class.

Check this box if neither the organization nor

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table					

Part VII

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

(A)	(B)	(C)	(D)	(E)	(F)
Name and Title	Average hours per week /list	Position (do not check more than one box, unless person is both an officer and a	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants and Other Similar Amounts		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns . . .	1a				
b Membership dues . . .	1b	1,565			
c Fundraising events . . .	1c				
d Related organizations	1d	65,800			
e Government grants (contributions)	1e	22,996			
f All other contributions, gifts, grants, and similar amounts not included above	1f				
g Noncash contributions included in lines 1a - 1f \$					
h Total. Add lines 1a-1f		90,361			
Program Service Revenue		Business Code			
		900099	90,382	90,382	
2a LIVESTOCK SALES					
b ENTRY FEES		900099	51,322	51,322	
c BEEFEATER BANQUET		900099	48,727	48,727	
d NOMINATION FEE		900099	29,369	29,369	
e CONTRIBUTED SCHOLARSHI		900099	20,000	20,000	
f All other program service revenue					
g Total. Add lines 2a-2f		239,800			

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and general行政	(D) Fundraising
7b, 8b, 9b, and 10b of Part VIII.				

check this box and **stop here** ► **Section C. Computation of Public Support Percentage**

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2017 Schedule A, Part II, line 14 **15**

16a **33 1/3% support test—2018.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

b **33 1/3% support test—2017.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ►

17a **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►

b **10%-facts-and-circumstances test—2017.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ►

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ►

Part X **Balance Sheet**

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more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Schedule A (Form 990 or 990-EZ) 2018

Reconciliation of Net Assets

Additional Data

Software ID:

Software Version:

EIN: 48-0684350

Name: KANSAS JUNIOR LIVESTOCK SHOW

Form 990 (2018)

Form 990, Part III, Line 4a:

OPERATION OF THE ANNUAL LIVESTOCK SHOW AND SALE FOR KANSAS YOUTH WHO ARE INVOLVED IN THE RAISING OF AGRICULTURAL LIVESTOCK

Form 990, Part III, Line 4b:

OPERATION OF THE ANNUAL BANQUET IN CONJUNCTION WITH THE LIVESTOCK SHOW IS INTENDED TO ATTRACT THE LARGEST NUMBER OF QUALIFIED BUYERS POSSIBLE TO THE SHOW AND AUCTION

Form 990, Part III, Line 4c:

PROVIDE SCHOLARSHIPS FOR POST SECONDARY EDUCATION TO SELECTED PARTICIPANTS OF THE ANNUAL LIVESTOCK SHOW

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099- MISC)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Officer or director or individual trustee	Institutional Trustee	Officer	Key Employee	Highest Compensated	Employee			
MATT TEAGARDEN PRESIDENT	1 90	X	X				0	0	0	
JACKIE MCLASKEY SECRETARY	1 00	X	X				0	0	0	
JOHN BECKMAN VICE PRESIDENT	1 00	X	X				0	0	0	
JACK ROBERTS TREASURER	0 60	X	X				0	0	0	
DARREN HIBDON IMMEDIATE PAST PRESIDENT	0 00	X	X				0	0	0	
RYAN HIGBIE DIRECTOR	0 00	X					0	0	0	
PAM BAILEY DIRECTOR	0 00	X					0	0	0	
BRIAN CREAGER DIRECTOR	0 00	X					0	0	0	
CHELSEA GOOD DIRECTOR	0 00	X					0	0	0	
DR BOB BROECKELMAN DIRECTOR	0 00	X					0	0	0	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Officer	Independent trustee	Independent Trustee	Officer	Key employee	Highest compensated employee			
STEPHEN RUSSELL DIRECTOR	0 00		X					0	0	0
MARY KANE DIRECTOR	0 00		X					0	0	0
CAITLIN DREHER DIRECTOR	0 00		X					0	0	0
MEGAN HOBBS DIRECTOR	0 00		X					0	0	0
BRITTNEY GROTH DIRECTOR	0 00		X					0	0	0
DAN HEINZ DIRECTOR	0 00		X					0	0	0
KATHY BRAZEL DIRECTOR	0 00		X					0	0	0
LESLIE SCHMIDT DIRECTOR	0 00		X					0	0	0
GLENN NEWDINGER DIRECTOR	0 00		X					0	0	0
DAVE KEHLER DIRECTOR	0 00		X					0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

SCHEDULE A
(Form 990 or
990EZ)**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.**2018**

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B Total Support

11. *What is the best way to increase the number of people who use a particular service?*

d Total (add lines 1a, 1b, and 1c)	1d		
e 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		

Section C - Distributable Amount

Section 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	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	74,691	70,596	45,665	44,721	44,561	280,234
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's exempt purpose	335,321	353,012	313,552	294,261	301,433	1,597,579

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1		
2		
3a		
b		

1 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

1

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)

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

3a

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)(1)(D)? If "Yes," describe in **Part VI** when and how the organization made the

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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	
b A family member of a person described in (a) above?	11b	
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>	11c	

Section B. Type I Supporting Organizations

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 organization(s) affected, controlled, or influenced the appointment or election of the directors or trustees.

1 Total revenue (must equal Part VIII, column (A), line 12) **1** 346,289

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - 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	
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	

Section 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)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	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 organization is responsive (provide details in Part VI) See instructions	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	
Section E - Distribution Allocations (see instructions)		(i) Excess Distributions
		(ii) Underdistributions Pre-2018
		(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6	
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions	
3	Excess distributions carryover, if any, to 2018	
a	From 2013.	
b	From 2014.	
c	From 2015.	
d	From 2016.	
e	From 2017.	
f	Total of lines 3a through e	
g	Applied to underdistributions of prior years	
h	Applied to 2018 distributable amount	
i	Carryover from 2013 not applied (see instructions)	
j	Remainder Subtract lines 3g, 3h, and 3i from 3f	
4	Distributions for 2018 from Section D, line 7 \$	
a	Applied to underdistributions of prior years	
b	Applied to 2018 distributable amount	
c	Remainder Subtract lines 4a and 4b from 4	
5	Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions	
6	Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions	
7	Excess distributions carryover to 2019. Add lines 3j and 4c	
8	Breakdown of line 7	
a	Excess from 2014.	
b	Excess from 2015.	
c	Excess from 2016.	
d	Excess from 2017.	
e	Excess from 2018.	

Additional Data

Software ID:

Software Version:

EIN: 48-0684350

Name: KANSAS JUNIOR LIVESTOCK SHOW

Schedule A (Form 990 or 990-EZ) 2018

Page 8

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements**

OMB No 1545-0047

2018**Open to Public
Inspection**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for the latest information.

Name of the organization
KANSAS JUNIOR LIVESTOCK SHOW**Employer identification number**
48-0684350**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 grants from (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 advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 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

2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
► \$ _____

8 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)? Yes No

9 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" on 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 on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 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 on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table

- c Beginning balance
- d Additions during the year
- e Distributions during the year
- f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . .

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ►
- b Permanent endowment ►
- c Temporarily restricted endowment ►

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
- (ii) related organizations

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(ii)		
3b		

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		1,129	75	1,054
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ►				1,054

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)		

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (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	
e	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		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b . . .	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	

Part XIII **Supplemental Information**

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information (continued)

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 48-0684350

Name: KANSAS JUNIOR LIVESTOCK SHOW

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	IN ACCORDANCE WITH THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") GUIDANCE, THE COMPANY ADOPTED THE PROVISIONS OF FASB ASC SECTION 740 - INCOME TAXES. THESE PROVISIONS REQUIRE A N EVALUATION OF TAX POSITIONS TAKEN (OR EXPECTED TO BE TAKEN) IN THE COURSE OF PREPARING A COMPANY'S TAX RETURNS TO DETERMINE WHETHER THESE POSITIONS MEET A "MORE-LIKELY-THAN-NOT" STANDARD THAT, BASED ON THE TECHNICAL MERITS, HAVE A MORE THAN FIFTY PERCENT LIKELIHOOD O F BEING SUSTAINED BY A TAXING AUTHORITY UPON EXAMINATION. A TAX POSITION THAT MEETS THE "M ORE-LIKELY-THAN-NOT" RECOGNITION THRESHOLD IS MEASURED TO DETERMINE THE AMOUNT OF BENEFIT TO RECOGNIZE IN THE FINANCIAL STATEMENTS. THE COMPANY RECOGNIZES INTEREST AND PENALTIES, I F ANY, RELATED TO UNRECOGNIZED TAX BENEFITS IN INCOME TAX EXPENSE ON THE STATEMENTS OF INC OME. THESE PROVISIONS REQUIRE MANAGEMENT OF THE COMPANY TO ANALYZE ALL OPEN TAX YEARS, AS DEFINED BY THE STATUTE OF LIMITATIONS, FOR ALL MAJOR JURISDICTIONS, INCLUDING FEDERAL TAX AUTHORITIES AND CERTAIN STATE TAX AUTHORITIES. AS OF AND DURING THE YEAR ENDED DECEMBER 31 , 2014, THE COMPANY DID NOT HAVE A LIABILITY FOR ANY UNRECOGNIZED TAX BENEFITS. THE COMPAN Y HAS NO EXAMINATIONS IN PROGRESS AND IS NOT AWARE OF ANY TAX POSITIONS FOR WHICH IT IS RE ASONALBY POSSIBLE THAT THE TOTAL AMOUNTS OF UNRECOGNIZED TAX BENFITS WILL SIGNIFICANTLY CH ANGE IN THE NEXT TWELVE MONTHS

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**Department of the
Treasury
Internal Revenue ServiceName of the organization
KANSAS JUNIOR LIVESTOCK SHOW

OMB No 1545-0047

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

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.**2018****Open to Public
Inspection**Employer identification number
48-0684350**Part I General Information on Grants and Assistance**

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

 Yes No**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ►

3 Enter total number of other organizations listed in the line 1 table ►

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22
 Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) COLLEGE SCHOLARSHIPS					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	PART I, LINE 2 EXPLANATION SCHOLARSHIP CHECKS ARE WRITTEN AS A JOINT CHECK BETWEEN THE SCHOLARSHIP WINNER AND THE COLLEGE RECEIVING THE CHECK FOR TUITION OF THE STUDENT

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZComplete 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.

► Go to www.irs.gov/Form990 for the latest information.**2018****Open to Public
Inspection**

Name of the organization

KANSAS JUNIOR LIVESTOCK SHOW

Employer identification number

48-0684350

990 Schedule O, Supplemental Information

Return	Explanation

Calendar year
(or fiscal year beginning in) ►
7 Amounts from line 4

	(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION 1 - 1 -	OFFICERS AND DIRECTORS ELECT THE MEMBERS OF THE GOVERNING BODY OR THEIR DELEGATES. THE GOVERNING BODY APPROVES SIGNIFICANT DECISIONS OF THE OFFICERS AND DIRECTORS. NONE OF THE OFFICERS AND DIRECTORS ARE EMPLOYED BY THE ORGANIZATION.

990 Schedule O, Supplemental Information

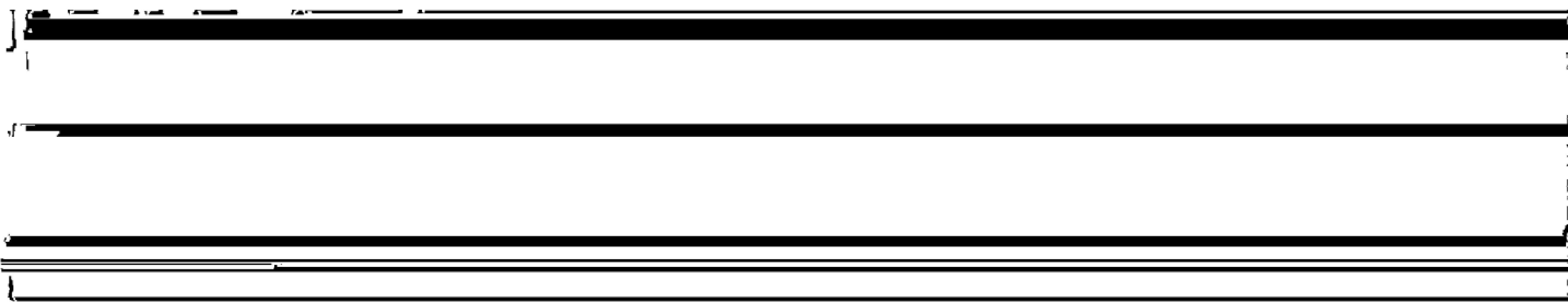
Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS CAN ELECT OTHERS TO THE BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	EXPLANATION THE FORM 990 IS REVIEWED AND APPROVED BY THE SHOW COORDINATOR, BY THE TREASURER AND CERTAIN BOARD MEMBERS BEFORE FILING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	IN DEALINGS WITH BOARD MEMBERS, THEY REGULARLY DISCUSS POTENTIAL CONFLICTS OF INTEREST AND HOW THEY CAN BE ADDRESSED AND RESOLVED



990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 24E	BEEFEATERS BANQUET EXPENSE PROGRAM SERVICE EXPENSES 25,011 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 3,543 TOTAL EXPENSES 28,554 RIBBONS & AWARDS PROGRAM SERVICE EXPENSES 15,053 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 15,053 MISCELLANEOUS EXPENSES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 5,590 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 5,590 JUDGES EXPENSE PROGRAM SERVICE EXPENSES 5,168 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 5,168 CLERICAL AND MANUAL LABOR PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 3,175 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 3,175 PRINTING PROGRAM SERVICE EXPENSES 165 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 165

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC	MATT TEAGARDEN - 6031 SW 37TH STREET TOPEKA, KS 66614 JACKIE MCCLASKEY - 3031 SUNNYSIDE DR IVE MANHATTAN, KS 66502 JOHN BECKMAN - 4340 N JUNIPER RD SCOTT CITY, KS 67871 JACK ROBERTS - PO BOX ONE, MAILSTOP 2 8 WICHITA, KS 67201 DARREN HIBDON - 1418 S MAIN ST 2, OTTAWA, KS 66067 JOE ATWOOD - 8138 W 399TH ST, LACYGNE, KS 66040 RYAN HIGBIE - 6031 SW 37TH ST, TOPE KA, KS 66614 PAM BAILEY - 12799 SW 210TH, DOUGLAS, KS 67039 MARY KANE - 110 UMBERGER HALL, MANHATTAN, KS 66506 STEPHEN RUSSELL - 6031 SW 37TH STREET, TOPEKA, KS 66614 DAVE NICHOLS - KANSAS STATE UNIVERSITY WEBER HALL MANHATTAN, KS 66506 HOWARD WOODBURY - 23200 S STUBBS ROAD, QUENEMO, KS 66528 BRIAN CREAGER - 116 N ANNA, OLPE, KS 66861 PAM VAN HORN - 210 UMBE RGER HALL, MANHATTAN, KS 66506 JIM MADDOX - 2020 N WEBB RD, STE 201, WICHITA, KS 67206 BOB BROECKELMAN - 12126 W AUTUMN RIDGE CT, WICHITA, KS 67235 DAN HEINZ - PO BOX 1, WICHITA, K S 67201 CHELSEA GOOD - 24 E 69TH ST, KANSAS CITY, MO 64113 GENE WOODARD - 4230 N MAIZE ROA D, MAIZE, KS 67101 LOIS JOHNSON - 2080 8TH AVE, MARQUETTE, KS 67464 DAVE KEHLER - 5918 SE US HWY 77, LEON, KS 67042 SHANE PRILL - 1223 N ROCK RD, WICHITA, KS 67206 GEORGE TEAGARDEN - 14937 KS HWY 152, LACYNE, KS 66040 DALE LANHAM - 736 GROUSE ROAD, YATES CENTER, KS 6678 3 TERRY FRITZ - P.O. BOX 2519 WICHITA KS 67201 TIM MARSHALI - 6788 SE WAI STEAD MEDICINE