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## Return of Organization Exempt From Income Tax

OMB No 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

## A For the 2008 calendar year, or tax year beginning

07-01, 2008, and ending

06-30, 2009

## B Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Termination  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

## C Name of organization THE POULTRY FEDERATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

P.O. BOX 1446

Room/suite

City or town, state or country, and ZIP + 4

Little Rock, AR 72203

## D Employer identification no.

71-0257015

## E Telephone number

(501) 375-8131

## G Gross receipts \$

1,650,945

## F Name and address of principal officer MARVIN CHILDERS

PO BOX 1446, LITTLE ROCK, AR 72203

H(a) Is this a group return for affiliates? ☐ Yes ☒ NoH(b) Are all affiliates included? ☐ Yes ☐ No  
If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status ☒ 501(c)(5) (Insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.THEPOULTRYFEDERATION.COM

K Type of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1959

M State of legal domicile AR

## Part I Summary

1 Briefly describe the organization's mission or most significant activities TO PROMOTE, INFORM AND PROTECT POULTRY PRODUCERS AND PROCESSORS RELATING TO PRODUCTION, PROCESSING, DISTRIBUTION, MERCHANDISING AND CONSUMPTION OF POULTRY.

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5	Total number of employees (Part V, line 2a)	5	10
6	Total number of volunteers (estimate if necessary)	6	
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0
7b	Net unrelated business taxable income from Form 990-T, line 44	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	714,654	610,655
9	Program service revenue (Part VIII, line 2g)	509,311	531,779
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,836	15,079
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	351,514	287,247
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,588,315	1,444,760
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	716,038	779,898
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25)		0
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	570,601	653,445
18	Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	1,286,639	1,433,343
19	Revenue less expenses. Subtract line 18 from line 12	301,676	11,417

		Beginning of Year	End of Year
20	Total assets (Part X, line 16)	1,887,645	1,646,645
21	Total liabilities (Part X, line 26)	753,847	504,751
22	Net assets or fund balances. Subtract line 21 from line 20	1,133,798	1,141,894

## Part II Signature Block

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

Sign Here

Signature of officer

Date

MARVIN CHILDERS, PRESIDENT

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

Date

01-13-2010

Check if self-employed ☐

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

Webb Smith & Cole, PLC  
1600 Aldersgate Road, Ste 300  
Little Rock, AR 72205

EIN

Phone no 501-312-9933

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

EEA

Form 990 (2008)

SCANNED JAN 25 2010

**Part III** Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

**TO PROMOTE, INFORM AND PROTECT POULTRY PRODUCERS AND PROCESSORS RELATING TO PRODUCTION, PROCESSING, DISTRIBUTION, MERCHANDISING AND CONSUMPTION OF POULTRY.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 271,646 including grants of \$ ) (Revenue \$ 42,300 )  
**THE PROTECTION OF ALL POULTRY INTERESTS RELATING TO PRODUCTION, DISTRIBUTION, MERCHANDISING AND CONSUMPTION OF POULTRY AND POULTRY PRODUCTS.**

4b (Code ) (Expenses \$ 503,502 including grants of \$ ) (Revenue \$ 489,479 )  
**ARKANSAS POULTRY LAB - TO PROMOTE AND PROTECT POULTRY PRODUCERS AND PROCESSORS RELATING TO THE IMPROVEMENT OF POULTRY PRODUCTION.**

4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses ▶ \$ 775,148 (Must equal Part IX, Line 25, column (B))

**Part IV Checklist of Required Schedules**

	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 . . . . .		X
2 Is the organization required to complete Schedule B, Schedule of Contributors? . . . . .		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 . . . . .		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .		
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III. . . . .	X	
6 Did the organization maintain any donor advised funds or any accounts where 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 . . . . .		X
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 . . . . .		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .		X
9 Did the organization report an amount in Part X, line 21, 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 . . . . .		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . .		X
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable . . . . .	X	
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .		X
14a Did the organization maintain an office, employees, or agents outside of the U S ? . . . . .		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I . . . . .		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II . . . . .		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III . . . . .		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I . . . . .		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	X	
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .		X
21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. . . . .		X
22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . .		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J . . . . .	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 questions 24b-24d and complete Schedule K If "No," go to question 25 . . . . .		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		
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? . . . . .		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .		
b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I . . . . .		
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . . .		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III . . . . .		X

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

	Yes	No
<b>28</b> During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
<b>a</b> Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV . . . . .	<b>28a</b>	X
<b>b</b> Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV . . . . .	<b>28b</b>	X
<b>c</b> Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV . . . . .	<b>28c</b>	X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . . .	<b>29</b>	X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. . . . .	<b>30</b>	X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I . . . . .	<b>31</b>	X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II . . . . .	<b>32</b>	X
<b>33</b> 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 . . . . .	<b>33</b>	X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .	<b>34</b>	X
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .	<b>35</b>	X
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .	<b>36</b>	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI. . . . .	<b>37</b>	X

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Form 990 (2008)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable . . . . .	<b>1a</b>	3
<b>b</b>	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . . . . .	<b>1b</b>	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	<b>1c</b>	X
<b>2a</b>	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 . . . . .	<b>2a</b>	10
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . . . . .	<b>2b</b>	X
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? . . . . .	<b>3a</b>	X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . .	<b>3b</b>	
<b>4a</b>	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)? . . . . .	<b>4a</b>	X
<b>b</b>	If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . . .	<b>5a</b>	X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? . . . . .	<b>5b</b>	X
<b>c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? . . . . .	<b>5c</b>	
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible? . . . . .	<b>6a</b>	X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .	<b>6b</b>	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75? . . . . .	<b>7a</b>	X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .	<b>7b</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .	<b>7c</b>	X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year . . . . .	<b>7d</b>	
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<b>7e</b>	X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .	<b>7f</b>	X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . . . .	<b>7g</b>	X
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? . . . . .	<b>7h</b>	X
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . .	<b>8</b>	
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? . . . . .	<b>9a</b>	
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? . . . . .	<b>9b</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12 . . . . .	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . . .	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>a</b>	Gross income from members or shareholders . . . . .	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) . . . . .	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041? . . . . .	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>12b</b>	

**Part VI Governance, Management, and Disclosure** (Sections A, B, and C request information about policies not required by the Internal Revenue Code )

**Section A. Governing Body and Management**

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			
<b>1a</b>	Enter the number of voting members of the governing body . . . . .	<b>1a</b>	15
<b>b</b>	Enter the number of voting members that are independent . . . . .	<b>1b</b>	15
<b>2</b>	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? . . . . .	<b>2</b>	X
<b>3</b>	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? . . . . .	<b>3</b>	X
<b>4</b>	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .	<b>4</b>	X
<b>5</b>	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .	<b>5</b>	X
<b>6</b>	Does the organization have members or stockholders? . . . . .	<b>6</b>	X
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .	<b>7a</b>	X
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .	<b>7b</b>	X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .		
<b>a</b>	The governing body? . . . . .	<b>8a</b>	X
<b>b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<b>8b</b>	X
<b>9a</b>	Does the organization have local chapters, branches, or affiliates? . . . . .	<b>9a</b>	X
<b>b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? . . . . .	<b>9b</b>	
<b>10</b>	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990 . . . . .	<b>10</b>	X
<b>11</b>	Is there any officer, director or 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 . . . . .	<b>11</b>	X

**Section B. Policies**

		Yes	No
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	<b>12a</b>	X
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	<b>12b</b>	X
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .	<b>12c</b>	X
<b>13</b>	Does the organization have a written whistleblower policy? . . . . .	<b>13</b>	X
<b>14</b>	Does the organization have a written document retention and destruction policy? . . . . .	<b>14</b>	X
<b>15</b>	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: . . . . .		
<b>a</b>	The organization's CEO, Executive Director, or top management official? . . . . .	<b>15a</b>	X
<b>b</b>	Other officers or key employees of the organization? . . . . .	<b>15b</b>	X
Describe the process in Schedule O (see instructions)			
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .	<b>16a</b>	X
<b>b</b>	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .	<b>16b</b>	

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **AR**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization **THE POULTRY FEDERATION (501) 375-8131**  
**PO BOX 1446 LITTLE ROCK, AR 72203**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**
**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- 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 the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(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
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JERRY MOYE CHAIRMAN	4	X						0	0	0
MARVIN CHILDERS PRESIDENT	40			X	X	X		225,000	0	0
TRENT GOINS TREASURER	4	X								
TODD SIMMONS SECRETARY	4	X								
GARY MURPHY PAST CHAIRMAN	4	X								
PATRICK PILKINGTON MEMBER	1	X								
KEVIN MCDANIEL MEMBER	1	X								
MIKE MCCLURE MEMBER	1	X								
STEVE STORM MEMBER	1	X								
TIM SCANLAN MEMBER	1	X								
GREG SPENCER MEMBER	1	X								
LYNN NUTT MEMBER	1	X								
BLAKE EVANS MEMBER	1	X								
CHARLES GEORGE MEMBER	1	X								
HAROLD PLEDGER MEMBER	1	X								
AMY WITTE ALLIED REP	1	X								
JOHN BRYANT VICE-PRESIDENT	40			X	X	X		75,000		



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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)							(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
		Ind v dual	Dir se t e o r	In s t i t u t i o n a l	Off i c e r	Key em p l o y e e	H i g h e s t c o m p e n s a t e d	F o r m e r			
JOHN WARD VICE-PRESIDENT	40				X	X	X		106,923		0
DR JAMES BARTON LAB DIRECTOR						X	X		92,001		0
<b>1b Total</b>									<b>498,924</b>	<b>0</b>	<b>0</b>

**2** Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **2**

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . . . . **3**
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual . . . . . **4**
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person . . . . . **5**

	Yes	No
<b>3</b>		X
<b>4</b>	X	
<b>5</b>		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

**2** Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization **2**

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, grants, and other revenue</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>				
	<b>b</b> Membership dues . . . . .	<b>1b</b> 494,487				
	<b>c</b> Fundraising events . . . . .	<b>1c</b> 116,168				
	<b>d</b> Related organizations . . . . .	<b>1d</b>				
	<b>e</b> Government grants (contributions) . . . . .	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b>				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$					
	<b>h Total.</b> Add lines 1a-1f . . . . .		610,655			
<b>Program service revenue</b>	<b>2a</b> <u>SPRINGDALE LAB</u>	<b>Business Code</b> 900099	489,479			489,479
	<b>b</b> <u>SYMPOSIUM &amp; WORKSHOPS</u>	900099	42,300			42,300
	<b>c</b> _____					
	<b>d</b> _____					
	<b>e</b> _____					
	<b>f</b> All other program service revenue . . . . .					
	<b>g Total.</b> Add lines 2a-2f . . . . .		531,779			
	<b>Other revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		15,079	15,079	
<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .						
<b>5</b> Royalties . . . . .						
<b>6a</b> Gross Rents . . . . .		(i) Real (ii) Personal				
<b>b</b> Less rental expenses . . . . .						
<b>c</b> Rental income or (loss) . . . . .						
<b>d</b> Net rental income or (loss) . . . . .						
<b>7a</b> Gross amount from sales of assets other than inventory . . . . .		(i) Securities (ii) Other				
<b>b</b> Less cost or other basis and sales expenses . . . . .						
<b>c</b> Gain or (loss) . . . . .						
<b>d</b> Net gain or (loss) . . . . .						
<b>8a</b> Gross income from fundraising events (not including \$ 116,168 of contributions reported on line 1c) . . . . .						
See Part IV, line 18 . . . . .		<b>a</b> 449,446				
<b>b</b> Less direct expenses . . . . .		<b>b</b> 206,185				
<b>c</b> Net income or (loss) from fundraising events . . . . .			243,261	243,261		
<b>9a</b> Gross income from gaming activities . . . . .						
See Part IV, line 19 . . . . .		<b>a</b>				
<b>b</b> Less direct expenses . . . . .		<b>b</b>				
<b>c</b> Net income or (loss) from gaming activities . . . . .						
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>					
<b>b</b> Less cost of goods sold . . . . .	<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory . . . . .						
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11a</b> <u>MISC</u>	900099	43,986			43,986	
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> All other revenue . . . . .						
<b>e Total.</b> Add lines 11a-11d . . . . .		43,986				
<b>12 Total Revenue.</b> Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e . . . . .		1,444,760	258,340	0	575,765	

**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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 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 governments and organizations in the U S See Part IV, line 21 . . . . .				
2 Grants and other assistance to individuals in the U S See Part IV, line 22 . . . . .				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 . . . . .				
4 Benefits paid to or for members . . . . .				
5 Compensation of current officers, directors, trustees, and key employees . . . . .	225,000		225,000	
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 . . . . .	427,797	341,316	86,481	
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	25,300	12,818	12,482	
9 Other employee benefits . . . . .	54,101	31,578	22,523	
10 Payroll taxes . . . . .	47,700	26,258	21,442	
11 Fees for services (non-employees)				
a Management . . . . .				
b Legal . . . . .	62,704	12,588	50,116	
c Accounting . . . . .				
d Lobbying . . . . .				
e Professional fundraising services See Part IV, line 17 . . . . .				
f Investment management fees . . . . .				
g Other . . . . .	13,874		13,874	
12 Advertising and promotion . . . . .	19,902	1,575	18,327	
13 Office expenses . . . . .	84,964	17,447	67,517	
14 Information technology . . . . .	8,761	745	8,016	
15 Royalties . . . . .				
16 Occupancy . . . . .	33,792	8,841	24,951	
17 Travel . . . . .	34,214	11,403	22,811	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
19 Conferences, conventions, and meetings . . . . .	63,080	39,648	23,432	
20 Interest . . . . .	4,781		4,781	
21 Payments to affiliates . . . . .				
22 Depreciation, depletion, and amortization . . . . .	43,078	17,477	25,601	
23 Insurance . . . . .	13,120	2,279	10,841	
24 Other expenses Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
a <b>SPRINGDALE LAB COSTS</b>	251,175	251,175		
b <b>PROXY TAX</b>	20,000		20,000	
c				
d				
e				
f All other expenses . . . . .				
25 <b>Total functional expenses.</b> Add lines 1 through 24f . .	1,433,343	775,148	658,195	0
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> if following \ SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. . . . .				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>A s s e t s</b>	<b>1</b> Cash - non-interest-bearing . . . . .		<b>1</b>	
	<b>2</b> Savings and temporary cash investments . . . . .	1,028,912	<b>2</b>	853,293
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	101,451	<b>4</b>	84,561
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .	24,008	<b>8</b>	53,498
	<b>9</b> Prepaid expenses and deferred charges . . . . .	12,370	<b>9</b>	11,687
	<b>10a</b> Land, buildings, and equipment - cost basis . . . . . <b>10a</b> 1,135,312			
	<b>b</b> Less: accumulated depreciation. Complete Part VI of Schedule D . . . . . <b>10b</b> 745,531	424,912	<b>10c</b>	389,781
	<b>11</b> Investments - publicly traded securities . . . . .	14,835	<b>11</b>	12,958
	<b>12</b> Investments - other securities. See Part IV, line 11. . . . .	268,803	<b>12</b>	234,297
	<b>13</b> Investments - program-related. See Part IV, line 11. . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11. . . . .	12,354	<b>15</b>	6,570
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	1,887,645	<b>16</b>	1,646,645	
<b>L i a b i l i t i e s</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	219,908	<b>17</b>	34,000
	<b>18</b> Grants payable . . . . .	155,417	<b>18</b>	160,742
	<b>19</b> Deferred revenue . . . . .	7,937	<b>19</b>	3,759
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	63,085	<b>23</b>	59,727
	<b>24</b> Unsecured notes and loans payable . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .	307,500	<b>25</b>	246,523
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	753,847	<b>26</b>	504,751
<b>N e t A s s e t B a l a n c e s</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	1,133,798	<b>27</b>	1,141,894
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
	<b>33</b> Total net assets or fund balances . . . . .	1,133,798	<b>33</b>	1,141,894
	<b>34</b> Total liabilities and net assets/fund balances . . . . .	1,887,645	<b>34</b>	1,646,645

**Part XI Financial Statements and Reporting**

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? . . . . .	<b>2a</b>	X
<b>b</b>	Were the organization's financial statements audited by an independent accountant? . . . . .	<b>2b</b>	X
<b>c</b>	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . . . .	<b>2c</b>	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? . . . . .	<b>3a</b>	X
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? . . . . .	<b>3b</b>	

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

► **To be completed by organizations described below.**

► **Attach to Form 990 or Form 990-EZ.**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

**If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization

Employer identification number

**THE POULTRY FEDERATION**

**71-0257015**

**Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.**  
See the instructions for Schedule C for details

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures . . . . . ► \$
- 3 Volunteer hours . . . . .

**Part I-B To be completed by all organizations exempt under section 501(c)(3).**  
See the instructions for Schedule C for details

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ► \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ► \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . ☐ Yes ☐ No
- 4a Was a correction made? . . . . . ☐ Yes ☐ No
- b If "Yes," describe in Part IV

**Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).**  
See the instructions for Schedule C for details

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ► \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ► \$
- 3 Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b . . . . . ► \$
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . . ☐ Yes ☐ No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

**Part II-A** To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details

- A** Check ☐ if the filing organization belongs to an affiliated group
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .														
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .														
<b>d</b>	Other exempt purpose expenditures . . . . .														
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .														
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .														
<b>h</b>	Subtract line 1g from line 1a. Enter -0- if line g is more than line a . . . . .														
<b>i</b>	Subtract line 1f from line 1c. Enter -0- if line f is more than line c . . . . .														
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .														

☐ Yes ☐ No

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroot non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

EEA

Schedule C (Form 990 or 990-EZ) 2008

**Part II-B** To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
<b>i</b> Other activities? If "Yes," describe in Part IV			
<b>j</b> Total lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A** To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?		X
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?		X
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?		

**Part III-B** To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4).	<b>5</b>	

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i

Also, complete this part for any additional information

**SCHEDULE D  
(Form 990)**

**Supplemental Financial Statements**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

**▶ Attach to Form 990. To be completed by organizations that  
answered "Yes," to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.**

Name of the organization

THE POULTRY FEDERATION

Employer identification number

71-0257015

**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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .		
2 Aggregate contributions to (during year) . . . . .		
3 Aggregate 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? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? . . . . . <input type="checkbox"/> Yes <input type="checkbox"/> No		

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

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

<input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements . . . . .	2a
b Total acreage restricted by conservation easements . . . . .	2b
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c
d Number of conservation easements included in (c) acquired after 8/17/06 . . . . .	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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, violations, and enforcement of the conservation easements it holds? . . . . . ☐ Yes ☐ No

6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing 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 XIV, 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, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 . . . . .	▶ \$ _____
(ii) Assets included in Form 990, Part X . . . . .	▶ \$ _____

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 relating to these items

a Revenues included in 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 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

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other \_\_\_\_\_

c ☐ Preservation for future generations

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

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 Trust, Escrow and Custodial Arrangements.** Complete if organization answered "Yes" to 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 XIV and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if organization answered "Yes" to 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 Investment earnings or 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 year end balance held as:

a Board designated or quasi-endowment ▶ \_\_\_\_\_ %

b Permanent endowment ▶ \_\_\_\_\_ %

c Term endowment ▶ \_\_\_\_\_ %

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

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

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

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

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10

Description of Investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land	110,000			110,000
b Buildings	728,088		560,747	167,341
c Leasehold improvements				
d Equipment	146,218		74,816	71,402
e Other STMD1E	151,006		109,968	41,038
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))				389,781

**Part VII Investments - Other Securities.** 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
Financial derivatives and other financial products . . . . .		
Closely-held equity interests . . . . .		
Other _____		
<b>CASH VALUE OF LIFE INS</b>	<b>234,297</b>	
<b>Total.</b> (Column (b) should equal Form 990, Part X, col. (B) line 12.) ▶	<b>234,297</b>	

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15

(a) Description	(b) Book value
<b>OTHER ASSETS</b>	<b>6,570</b>
<b>Total.</b> (Column (b) should equal Form 990, Part X, col. (B) line 15.) ▶	<b>6,570</b>

**Part X Other Liabilities.** See Form 990, Part X, line 25

(a) Description of liability	(b) Amount
Federal income taxes	
<b>VARIOUS CAP LEASES</b>	<b>12,226</b>
<b>ACC RET OBLIGATION</b>	<b>234,297</b>
<b>Total.</b> (Column (b) should equal Form 990, Part X, col. (B) line 25.) ▶	<b>246,523</b>

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4-8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	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 XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

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	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	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 XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

**Part XIV Supplemental Information**

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Department of the Treasury  
Internal Revenue Service  
Name of the organization

▶ **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

**Open to Public Inspection**

71-0257015

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events Add col (a) through col (c)
		POULTRY FEST (event type)	(event type)	(total number)	
Revenue	1 Gross receipts . . . . .	565,614			565,614
	2 Less Charitable contributions . . . . .	116,168			116,168
	3 Gross revenue (line 1 minus line 2) . . . . .	449,446			449,446
Direct Expenses	4 Cash prizes . . . . .	4,850			4,850
	5 Non-cash prizes . . . . .				
	6 Rent/facility costs . . . . .	10,200			10,200
	7 Other direct expenses . . . . .	191,135			191,135
	8 Direct expenses summary Add lines 4 through 7, column (d) . . . . . ▶				( 206,185 )
	9 Net income summary Combine lines 3 and 8 in column (d) . . . . . ▶				243,261

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Direct Expenses	1 Gross revenue . . . . .				
	2 Cash prizes . . . . .				
	3 Non-cash prizes . . . . .				
	4 Rent/facility costs . . . . .				
	5 Other direct expenses . . . . .				
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶				( )
	8 Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶				

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities _____		
a Is the organization licensed to operate gaming activities in each of these states? . . . . .	9a	
b If "No," Explain _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . .	10a	
b If "Yes," Explain _____		
11 Does the organization operate gaming activities with nonmembers? . . . . .	11	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	12	

**SCHEDULE J  
(Form 990)**Department of the Treasury  
Internal Revenue Service**Compensation Information****For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees****► Attach to Form 990. To be completed by organizations  
that answered "Yes" to Form 990, Part IV, line 23.**

OMB No 1545-0047

**2008****Open to Public  
Inspection**

Name of the organization

**THE POULTRY FEDERATION**

Employer identification number

**71-0257015****Part I Questions Regarding Compensation****1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? . . . . .**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |  |  |
|--|--|
| <input type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations     | <input type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- |  |           |  |
|--|-----------|--|
| <b>a</b> Receive a severance payment or change of control payment? . . . . .                             | <b>4a</b> |  |
| <b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . . | <b>4b</b> |  |
| <b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? . . . . .    | <b>4c</b> |  |
- If "Yes" to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.****5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- |  |           |  |
|--|-----------|--|
| <b>a</b> The organization? . . . . .         | <b>5a</b> |  |
| <b>b</b> Any related organization? . . . . . | <b>5b</b> |  |
- If "Yes," to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- |  |           |  |
|--|-----------|--|
| <b>a</b> The organization? . . . . .         | <b>6a</b> |  |
| <b>b</b> Any related organization? . . . . . | <b>6b</b> |  |
- If "Yes," to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . .**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III . . . . .

Yes No

**1b****2****4a****4b****4c****5a****5b****6a****6b****7****8**

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

EEA

Schedule J (Form 990) 2008



**SCHEDULE O  
(Form 990)**

**Supplemental Information to Form 990**

OMB No 1545-0047

**2008**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service  
Name of the organization

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Employer identification number

THE POULTRY FEDERATION

71-0257015

**01. Members or stockholder classes and rights (Part VI, line 6)**

As set forth in the Organization's Articles of Incorporation and By-Laws, the Organization is composed of members.

**02. Member election for additional members (Part VI, line 7a)**

Pursuant to the Organization's Articles of Incorporation and By-Laws, the membership of the Organization meet annually to nominate and elect the Board of Directors and Officers of the Organization.

**03. Form 990 governing body review (Part VI, line 10)**

The financial information reflected in the Organization's Form 990 for the year ended June 30, 2009 was presented and reviewed by the Board of Directors at their December 2009 meeting and then utilized in the preparation of the Organizations Form 990. The draft of the final Form 990 was submitted to the President of the Organization for review and consultation with the Executive Committee of the Board, as needed. Changes and comments from this review process were then incorporated into the return prior to filing.

**04. Conflict of interest policy compliance (Part VI, line 12c)**

The Organization maintains a written conflict of interest policy which is reviewed annually in connection with the election of new Board members.

**05. CEO, executive director, top management comp (Part VI, line 15a)**

Annually, the President of the Organization is evaluated by the Executive Committee on behalf of the Board of Directors. Compensation adjustments for this individual are approved by the Board of Directors.



Name of the organization

Employer identification number

THE POULTRY FEDERATION

71-0257015

**06. Other officer or key employee compensation (Part VI, line 15b)**

Annually, key employees of the Organization are evaluated by the President on behalf of the Board of Directors. Compensation adjustments for these individuals are approved in advance by the Board of Directors.

**07. Governing documents, etc, available to public (Part VI, line 19)**

The governing documents, conflict of interest policy and financial statements of the Organization are maintained by the Organization's President and staff and are made available to the public upon request.

# Federal Supporting Statements

2008 PG01

Name(s) as shown on return

FEIN

THE POULTRY FEDERATION

71-0257015

## SECTION 6033(E) PROXY TAX

Statement #

### Unformatted Statement

1. DUES, ASSESSMENTS AND SIMILAR AMTS REC	494,487	
2. LOBBYING AND POLITICAL EXPENDITURES		66,028
3. DUES DECLARED NONDEDUCTIBLE IN NOTICES	0	
4. SUBTRACT LINE 3 FROM BOTH LINES 1 & 2	494,487	66,028
5. TAXABLE LOBBYING AND POLITICAL EXPENDITURES (SMALLER OF TWO AMOUNTS ON LINE 4)		66,028
6. PROXY TAX (LINE 5 TIMES 35 PERCENT) TO PART III, LINE 37		23,110

Form 990, Schedule D, Part VI, Line 1e  
Investments - Other

PG01  
Statement #D1e

<u>Description of Investment</u>	<u>Cost/basis (Investment)</u>	<u>Cost/basis (Other)</u>	<u>Depr</u>	<u>Book Value</u>
LAND	110,000	0	0	110,000
BUILDINGS	178,540	0	0	178,540
L/H IMPROVEMENTS	0	0	0	0
EQUIPMENT - TPF	11,285	0	0	11,285
SPRINGDALE LAB	67,190	0	0	67,190
MISSOURI GRILL	478	0	0	478
CHICKEN KITCHEN	0	0	0	0
F&F - TPF	1,777	0	0	1,777
F&F - MO	194	0	0	194
F&F - OK	0	0	0	0
AUTOS - TPF	34,771	0	0	34,771
AUTOS - OK	20,677	0	0	20,677
Total	424,912	0	0	424,912

Name(s) as shown on return

FEIN

THE POULTRY FEDERATION

71-0257015

Part IV Investments - Land Building and Equipment

Description	Amount
Furnitures & Fixtures	\$ 71,114
Automobiles	79,892
Total:	<u>\$ 151,006</u>

Part VI Investments - Accumulated Dep Property

Description	Amount
Furniture & Fixtures	\$ 69,546
Automobiles	40,422
Total:	<u>\$ 109,968</u>

ASSET DEPRECIATION SHORT REPORT  
Arkansas Poultry Federation Jun. 30, 2009

Sorted: ASSET A/C#  
Method: 4-BOOK-Std Conv Applied

Range 141000 - 146000  
Include: All assets

Date Acq	Description	Meth/Life	Cost	Salvage Value	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 141000 - AUTOMOBILES - AR								
04/23/07	2007 Chevrolet Tahoe	SLP/ 5 00	46,362 00	0.00	46,362.00	11,590 50	9,272 40	20,862.90
Grand totals: 141000 - AUTOMOBILES - AR (1 assets)			46,362 00	0 00	46,362 00	11,590 50	9,272 40	20,862 90
ASSET A/C#: 141100 - AUTOMOBILES - OKLA								
08/21/06	2007 GMC YUKON	SLP/ 5 00	33,529 79	0.00	33,529 79	12,853 09	6,705.96	19,559.05
Grand totals 141100 - AUTOMOBILES - OKLA (1 assets)			33,529 79	0.00	33,529 79	12,853.09	6,705.96	19,559 05
ASSET A/C#: 142000 - FURNITURE & FIXTURES								
06/30/71	Filing Cabinet	SL/ 5 00	83 00	0.00	83 00	83.00	0.00	83.00
01/31/75	Two Filing Cabinets	SL/ 5 00	245.00	0.00	245 00	245 00	0.00	245.00
09/30/76	Desk	SL/ 5 00	281.00	0 00	281 00	281 00	0.00	281.00
01/31/78	Lamps, Table & Rack	SL/ 5 00	375.00	0 00	375.00	375 00	0.00	375.00
08/30/78	Table	SL/ 5 00	62.00	0 00	62 00	62.00	0.00	62 00
06/30/79	Hunne Hull Safe #13	SL/ 5 00	180 00	0 00	180 00	180 00	0 00	180.00
09/30/80	Two Glass Top Tables	SL/ 5 00	742.00	0.00	742.00	742.00	0.00	742 00
09/30/80	Receptionists Chair	SL/ 5 00	510.00	0 00	510 00	510 00	0.00	510 00
09/30/80	Conference Table & 22 Chairs	SL/10 00	13,409.00	0 00	13,409 00	13,409 00	0 00	13,409.00
09/30/80	Ten Stack Chairs	SL/ 5.00	2,225.00	0 00	2,225 00	2,225.00	0 00	2,225.00
01/31/81	Pictures	SL/ 5.00	1,522 00	0 00	1,522.00	1,522.00	0 00	1,522 00
07/31/81	Two Desk Chairs	SL/ 5.00	657 00	0.00	657.00	657.00	0 00	657 00
07/31/81	Window Blinds	SL/ 5 00	891.00	0.00	891 00	891.00	0 00	891 00
07/31/81	Bronze Plaque	SL/ 5 00	189.00	0 00	189 00	189 00	0 00	189 00
10/31/81	Window Blinds	SL/ 5 00	230 00	0 00	230 00	230.00	0 00	230 00
05/31/83	Alarm System	SL/ 5 00	1,014.00	0 00	1,014 00	1,014.00	0.00	1,014 00
03/30/85	Pnnts & Office Decorations	SL/ 5 00	2,202 00	0 00	2,202.00	2,202.00	0 00	2,202 00
05/31/85	Computer Desk & Chair	SL/ 5 00	595 00	0.00	595 00	595 00	0 00	595.00
05/31/86	Files & Trays	SL/ 5 00	580 00	0.00	580 00	580 00	0.00	580 00
06/30/86	Microwave	SL/ 5.00	248 00	0.00	248.00	248.00	0.00	248.00
07/31/86	Window Blinds	SL/ 5.00	266.00	0.00	266.00	266.00	0 00	266 00
10/31/86	Secretanal Chair	SL/ 5.00	226 00	0.00	226.00	226.00	0.00	226.00
12/31/86	Sofa & Cocktail Table	SL/ 5.00	1,502.00	0 00	1,502 00	1,502.00	0 00	1,502 00
05/31/87	Randall Tysons Portrait	DB200/ 7.00	2,500 00	0.00	2,500 00	2,500 00	0.00	2,500.00
06/30/87	Two Folding Tables	DB200/ 7 00	207.00	0.00	207.00	207 00	0 00	207.00
06/30/87	Black Two Drawer File	DB200/ 7.00	177 00	0 00	177.00	177.00	0.00	177.00
07/31/87	2 Drawer File W/Lock	DB200/ 7 00	169.00	0 00	169 00	169 00	0.00	169 00
08/31/87	Serving Dishes	DB200/ 7.00	221 00	0 00	221 00	221 00	0 00	221 00
07/30/88	Black Two Drawer File	DB200/ 5.00	207 00	0 00	207 00	207 00	0.00	207 00
07/31/88	Ice Maker - Sub Zero	DB200/ 7 00	985 00	0 00	985 00	985 00	0.00	985.00
01/29/90	Poultry Art	DB200/ 7 00	1,745 00	0 00	1,745 00	1,745 00	0.00	1,745 00
06/28/90	Dishes & Silverware	DB200/ 7.00	1,177 00	0 00	1,177.00	1,177 00	0 00	1,177 00
07/01/90	Kitchen Utensils	DB200/ 7.00	175 00	0.00	175.00	175.00	0 00	175.00
07/01/90	Two Drawer File Cabinet	DB200/ 7.00	151 00	0 00	151.00	151.00	0.00	151 00
07/01/90	Two Chairs	DB200/ 7.00	742.00	0.00	742 00	742.00	0 00	742 00
07/01/90	Folding Table	DB200/ 7.00	148.00	0.00	148 00	148.00	0 00	148.00
07/01/90	Laser Pnnter	DB200/ 5 00	1,177.00	0.00	1,177 00	1,177 00	0 00	1,177.00
07/26/91	Telephone System	DB200/ 7 00	2,369.00	0.00	2,369 00	2,369 00	0 00	2,369.00
04/01/92	Peachtree Acct. Program	DB200/ 5.00	210.00	0.00	210 00	210 00	0 00	210 00
09/25/92	Dishes	DB200/ 7 00	164 00	0 00	164 00	164 00	0.00	164.00
07/25/93	Coat Rack	DB200/ 7.00	258.00	0 00	258.00	258 00	0 00	258 00
01/04/94	Washer & Dryer	DB200/ 7 00	921 00	0 00	921 00	921 00	0 00	921 00
01/25/94	Kitchen Supplies/Fixture	DB200/ 5.00	157 00	0 00	157 00	157 00	0 00	157.00
04/28/94	Trash Cans	DB200/ 5 00	98.00	0 00	98.00	98 00	0.00	98 00
10/17/94	Refrigerator	DB200/ 7 00	848 00	0.00	848 00	848 00	0.00	848.00
01/22/96	Cradenza	DB200/ 5 00	954.00	0 00	954.00	954 00	0 00	954.00
01/22/96	Desk	DB200/ 5 00	1,197.00	0.00	1,197.00	1,197.00	0 00	1,197 00
01/22/96	Wastebasket	DB200/ 5 00	50 00	0.00	50 00	50 00	0.00	50.00
02/09/96	Two Lamps	DB200/ 5 00	372 00	0.00	372.00	372 00	0 00	372 00

ASSET DEPRECIATION SHORT REPORT  
Arkansas Poultry Federation Jun. 30, 2009

Sorted: ASSET A/C#  
Method: 4-BOOK-Std Conv Applied

Range: 141000 - 146000  
Include: All assets

Date Acq	Description	Meth/Life	Cost	Salvage Value	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 142000 - FURNITURE & FIXTURES								
02/09/96	Two Chairs	DB200/ 5 00	287.00	0 00	287.00	287 00	0.00	287 00
06/09/97	Office Furniture	DB200/ 5.00	842.00	0.00	842.00	842.00	0.00	842 00
06/09/97	Office Furniture	DB200/ 5 00	2,595 00	0.00	2,595.00	2,595.00	0 00	2,595.00
04/09/99	Cabinets	DB200/ 7.00	5,723.00	0.00	5,723 00	5,522.34	0.00	5,522.34
02/27/01	Television	DB200/ 7.00	298.02	0.00	298.02	268.18	0.00	268.18
03/05/03	Shelves	DB200/ 7 00	3,385.00	0.00	3,385.00	3,007.36	107.90	3,115.26
05/07/03	Filing Cabinet	DB200/ 7 00	522 42	0.00	522 42	464 14	16 65	480.79
09/03/03	Water Heater	DB200/ 7.00	731 98	0.00	731 98	650 32	23 33	673 65
06/08/04	Couch	DB200/ 7.00	600.00	0.00	600 00	533 06	19 13	552 19
07/31/04	Paintings - Entry Hall	DB200/ 7.00	988.53	0 00	988.53	853.44	38.60	892.04
08/12/04	Shelving	DB200/ 7.00	395 51	0.00	395.51	341.46	15.44	356 90
02/15/05	Entry Hall Chairs	DB200/ 7.00	508.05	0.00	508.05	342.74	47 23	389 97
11/15/05	Picture Frames-BA Framer	SL/ 7.00	944.19	0 00	944 19	337 20	134 88	472 08
Grand totals 142000 - FURNITURE & FIXTURES (62 assets)			63,433.70	0.00	63,433.70	61,657.24	403.16	62,060.40
ASSET A/C#: 142100 - FURN & FIX - MO								
12/16/98	Side chairs (4) & Table	SLP/ 7.00	506.00	0.00	506.00	506.00	0.00	506 00
12/16/98	Secretanal Workstation & Chair	SLP/ 7.00	600 00	0.00	600.00	600.00	0.00	600.00
12/16/98	Chicken Picture Art	SLP/ 7.00	150 00	0.00	150.00	150 00	0.00	150.00
12/16/98	2-drawer lateral files (3) black	SLP/ 7.00	839 97	0.00	839.97	839 97	0 00	839.97
12/16/98	Sharp UX-1100 Fax machine	SLP/ 7.00	79 99	0 00	79.99	79 99	0.00	79.99
12/16/98	Magic Chef 18-EYW Refrigerator	SLP/ 7.00	129.99	0.00	129 99	129 99	0.00	129.99
03/08/99	Work Station Lacasse A1234121	DB200/ 7 00	5,374.00	0 00	5,374.00	5,179.88	0.00	5,179 88
Grand totals 142100 - FURN & FIX - MO (7 assets)			7,679.95	0.00	7,679.95	7,485.83	0 00	7,485 83
ASSET A/C#: 142500 - EQUIPMENT								
10/14/03	Digital Camera	DB200/ 7.00	432 85	0.00	432.85	384 56	13.80	398.36
03/16/04	Vacuum Cleaner	DB200/ 7.00	522.11	0.00	522.11	463.87	16.64	480.51
01/13/05	Network Server & Accessones	DB200/ 5.00	3,979.13	0.00	3,979.13	3,248.56	292 23	3,540.79
04/05/05	Ice Maker	DB200/ 7 00	1,203 75	0.00	1,203.75	780 74	120 86	901 60
04/30/05	Gestetner Copier	DB200/ 7 00	4,935 22	0 00	4,935 22	3,200 91	495 52	3,696 43
07/01/05	Copier	DB200/ 5 00	32,754.56	0 00	32,754 56	25,679 58	2,829.99	28,509 57
07/29/05	Pre 1217A Folder Paper Auto Med SP	SL/ 7.00	1,891.15	0.00	1,891 15	675.40	270.16	945.56
08/01/08 A	Dell Laptop Computer	SLP/ 5 00	1,455.25	0 00	1,455.25	0 00	266.80	266 80
08/01/08 A	Dell Desktop Computer	SLP/ 5.00	1,146.50	0 00	1,146.50	0 00	210 19	210 19
08/01/08 A	Dell Desktop Computer	SLP/ 5 00	1,146.49	0 00	1,146.49	0 00	210 19	210 19
Grand totals: 142500 - EQUIPMENT (10 assets)			49,467.01	0 00	49,467 01	34,433.62	4,726 38	39,160 00
ASSET A/C#: 143100 - MISSOURI GRILL								
12/15/98	Walk-in Freezer & Refrigerator	SLP/ 7.00	4,000.00	0 00	4,000.00	4,000.00	0 00	4,000 00
12/16/98	Stainless Steel Tables (3)	SLP/ 7.00	900.00	0.00	900 00	900.00	0.00	900.00
12/16/98	Stainless Steel Counter	SLP/ 7.00	6,000.00	0.00	6,000 00	6,000.00	0.00	6,000 00
12/16/98	Chicken Nugget Fryer	SLP/ 7.00	3,000.00	0.00	3,000 00	3,000 00	0 00	3,000.00
12/16/98	Stainless Steel Sinks & Cart	SLP/ 7 00	1,000.00	0.00	1,000 00	1,000 00	0.00	1,000 00
12/16/98	Cool Cell Fan	SLP/ 7.00	1,500 00	0.00	1,500 00	1,500 00	0 00	1,500 00
12/16/98	PICNIC TABLES (16)	SLP/ 7.00	1,600 00	0 00	1,600 00	1,600.00	0.00	1,600.00
12/16/98	STEAM TABLE	SLP/ 7 00	950 00	0.00	950.00	950.00	0.00	950.00
11/30/06	Food Warmer	SLP/ 7 00	627 00	0.00	627.00	149 28	89.57	238.85
Grand totals 143100 - MISSOURI GRILL (9 assets)			19,577 00	0.00	19,577 00	19,099.28	89 57	19,188 85
ASSET A/C#: 144200 - LAB EQUIPMENT								
02/28/74	Deep Freeze - Revco	SL/ 7 00	2,106.00	0 00	2,106.00	2,106 00	0 00	2,106 00
12/31/93	File Cabinet	DB200/ 7.00	299.00	0.00	299.00	299.00	0 00	299.00
09/20/06	Gestetner Copier Leased	SLP/ 7.00	4,829 15	0.00	4,829.15	1,264 78	689 88	1,954.66
04/16/08	Biolek Washer & Vacuum Pump	SLP/ 7 00	8,423.00	0 00	8,423 00	300.82	1,203.29	1,504 11
04/16/08	Biotek Eight Channel Reader	SLP/ 7.00	7,050.00	0.00	7,050.00	251.79	1,007.14	1,258.93
04/16/08	Biotek Microplate Dispenser	SLP/ 7.00	6,560.00	0.00	6,560.00	234 29	937.14	1,171 43
04/16/08	Biotek Microplate Stacker	SLP/ 7.00	13,155 00	0 00	13,155.00	469 82	1,879 29	2,349 11
04/22/08	Epet Eight Channel 50-1200	SLP/ 7.00	2,769.09	0.00	2,769 09	98.90	395 58	494.48

ASSET DEPRECIATION SHORT REPORT  
 Arkansas Poultry Federation Jun. 30, 2009

Sorted ASSET A/C# Range: 141000 - 146000  
 Method: 4-BOOK-Std Conv Applied Include: All assets

						Includes Section 179		
Date Acq	Description	Meth/Life	Cost	Salvage Value	Depr Basis	Beg A/Depr	Curr Depr	End A/Depr
ASSET A/C#: 144200 - LAB EQUIPMENT								
04/23/08	Eline Eight Channel Pipette	SLP/ 7.00	992.96	0 00	992 96	35 46	141.85	177 31
04/29/08	VWR Autodiluter	SLP/ 7.00	12,167.88	0 00	12,167.88	434 57	1,738.27	2,172.84
05/01/08	VWR Twelve Channel Immuno Washer	SLP/ 7.00	812 63	0 00	812 63	19 35	116 09	135.44
05/06/08	Skatron Vacuum Pump	SLP/ 7.00	447.93	0 00	447.93	10 67	63.99	74.66
05/08/08	Workstations	SLP/ 7.00	5,051.58	0 00	5,051.58	120.28	721.65	841 93
05/09/08	Chairs	SLP/ 7.00	412 20	0 00	412 20	9.81	58.89	68.70
05/12/08	Samsung Phone System	SLP/ 7.00	2,630.17	0 00	2,630 17	62.62	375.74	438 36
05/21/08	Table	SLP/ 7.00	409.96	0.00	409.96	9.76	58.57	68.33
06/04/08	Desktop Computer	SLP/ 7.00	1,386.24	0 00	1,386.24	16 50	198 03	214.53
06/04/08	Latitude Computer and Accessones	SLP/ 7.00	2,610.12	0 00	2,610 12	31.07	372 87	403 94
06/11/08	Coffee Maker	SLP/ 7.00	212.24	0 00	212 24	2 53	30.32	32 85
06/11/08	Shredder	SLP/ 7.00	39.88	0.00	39.88	0.47	5 70	6 17
06/11/08	36 Inch Lateral File Cabinet	SLP/ 7 00	285 32	0 00	285.32	3 40	40 76	44 16
06/11/08	36 Inch Lateral File Cabinet	SLP/ 7.00	285.33	0.00	285.33	3.40	40 76	44.16
06/27/08	PS2 Keyboard MIT 10000	SLP/ 7 00	40.12	0.00	40.12	0 48	5 73	6.21
07/31/08 A	Incubator	SLP/ 7 00	4,198.32	0.00	4,198.32	0 00	599 76	599 76
Grand totals: 144200 - LAB EQUIPMENT (24 assets)			77,174 12	0.00	77,174 12	5,785 77	10,681 30	16,467.07
ASSET A/C#: 145900 - LAND								
04/14/80	Lot	LAND/40 00	110,000 00	0.00	110,000.00	0.00	0.00	0.00
Grand totals: 145900 - LAND (1 assets)			110,000.00	0.00	110,000.00	0 00	0 00	0 00
ASSET A/C#: 146000 - BUILDINGS								
05/31/80	Building	SL/20.00	153,763.00	0 00	153,763.00	153,763 00	0.00	153,763.00
12/01/80	Carpet	SL/ 7.00	0 00	0.00	0 00	0 00	0 00	0 00
12/01/80	Landscaping & Paving	SL/10 00	13,587 00	0 00	13,587 00	13,587 00	0.00	13,587 00
07/31/81	Electrical Work	SL/15.00	0.00	0.00	0.00	0.00	0.00	0 00
03/31/85	Additions	SL/18 00	190,174 00	0 00	190,174 00	190,174 00	0 00	190,174 00
12/31/88	Fence	DB150/15 00	673.00	0 00	673 00	673 00	0.00	673.00
05/31/89	Irrigation System	DB150/15 00	4,605.00	0 00	4,605 00	4,605 00	0.00	4,605 00
05/31/89	Remodel Don's Office	SL/31 50	2,798.00	0 00	2,798 00	1,699 64	88 83	1,788.47
07/01/90	Air Conditioning	DB150/ 7 00	7,598 00	0.00	7,598.00	7,598 00	0.00	7,598.00
07/01/90	Major Work to Cooling System	DB150/ 7 00	1,229 00	0 00	1,229 00	1,229.00	0 00	1,229 00
11/04/91	New Furnace	DB200/ 7 00	1,131.00	0 00	1,131 00	1,131 00	0 00	1,131 00
01/01/94	1994 Addition to Building	SL/31.50	315,368 00	0 00	315,368 00	148,395 44	10,011 68	158,407.12
01/11/95	Gutter Work	DB200/ 7.00	548 00	0.00	548.00	548.00	0 00	548.00
05/12/95	Cannier Furnace & Evaora	DB200/ 7.00	3,880.00	0 00	3,880.00	3,880.00	0 00	3,880.00
04/11/97	Air Conditioner	DB200/ 7.00	6,513.00	0 00	6,513.00	6,513 00	0.00	6,513.00
08/01/99	Cabinets	DB150/15.00	7,760 04	0 00	7,760 04	4,725.82	303 42	5,029.24
02/01/00	Fence	DB150/15 00	2,100 00	0.00	2,100 00	1,233 69	86.63	1,320 32
08/24/00	Carpet	DB150/15 00	4,403 50	0.00	4,403 50	2,472 83	193 07	2,665 90
08/31/00	New Paint	DB150/15 00	6,752 00	0.00	6,752.00	3,791 66	296 03	4,087.69
09/18/00	New Tile	DB150/15.00	336.17	0 00	336 17	187 45	14 87	202 32
08/19/03	Air Conditioner	DB150/15 00	4,015 00	0 00	4,015 00	2,763 74	125.13	2,888.87
02/28/05	Landscape Improvements	DB200/ 7 00	854 63	0.00	854 63	576 55	79 45	656.00
Grand totals 146000 - BUILDINGS (22 assets)			728,088 34	0.00	728,088.34	549,547.82	11,199.11	560,746.93

ASSET DEPRECIATION SHORT REPORT  
Arkansas Poultry Federation Jun. 30, 2009

Sorted: ASSET A/C# Range: 141000 - 146000  
Method: 4-BOOK-Std Conv Applied Include: All assets

Date Acq	Description	Meth/Life	Cost	Salvage Value	Depr Basis	Includes Section 179		
						Beg A/Depr	Curr Depr	End A/Depr
Grand totals for all accounts: (137 assets)			1,135,311.91	0 00	1,135,311.91	702,453.15	43,077 88	745,531.03

Codes that may appear next to the date acquired include: A - Addition, D - Disposal, T - Traded, MQ - Mid Quarter Applied

Additional Summary Statistics:	Cost	Curr Yr Salv	Prior Yr Salv	Depr Basis	Beg A/Depr	Curr Depr	Ending A/Depr	Net Book Val
Grand Totals for All Assets	1,135,311.91	0.00	0 00	1,135,311.91	702,453.15	43,077.88	745,531.03	389,780.88
Less: Inactive Assets	0.00	0 00	0.00	0.00	0 00	0.00	0.00	0.00
Disposed Assets	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Traded Assets	0.00	0.00	0.00	0.00	0 00	0.00	0.00	0.00
Net Totals (Active Assets)	1,135,311.91	0.00	0.00	1,135,311.91	702,453.15	43,077.88	745,531.03	389,780.88

**Application for Extension of Time to File an  
Exempt Organization Return**

OMB No. 1545-1709

Department of the Treasury  
Internal Revenue Service▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ . . . . . ▶ ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

**Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.****Part I Automatic 3-Month Extension of Time.** Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only. . . . . ▶ ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits..

<b>Type or print</b> File by the due date for filing your return. See instructions.	Name of Exempt Organization <b>THE POULTRY FEDERATION</b>	Employer identification number <b>71-0257015</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>P.O. BOX 1446</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>Little Rock, AR 72203</b>	

**Check type of return to be filed** (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **THE POULTRY FEDERATION P.O. BOX 1446, AR 72203**

Telephone No. ▶ **501-375-8131**

FAX No. ▶

- If the organization does not have an office or place of business in the United States, check this box ☐ . . . . . ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . . . . . . If this is for the whole group, check this box ☐ . . . . . ▶ ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02-16, 20 10, to file the exempt organization return for the organization named above. The extension is for the organization's return for.

▶ ☐ calendar year 20\_\_ or▶ ☒ tax year beginning 07-01, 20 08, and ending 06-30, 20 09

**2** If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	<b>3c</b>	\$

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

EEA

Form **8868** (Rev. 4-2009)