



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



Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income Tax

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150

2009Open to Public
Inspection**A For the 2009 calendar year, or tax year beginning****and ending**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization		D Employer identification number
		NEW MEXICO CATTLE GROWERS' ASSOCIATION		85-0056700
		Number and street (or P.O. box, if mail is not delivered to street address)		E Telephone number
		P.O. BOX 7517		505-247-0584
City or town, state or country, and ZIP + 4		F Group Exemption Number		
ALBUQUERQUE, NM 87194-7517				

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: ☐ Cash ☒ Accrual
Other (specify) ▶

I Website: ▶ NMAGRICULTURE.ORG

J Tax-exempt status (check only one) — ☒ 501(c) (5) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527 required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **418,090.**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	1,242.
	2	Program service revenue including government fees and contracts	2	179,101.
	3	Membership dues and assessments	3	160,450.
	4	Investment income	4	
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	
6b	Less: direct expenses other than fundraising expenses	6b		
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c		
7a	Gross sales of inventory, less returns and allowances	7a		
7b	Less: cost of goods sold	7b		
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8	Other revenue (describe) ▶ SEE STATEMENT 3)	8	77,297.	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	418,090.	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	159,145.
	13	Professional fees and other payments to independent contractors	13	56,274.
	14	Occupancy, rent, utilities, and maintenance	14	13,054.
	15	Printing, publications, postage, and shipping	15	7,771.
	16	Other expenses (describe) ▶ SEE STATEMENT 1)	16	251,902.
	17	Total expenses. Add lines 10 through 16	17	488,146.
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<70,056.>
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	641,455.
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	571,399.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	609,114.	538,164.
23 Land and buildings	26,753.	28,243.
24 Other assets (describe) ▶ SEE STATEMENT 2)	26,171.	31,306.
25 Total assets	662,038.	597,713.
26 Total liabilities (describe) ▶ CURRENT LIABILITIES)	20,583.	26,314.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	641,455.	571,399.

SCANNED JUL 29 2010

5
12

Part V Other Information (Note the statement requirements in the instructions for Part V)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Sch. N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. 0.		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved		
38b		N/A
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9		N/A
b Gross receipts, included on line 9, for public use of club facilities		N/A
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
section 4911 N/A ; section 4912 N/A ; section 4955 N/A		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		N/A
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		N/A
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41 List the states with which a copy of this return is filed. NM		
42a The organization's books are in care of TRAY SAUBLE Telephone no. 505-247-0584		
Located at 2231 RIO GRANDE BLVD NW, ALBUQUERQUE, NM ZIP + 4 87104		
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)?		X
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		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?		X
If "Yes," enter the name of the foreign country: Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		
43 and enter the amount of tax-exempt interest received or accrued during the tax year 43 N/A		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

Form 990-EZ (2009)

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- 46 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
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- b If "Yes," was the related organization a section 527 organization?
- 50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	Yes	No
46		
47		
48		
49a		
49b		

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
N/A				

f Total number of other employees paid over \$100,000

- 51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
N/A		

d Total number of other independent contractors each receiving over \$100,000

Sign Here	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.		
	Signature of officer	Date	
	TROY SAUBLE, SECRETARY-TREASURER		
	Type or print name and title		
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4	Preparer's identifying number (See instr.)	EIN
	DAVID A. RASMUSSEN, PC P.O. BOX 10760 ALBUQUERQUE, NM 87184-0760	05/25/10	(505) 878-0829
			Phone no.

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

Form 990-EZ (2009)

FORM 990-EZ	OTHER EXPENSES	STATEMENT	1
DESCRIPTION		AMOUNT	
ADVERTISING		8,640.	
ANNUAL CONVENTION		89,348.	
AUTOMOTIVE EXPENSE		845.	
SCHOLARSHIPS		4,127.	
CONTRACT LABOR		11,813.	
CONTRIBUTIONS		14,687.	
DUES & SUBSCRIPTIONS		3,208.	
RENTAL EQUIPMENT		2,673.	
INCOME TAXES		<354.>	
INSURANCE		14,511.	
LEGISLATIVE EXPENSES		15,811.	
MEALS & ENTERTAINMENT		3,739.	
MEETINGS		1,754.	
MEMBERSHIP		5,380.	
MISCELLANEOUS		781.	
OFFICE EXPENSE		17,935.	
ON LINE SERVICES		14.	
PAYROLL TAXES		15,404.	
PROPERTY TAXES		5,253.	
GROSS RECEIPTS TAXES		3,289.	
TELEPHONE		9,630.	
TRAVEL		20,250.	
WOOL GROWERS		2,547.	
NMFLC EXPENSES		117.	
THEFT REWARD		500.	
TOTAL TO FORM 990-EZ, LINE 16		251,902.	

FORM 990-EZ	OTHER ASSETS	STATEMENT	2
DESCRIPTION	BEG. OF YEAR	END OF YEAR	
ACCOUNTS RECEIVABLE	17,728.	21,168.	
PREPAID EXPENSES	0.	1,783.	
OTHER DEPRECIABLE ASSETS	8,443.	8,355.	
TOTAL TO FORM 990-EZ, LINE 24	26,171.	31,306.	

FORM 990-EZ	OTHER REVENUE	STATEMENT	3
-------------	---------------	-----------	---

DESCRIPTION	AMOUNT
UBI-INSURANCE CONSULTING	53,109.
UBI- ADMINISTRATIVE FEES	23,522.
INTEREST INCOME	666.
TOTAL TO FORM 990-EZ, LINE 8	77,297.

FORM 990-EZ	OCCUPANCY, RENT, UTILITIES AND MAINTENANCE	STATEMENT	4
-------------	--	-----------	---

DESCRIPTION	AMOUNT
DEPRECIATION	5,694.
OTHER EXPENSES	7,360.
TOTAL TO FORM 990-EZ, LINE 14	13,054.

FORM 990-EZ

INFORMATION REGARDING TRANSFERS
ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS

STATEMENT 5

- A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS,
DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL
BENEFIT CONTRACT? [] YES [X] NO
- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS,
DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

990-EZ PG 2

STATEMENT 6

TO PROMOTE & PROTECT THE CATTLE INDUSTRY IN NEW MEXICO BY PROVIDING A
UNIFIED VOICE ON
ISSUES OF ECONOMIC IMPORTANCE TO THE NM CATTLE INDUSTRY

New Mexico Cattle Growers' Association Officers 2009 - 2010

(January 2009)

Alisa Ogden

President

P O Box 94

Loving, NM 88256

Bert Ancell

President Elect

HCR 67, Box 23

Bell Ranch, NM 88431

Emery Chee

Vice President at Large

58 Cty Rd 5192

Bloomfield, NM 87413

Ty Bays

SW Vice President

PO Box 2982

Silver City, NM 88062

Louis Montoya

NW Vice President

1610 Hwy 170

La Plata, NM 87418

Rex Wilson

SE Vice President

SR 1-53

Carrizozo, NM 88301

Jose J. Varela Lopez

NE Vice President

PO Box 15921

Santa Fe, NM 87592

Troy Sauble

Secretary/Treasurer

HCR 62 Box 29

Maxwell, NM 87728

Bill Sauble

Past President

HCR 62, Box 29

Maxwell, NM 87728

Don L. (Bebo) Lee

Past President

PO Box 149

Alamogordo, NM 88310

Caren Cowan

Executive Director

2231 Rio Grande Blvd NW

Albuquerque, NM 87194

DIRECTORS 2009

Scott Bidegain
Box 82
Conchas Dam, NM 88416

Pat Boone
PO Box 10
Elida, NM 88116-0010

Jeff Bilberry
PO Box 112
Elida, NM 88116

Linn Blancett
Box 55
Aztec, NM 87410

Diane Bowman
PO Box 84
Crownpoint, NM 87313

Jim Bob Burnett
P.O. Box 1566
Hope, NM 88250

Mike Casabonne
P.O. Box 1416
Hope, NM 88250

Gerald Chacon
1007 C.S Prince Dr.
Espanola, NM 87532

Jack Chatfield
P.O. Box 226
Mosquero, NM 87733

Brad Christmas
PO Box 173
Wagon Mound, NM 87752

Blair Clavel
45 Clavel Ln.
Roy, NM 87743

Joe Clavel
HC 73, Box 181
Roy, NM 87743

John Clemmons
PO Box 117
Elida, NM 88116

Tom Cooper
585 S Valley Dr.
Las Cruces, NM 88005-2733

Cliff Copeland
859 Romero Rd
Nara Visa, NM 88430

Joe Culbertson
542 Culbertson Rd
Amistad, NM 88410

Bruce Davis
PO Box 395
Springer, NM 87747

Linda Davis
CS Cattle Co.
620 NM Hwy 58
Cimarron, NM 87714-9713

Milford Denetclaw
PO Box 1289
Shiprock, NM 87420

Lewis Derrick
PO Box 441
Artesia, NM 88211-0441

Roy Farr
PO Box 1000
Datil, NM 87821

Sid Goodloe
PO Box 598
Capitan, NM 88316

Lane Grau
1680 CR 37
Grady, NM 88120

Jim Grider
PO Box 990
Carrizozo, NM 88301

Phil Harvey, Jr.
P.O. Box 40
Mesilla, NM 88046

Mike Hobbs
1115 Hwy 21
Cimarron, NM 87715

Nikki Hooser
PO Box 757
Springer, NM 87747

Bobby Jones
Box 599
Dell City, TX 79837

David Kincaid
Dunken Rte
Pinon, NM 88344

Garrett King
PO Box 9
Capulin, NM 88414

Levi Klump
726 Horse Camp Dr
Animas, NM 88020

Justin Knight
P.O. Box 714
Tucumcari, NM 88401

Oliver (Sato) Lee
HC 66, Box 615
Mountainair, NM 87036

Innis Lewis
PO Box 611
Alamogordo, NM 88130

Bill Marley
Rt 2 45 Crossroads
Roswell, NM 88203

Mark Marley
HC 30 Box 1495
Roswell, NM 88201

Amanda Mayfield
500 Dale Douglas
Lordsburg, NM 88045

David McCrea
HC 12 Box 1532
Roswell, NM 88201

Ron Merritt
HC 66, Box 39
Yeso, NM 88136

Ronnie Merritt
HC 66, Box 30
Yeso, NM 88136

Pat Montoya
211 Hwy 511
Blanco, NM 87412

Greg Moore
HC 60 Box 8
Springer, NM 87747

Tom Payne
PO Box 2187
Roswell, NM 88020

Joe Bill Nunn
11770 Steeple A Rd NE
Deming, NM 88030

David Ogilvie
10199 Hwy 180 West
Gila, NM 88038

Frank Rice
HCR 62 Box 44
Raton, NM 87740

Bob Ricklefs
17 Deer Run Rd
Cimarron, NM 87714

Gretchen Sammis
P.O. Box 227
Cimarron, NM 87714

Jane Schafer
P.O. Box 316
Dell City, TX 79837

Tom Sidwell
4290 Quay Road AR
Tucumcari, NM 88401

Stirling Spencer
PO Box 36
Carrizozo, NM 88301

Chuck Stocks
PO Box 7127
Albuquerque, NM 87194

Jon Swapp
Rt 1 Box 298
Duncan, AZ 85534

Felicia Thal
PO Box 116 (Mora)
Buena Vista, NM 87712

James Vance
2714 QR 65 5
Tucumcari, NM 88401

Gene Whetten
HC 64 Box 30
Magdalena, NM 87825

Mark Whetten
HCR 67 Box 30
Newkirk, NM 88431

Jerry Witte
1183 John Road
Belen, NM 87002

NMCGA

Past Presidents

(2009)

Bill Sauble
HCR 62, Box 29
Maxwell, NM 87728

Phil H. Bidegain
5859 QRBK
Tucumcari, NM 88401

Bob Frost
1710 A Quay Rd. 50
San Jon, NM 88434

Wesley Grau
Rt. 1 Box 14
Grady, NM 88120

Don Hofman
8096 State Hwy. 209
Tucumcari, NM 88401

Phillip Bidegain
PO Box 865
Tucumcari, NM 88401

Don L. (Bebo) Lee
PO Box 149
Alamogordo, NM 88310

Jimmy R. Bason
St Rt. 2 Box 88
Hillsboro, NM 88042

Bill Humphries
PO Box 861
Tucumcari, NM 88401

Bill King
PO Box 564
Stanley, NM 87056

Bob Jones
PO Box 599
Dell City, TX 79837

Will Orndorff
PO Box 1247
Socorro, NM 87801

NON VOTING MEMBERS

2009

Allied Industries Committee, Chair

Shacey Sullivan
Farm Credit of New Mexico
P.O. Box 36120
Albuquerque, NM 87176-6120

College of Ag & Home Economics

Lowell B. Catlett, Dean & Chief Adm.
Officer - NMSU Box 3AE
Las Cruces, NM 88003

New Mexico Beef Council

Jane Frost (Bob)
1710 A. Quay Rd. 50
San Jon, NM 88434

New Mexico CowBelles

Kathryn Malcom-Callis
611 N. 4th Ave
Clayton, NM 88415

Insurance Services of New Mexico

Jim Lyssy
PO Box 49
Ft. Sumner, NM 88119

NMCGA Insurance Administrator

Bob Homer
5600 Wyoming NE Suite 150 A
Albuquerque, NM 87109

Form **4562**Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return**Depreciation and Amortization 990-EZ**
(Including Information on Listed Property)

▶ See separate instructions.

▶ Attach to your tax return.

OMB No 1545-0172

2009Attachment
Sequence No **67****NEW MEXICO CATTLE GROWERS' ASSOCIATION FORM 990-EZ PAGE 1****85-0056700****Part I Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	250,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	800,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	1,002.

Part III MACRS Depreciation (Do not include listed property) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	3,985.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2009 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		1,092.	5 YRS.	HY	200DB	218.
c 7-year property		2,613.	7 YRS.	HY	200DB	374.
d 10-year property						
e 15-year property		3,390.	15 YRS.	HY	150DB	115.
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property	/		27 5 yrs	MM	S/L	
	/		27 5 yrs	MM	S/L	
i Nonresidential real property	/		39 yrs	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year	/		40 yrs	MM	S/L

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr	22	5,694.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V**Listed Property** (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles)**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use							25	
26 Property used more than 50% in a qualified business use								
		%						
		%						
		%						
27 Property used 50% or less in a qualified business use:								
		%				S/L -		
		%				S/L -		
		%				S/L -		
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1							28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1							29	

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person.

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle		(b) Vehicle		(c) Vehicle		(d) Vehicle		(e) Vehicle		(f) Vehicle	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2009 tax year					
43 Amortization of costs that began before your 2009 tax year					43
44 Total. Add amounts in column (f). See the instructions for where to report					44

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► 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 ☒ **X**
- 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 and click on *e-file for Charities & Nonprofits*

Type or print File by the due date for filing your return. See instructions	Name of Exempt Organization	Employer identification number
	NEW MEXICO CATTLE GROWERS' ASSOCIATION	85-0056700
	Number, street, and room or suite no. If a P.O. box, see instructions	
	P.O. BOX 7517	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	ALBUQUERQUE, NM 87194-7517	

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

*ORIGINALLY FILED AS 990-BUT
QUALIFIES FOR 990-EZ*

- | | | |
|---|---|------------------------------------|
| <input 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 checked="" 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 |

TRAY SAUBLE

- The books are in the care of ► **2231 RIO GRANDE BLVD NW - ALBUQUERQUE, NM 87104**
Telephone No. ► **505-247-0584** 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 **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ☒ calendar year **2009** or
► ☐ tax year beginning _____, and ending _____

TAX RETURN ATTACHED

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

3a 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	3a	\$
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	3b	\$
c Balance Due. 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	3c	\$ N/A

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

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

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

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

OMB No 1545-1709

▶ 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 ☒ **X**
- 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 and click on e-file for Charities & Nonprofits

Type or print	Name of Exempt Organization	Employer identification number
	NEW MEXICO CATTLE GROWERS' ASSOCIATION	85-0056700
	Number, street, and room or suite no. If a P.O. box, see instructions	
	P.O. BOX 7517	
File by the due date for filing your return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	ALBUQUERQUE, NM 87194-7517	

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 |

TRAY SAUBLE

- The books are in the care of ▶
- 2231 RIO GRANDE BLVD NW - ALBUQUERQUE, NM 87104**

Telephone No. ▶ **505-247-0584**

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 **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ▶ ☒ calendar year **2009** or
- ▶ ☐ tax year beginning _____, and ending _____.

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

3a 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.	3a	\$
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.	3b	\$
c Balance Due. 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.	3c	\$ N/A

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