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Form 990-EZ

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)

2009

OMB No. 1545 1150

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

For the 2009 calendar year, or tax year beginning . 2009, and ending Employer identification number Check if applicable Please Address change WASHINGTON CATTLE FEEDERS ASSOCIATION 91-0722321 label or print or Name change PO BOX 1256 Telephone number Initial return QUINCY, WA 98848 Termination Specific Instruc-Amended return Group Exemption tions Number Application pendir X Cash Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Accounting method Accrual Other (specify) ► X Check ► if the organization is not Website: ► N/A required to attach Schedule B (Form 990, Tax-exempt status (check only one) — X 501(c) (5) ◄ (insert no) 990-EZ, or 990-PF). 4947(a)(1) or 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 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 192,517. Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 26,916. Contributions, gifts, grants, and similar amounts received 1 Program service revenue including government fees and contracts 2 46,153. 2 3 3 114,241. Membership dues and assessments 4 5,207. 1 Investment income 5a Gross amount from sale of assets other than inventory **b** Less cost or other basis and sales expenses c Gain or (loss) from sale of assets other than inventory (Subtract in 5b from In-5a) 5с It any amount is from 6 Special events and activities (complete applicable parts of Schedule G) a Gross revenue (not including \$ reported on line 1) 62 c Net income or (loss) from special events and activities (Subtract line 6b from-line:6a) b Less, direct expenses other than fundraising expenses 68 6c 7a Gross sales of inventory, less returns and allowances 7 a 7b b Less cost of goods sold c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7 c 8 Other revenue (describe > 192,517. 9 **Total revenue** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 SEE STATEMENT 1 Grants and similar amounts paid (attach schedule) 10 6,500. 11 11 Benefits paid to or for members 12 12 Salaries, other compensation, and employee benefits 860. 13 Professional fees and other payments to independent contractors 13 14 Occupancy, rent, utilities, and maintenance 14 210. 15 Printing, publications, postage, and shipping 15 147,518. 16 Other expenses (describe ► SEE STATEMENT 2 16 17 Total expenses. Add lines 10 through 16 17 155,088. 37,429. 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year 19 113,524. figure reported on prior year's return) 18,610. SEE STATEMENT 3 20 20 Other changes in net assets or fund balances (attach explanation) 21 169,563. 21 Net assets or fund balances at end of year Combine lines 18 through 20 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 113,524. **22** 169,563. 22 Cash, savings, and investments 23 23 Land and buildings 24 24 Other assets (describe ► 113,524. 169,563. 25 25 Total assets Total liabilities (describe ► 0. 26 0. 27 Net assets or fund balances (line 27 of column (B) must agree with line 21) 113,524. 27 169,563.

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

TEEA0803L 01/30/10

Form 990-EZ (2009)

Form	990-EZ (2009) WASHINGTON CATT	LE FEEDERS ASSOCIA	TION		91	-072	22321 Page 2
Par	t III Statement of Program Se	rvice Accomplishment	s (See the instruct	ions.)			Expenses
What	s the organization's primary exempt purpose? CA					(Reg	uired for section c)(3) and (4) nizations and section (a)(1) trusts, optional
	ribe what was achieved in carrying out the				_	orga	nizations and section
desc	ribe the services provided, the number of	peršons benefited, or other r	elevant information for	each		4947	(a)(1) trusts, optional
	ram title	IDDIES AND TO ACCO	TOTAL MO ALL M	TIMBER O		tor o	thérs)
28	THE ANNUAL CONVENTION BEN	NEFITS AND IS ACCES	STRLE TO ALL M	EWREKZ.			
			-				
	(Grants \$) If th	is amount includes foreign gr	ants, check here	▶		28 a	28,046.
29	,				_		
							
					- 1		
	(Grants \$) If th	is amount includes foreign gr	ants, check here		Щ	29 a	
30					_]		
					-1		
	(Grants \$) If th	is amount includes foreign gr	ants check here		\neg	30 a	
21	Other program services (attach schedule		arts, arout nore				
31		ix is amount includes foreign gr	anta ahaak hara	▶	\neg	31 a	
22	Total program service expenses (add lin		ants, check here		_	32	28,046.
							
Par	t IV List of Officers, Directors						
	(a) Name and address	(b) Title and average hours per week devoted	(c) Compensation (If not paid, enter -0)	(d) Contribut			(e) Expense account and other allowances
	(a) Name and address	to position	not paid, enter -u)	employee benefit deferred comp	piai ensa	is allu Inn	and other allowances
SFF	ATTACHMENT	to position	0.	dolonida dollipi	,,,,,	0.	0.
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Other Information (Note the statement requirements in the instrs for Part V.) Yes No Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of 33 X each activity Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes 34 Х 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, Х reporting, and proxy tax requirements? 35 a b If 'Yes,' has it filed a tax return on Form 990-T for this year? 35 h Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N 36 X 0 37a Enter amount of political expenditures, direct or indirect, as described in the instructions **b** Did the organization file Form 1120-POL for this year? Х 37 b 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? 38 a X b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38 b N/A 39 Section 501(c)(7) organizations Enter N/A a Initiation fees and capital contributions included on line 9 39 a **b** Gross receipts, included on line 9, for public use of club facilities. 39 b N/A 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under N/A, section 4955 ► N/A section 4911 ► N/A , section 4912 ► 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 40 b 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 0 d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed 0 by the organization 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 40 e X 41 List the states with which a copy of this return is filed NONE 42a The organization's ED FIELD books are in care of ▶ Telephone no ► 509-787-2921 Located at ► 612 N ST SW QUINCY WA ZIP + 4 ► 98848 No Yes b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a 42b Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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 a Foreign Bank and Financial Accounts. Х c At any time during the calendar year, did the organization maintain an office outside of the U.S.? 42c If 'Yes,' enter the name of the foreign country N/A 43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here 43 N/A and enter the amount of tax-exempt interest received or accrued during the tax year Yes No Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ Х 44 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 BAA Form 990-EZ (2009) TEEA0812L 01/30/10

Form 990-EZ (2009)	WASHINGTON	CATTLE	FEEDERS	ASSOCT	ATTON

91-0722321

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Part VI	Section 501(c)(3) organization 501(c)(3) organizations and se 46-49b and complete the table	s and section 4947 ection 4947(a)(1) no s for lines 50 and 5	(a)(1) nonexemp nexempt charitat 1.	t charitable trusts or ole trusts must answe	nly. All section er questions
46 Did for p	the organization engage in direct or indirect public office? If 'Yes,' complete Schedule C	ct political campaign acti C, Part I	vities on behalf of or	n opposition to candidates	Yes No
-	the organization engage in lobbying activiti		chedule C, Part II		47
	ne organization a school as described in se	·		dule E	48
	the organization make any transfers to an		•		49a
	es,' was the related organization a section	•	ŭ		49b
	nplete this table for the organization's five to ployees) who each received more than \$10				
	(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 and deferred compensation	(e) Expense account and other allowances
	al number of other employees paid over \$1				
51 Com	nplete this table for the organization's five happensation from the organization. If there is	nighest compensated ind s none, enter 'None '	ependent contractors	who each received more t	han \$100,000 of
	(a) Name and address of each independent conti	ractor paid more than \$100,000		(b) Type of service	(c) Compensation
					
	. 				
d Tota	al number of other independent contractors	each receiving over \$10	0,000		
	Under penalties of perjury, I declare that I have exam true, correct, and complete Declaration of preparer (nined this return, including according than officer) is based on a	mpanying schedules and sta ill information of which prep	tements, and to the best of my knowledge	owledge and belief, it is
Sian	MAN IN			5/17/10	
Sign Here	Signature of officer	/ ^	,	Date	
Here	DEIGHT A	(xecutive 1)	in Lo.		
	Type or print name and title	KROWIEVE I	TECTOR _		
	Type of print name and the			Pres	parer's Identifying Number
Paid	Preparer's DAVID D. TEMON		Date = /1 4 /1		parer's Identifying Number e instructions)
Pre-	signature DAVID R. LEMON		5/14/1	0 employed ► P0	0306551
parer's	Firm's name (or LEMASTER & DANII) yours if self				
Üse	employed), - 405 SOUTH CENTRA	AL AVENUE			1-0292442
Only	address, and ZIP + 4 QUINCY, WA 9884	8		Phone no ► (509	
May the II	RS discuss this return with the preparer sh	own above? See instruct	ions		►X Yes No
BAA					Form 990-EZ (2009)

2009	FEDERAL STATEMENTS	PAGE 1	
	WASHINGTON CATTLE FEEDERS ASSOCIATION		91-0722321
STATEMENT 1 FORM 990-EZ, PART I, LII GRANTS AND SIMILAR A	NE 10 MOUNTS PAID		
DONEE'S NAME: DONEE'S ADDRESS: CASH AMOUNT GIVEN:	TIFFANY PATTERSON 38809 191 AVE SE AUBURN, WA 98092	\$	1,000.
DONEE'S NAME: DONEE'S ADDRESS: CASH AMOUNT GIVEN: DONEE'S NAME:	KEVIN SIEVERKROPP 910 NE PROVIDENCE CT APT 0-302 PULLMAN, WA 99163 JUSTIN AUNE	\$	1,000.
DONEE'S NAME: DONEE'S ADDRESS: CASH AMOUNT GIVEN: DONEE'S NAME:	4601 WINONA SOUTH RD ENDICOTT, WA 99125 ALEX NULL	\$	1,000.
DONEE'S ADDRESS: CASH AMOUNT GIVEN: DONEE'S NAME:	12532 DUCK LAKE ROAD N ODESSA, WA 99159 WADE GEBBERS	\$	1,000.
DONEE'S ADDRESS: CASH AMOUNT GIVEN: DONEE'S NAME:	PO BOX 1448 BREWSTER, WA 98812 ANNAKA ERICKSON	\$	1,500.
DONEE'S ADDRESS: CASH AMOUNT GIVEN:	4654 GAP RD OUTLOOK, WA 98938	\$	1,000.
STATEMENT 2 FORM 990-EZ, PART I, LINOTHER EXPENSES ADMINISTRATIVE FEES BANK FEES CATTLE CONFERENCES, CONVENTE DUES DUES & SUBSCRIPTIONS FEED INSURANCE MISCELLANEOUS OFFICE EXPENSES RESEARCH PROJECTS TAXES TELEPHONE TRAVEL WEB SITE		\$ TOTAL ₹	43,200. 825. 7,875. 28,046. 10,000. 2,483. 15,845. 1,034. 39. 65. 24,811. 585. 1,107. 11,238. 365. 147,518.

2009

FEDERAL STATEMENTS

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WASHINGTON CATTLE FEEDERS ASSOCIATION

91-0722321

STATEMENT 3 FORM 990-EZ, PART I, LINE 20 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

MARKET CHANGES

TOTAL \$ 18,610. \$ 18,610.

WASHINGTON CATTLE FEEDERS ASSOCIATION BOARD OF DIRECTORS 2009 - 2010

P.O. Box 1256 = Quincy, WA 98848 = Ph: (509) 787-2921 = FAX: (509) 787-0184 = www.wafeeders.org

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