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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

Open to Public

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

OMB No 1545-0047 2010

Interi	iai Reve	enue Service	- The organiz		e a copy of this return to	satisty state reput	ting requirement	2	melaggman	
<u>A</u>	For th	ne 2010 calen	dar year, or tax year be	ginning 7/0	1, 20	010, and endir	ng 6/30		, 2011	
В	Check if	f applicable					D	Employer iden	tification Number	
	☐ Ad	dress change	ARIZONA COTTON	GROWERS A	SSOCIATION			86-0002	2407	
	\prod_{N_2}	me change	4139 E. BROADW	AY ROAD			E	Telephone num		
	\vdash	tal return	PHOENIX, AZ 85	040-8803				(602)	137-1344	
	\vdash		1				}	(002)	137 1344	
	—	rminated							505	01.0
	An An	nended return						Gross receipts		216.
	Ap	plication pending	1		LAVIS		H(a) Is this a gre	•	filiates? Yes	X No
			SAME AS C ABOV	<u>E</u>			H(b) Are all affil	ates included? ch a list (see in	structions)	No
1	Tax-e	exempt status	501(c)(3) X 501(c)	(5) ∢ (in:	sert no.) 4947(a)(1) or 527]	a, a (555	,	
J	Web	osite:► N/	'A				H(c) Group exer	nption number	>	
ĸ	Form	of organization	X Corporation Trust	Association	Other ►	L Year of Format	tion 1942	M State of	legal domicile AZ	
Pe	ાં તેરે 🛭	Summa	rv							
, Q			be the organization's m	ission or most s	ionificant activities:	PROTECT	AND TMPR	OVE THE	FCONOMIC	
_			Y OF THE ARIZO							
JC			AND ENHANCE AR							
na I			ATION IN IMPLE							
		Check this be			ed its operations or o					
			oting members of the go			isposca of me	JIE (11411 2570	3		52
8			dependent voting memi			line 1b)		4		52
1			r of individuals employe	_		-		5	<u>-</u>	2
			r of volunteers (estimate			,		6		
₹			ed business revenue fro	_	ımn (C), line 12			7a		0.
7			d business taxable incor	•	* **			7b		0.
SORRED JANHIN ZON mance					<u> </u>		Prio	r Year	Current Y	ear
Ш	8	Contributions	s and grants (Part VIII, I	ine 1h)						
2			vice revenue (Part VIII,				3	373,861.		, 205.
		-	ncome (Part VIII, colum		and 7d)			21,728.		,011.
É	11	Other revenu	ie (Part VIII, column (A)	, lines 5, 6d, 8c	, 9c, 10c, and 11e).			·		
Š	12	Total revenue	e – add lines 8 through	11 (must equal	Part VIII, column (A), line 12)	3	395,589.	525	,216.
	13	Grants and s	similar amounts paid (Pa	art IX, column (A	(), lines 1-3)					
	14	Benefits paid	to or for members (Pa	rt IX, column (A), line 4)					
			er compensation, emplo		•	nes 5-10)	2	218,313.	234	, 655.
es			fundraising fees (Part I	•				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Expenses				• •	, in the second second		<u> </u>			
쫎			sing expenses (Part IX,		L	=0	_			
_			ses (Part IX, column (A)					<u>79,351.</u>		<u>, 347.</u>
			ses Add lines 13-17 (mu					<u>97,664.</u>		,002.
		Revenue les	s expenses. Subtract lin	e 18 from line 1	DEC 20			97,925.	210	,214.
Net Assets or Fund Balancos				İ		88		f Current Year		
a la la	20		(Part X, line 16)		OGDEN			26,365.	3,590	
\$8	21	Total liabilitie	es (Part X, line 26)	Ĺ				<u>38,610.</u>	398	<u>,090.</u>
ş	22	Net assets o	r fund balances Subtra	ct line 21 from li	ne 20		2,9	87,755.	3,192	,696.
PE		Signatu	re Block							
Und	er pena		dectale that I have examined the	s return, including ac	companying schedules and	statements, and to	the best of my k	nowledge and b	elief, it is true, correc	t. and
com	plete D	Declaration of prep	pare (After than officer) is base	d on all mormation o	f which preparer has any k	nowledge		<u> </u>		
		X	200				12		7011	
Sig	ın	Signati	ure of officer				Date	,-,-,		
He	re	RIC	K LAVIS				EXECUT	IVĖ VP		
		Type o	r print name and title						-	
		Print/Type	preparer's name	Preparer's sign	ature	Date	Ch	eck if	PTIN	
Pa	id	PAUL	A. DONIS, CPA	PAUL A.	DONIS, CPA	12/13	1	f-employed	N/A	
	epare			NIS, CPA,		,==, =0,		,,,	1	
	e On			LSHIRE DRI				m's EIN ► N	/ T	
		Firm S addr	SCOTTSDALE		······································				30) 947-548	32
<u> </u>	. #b o !	IDC discuss H		·			Į Ph	one no (48	X Yes	
			his return with the preparation Act Notice of							No (2010)
RY	A FOI	r raperwork i	Reduction Act Notice, s	ee tne separate	instructions.	TE	EA0113L 12/21/	10	⊦orm 9 9	(2010)

		ROWERS ASSOCIATION	86-0002407 Page 2
୍ନିସ		•	
		esponse to any question in this Part III	, <u>X</u>
1	Briefly describe the organization's mission SEE SCHEDULE 0	on 	
2	Did the organization undertake any sign	ificant program services during the year which were n	ot listed on the prior
	Form 990 or 990-EZ?		Yes X No
	If 'Yes,' describe these new services on		
3		or make significant changes in how it conducts, any p	rogram services? Yes X No
	If 'Yes,' describe these changes on Sche		
4	and 501(c)(4) organizations and section expenses, and revenue, if any, for each	ents for each of the organization's three largest progra 4947(a)(1) trusts are required to report the amount o program service reported.	am services by expenses. Section 501(c)(3) if grants and allocations to others, the total
4:	a (Code) (Expenses \$	including grants of \$) (Revenue \$)
			
	(Code (Expenses \$	including grants of \$) (Payanua Š
41	(Code) (Expenses \$	including grants of \$	(Revenue \$)
4	c (Code:) (Expenses \$	including grants of \$) (Revenue \$
4	d Other program services (Describe in Sc		
			evenue \$)
BAA	e Total program service expenses	0. TEEA0102L 10/06/10	Form 990 (2010)
	• Control of the cont		: 5:::: 222 (2010)

	· ·		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	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		Х
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	3		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or 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	6	_	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	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u>
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	9	Х	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments ^{3}f 'Yes,' complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	-		
а	Did the organization report an amount for land, buildings and equipment in Part X, line 10 <i>7f 'Yes,' complete Schedule D, Part VI</i>	11a	Х	
Ь	Did the organization report an amount for investments- other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments- program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11c		<u>x</u>
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X_
	Did the organization report an amount for other liabilities in Part X, line 257lf 'Yes,' complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11f		x
	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12a	X	
t	Was the organization included in consolidated, independent audited financial statements for the tax year?f 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)?If 'Yes,' complete Schedule E	13		X
14 <i>a</i>	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Parts I and IV	14b		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, Parts II and IV	15		х
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, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?If 'Yes,' complete Schedule G, Part III	19		х
20	a Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х
Ł	If 'Yes' to line 20a, did the organization attach its audited financial statements to this return Note . Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20 b		

Part V Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J 23 Х 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, and that was issued after December 31, 2002° If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 24a Х **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizationsDid the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a b is the organization 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-EZ7f 'Yes,' complete Schedule L, Part I 25b 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 26 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual?/f 'Yes,' complete Schedule L, Part III 27 X 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): -19-40 Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M30 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete 32 Schedule N, Part II 32 Х 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 Х 33 34 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 34 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 Yes X No 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 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 Х 37

Note. All Form 990 filers are required to complete Schedule O BAA

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Form 990 (2010)

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Form 990 (2010) ARIZONA COTTON GROWERS ASSOCIATION 86-0002407 Page 5 Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes No 0 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a 1 b 0 **b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2b Χ b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required toe-file. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За **b** If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? X Δa **b** If 'Yes,' enter the name of the foreign country: **>** See instructions for filing requirements for Form TD F 90.22 1, Report of Foreign Bank and Financial Accounts X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Х **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? 5c **6a** Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 a X **b** If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 66 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 a 7b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 82823 7с d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization®id the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9a a Did the organization make any taxable distributions under section 4966? 9b **b** Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations.Enter a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations.Enter a Gross income from members or shareholders. 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) nonexempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O **b** Enter the amount of reserves the organization is required to maintain by the states in 13b which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

X

14a

Form 990 (2010) ARIZONA COTTON GROWERS ASSOCIATION 86-0002407 Page 6 Part VI: Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response to any question in this Part VI X Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year **b** Enter the number of voting members included in line 1a, above, who are independent 1_b 52 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? SEE SCHEDULE O officer, director, trustee or key employee? 2 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? 3 Did the organization make any significant changes to its governing documents 4 X since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 Х 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? X 7 a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X 8a b Each committee with authority to act on behalf of the governing body? 86 X 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 X q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a Х 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? 10_b X 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a Х b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise X to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done SEE SCHÉDULE O 12c Х 13 Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? Х 14 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? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE 0 X 15a Х **b** Other officers of key employees of the organization 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X 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? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ΑZ 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. SEE SCHEDULE O 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

► RICK LAVIS 4139 E. BROADWAY ROAD PHOENIX AZ 85040-8803 (602) 437-1344

orm 990 (2010)	ARTZONA	COTTON	CROWERS	ASSOCIATION
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86-0002407

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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, 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 neither the organization	n nor any	relate	d or	gan	ıızat	ion co	mpe	ensated any current of	flicer, director, or trust	ee
(A)	(B)			((C)			(D)	(E)	(F)
Name and title	Average hours per week (describe			officer		hat app		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estmated amount of other compensation from the
	hours for related organiza- tions in Schedule O)	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	er			organizabon and related organizabons
(1) OLIVER ANDERSON										
DIRECTOR	2	Х						0.	0.	0.
(2) STEVEN BALES										
<u>CHAIRMAN</u>	2	X		X			<u> </u>	0.	0.	0.
(3) ROBBY BARKLEY	_]				
DIRECTOR	2	X					<u> </u>	0.	0.	0.
(4)_MICHAEL_BROOKS	1			ŀ						
DIRECTOR	2	<u>X</u>					<u> </u>	0.	0.	0.
_(5) MIKE_COOLEY	<u> </u>									
DIRECTOR	2	X						0.	0.	0.
(6) JAMES CUMING	1									
DIRECTOR	2	X	<u> </u>				<u> </u>	0.	0.	0.
(7) STEVE DALEY										
DIRECTOR	2	X				ļ	<u> </u>	0.	0.	0.
_(8)_DON_ENGLAND_JR										
DIRECTOR	2	X						0.	0.	0.
(9) MIKE FRANCIS	1									
DIRECTOR	2	X	_		_		<u> </u>	0.	0.	0.
(10) KC GINGG	4 .									
VICE PRESIDENT	2	Х	<u> </u>	X	_		<u> </u>	0.	0.	0.
(11) LARRY HANCOCK										
DIRECTOR	2	X	_		_		_	0.	0.	0.
(12) JASON HARDISON	4 _							_		
DIRECTOR	2	_X			-		<u> </u>	0.	0.	0.
(13) EDDIE HARRISON	4 _					ı		_		
DIRECTOR	2	X					<u> </u>	0.	0.	0.
(14) MIKE HARVEY	- ∤			ĺ						
DIRECTOR	2	X	_			<u> </u>	<u> </u>	0.	0.	0.
(15) ADAM HATLEY	┥ _									
DIRECTOR	2	X	ļ		_		ļ	0.	0.	0.
(16) ART HEIDEN	4	١						_	_	
DIRECTOR	2	X	_		-	ļ	<u> </u>	0.	0.	0.
(17) BRUCE HEIDEN	4 _									
DIRECTOR	2	X	<u> </u>		<u> </u>		L	0.	0.	0.
BAA		1	ΓEΕΑ	0107L	_ 12	/21/10				Form 990 (2010)

Form 990 (2010) ARIZONA COTTON GROWERS AS									86-0002407		⊃age 8
Part VII Section A. Officers, Directors, Trus	tees, k	(ey	Em	ıplo	ye	es,	and	d Highest Con	pensated Emp	loyees (c	ont)
(A)	(B)			(0	:)			(D)	(E)	(F)	•
Name and title	Average hours per week (describe hours for related organi- zations in Sch O)	1		Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimate: amount of o compensat from the organizati and relate organizatio	ther ion on ed
(18) ROGER HOOPER DIRECTOR	2	Х						0.	0.		0.
(19) TOM ISOM DIRECTOR	2	Х						0.	0.		0.
(20) LARRY JARNAGIN DIRECTOR	2	Х						0.	0.		0.
MAX_KOEPNICKDIRECTOR	2	Х						0.	0.		0.
	2	х						0.	0.		0.
(23) JEFF_LARSON DIRECTOR	2	х						0.	0.		0.
(24) MICHAEL MULLION DIRECTOR	2	х						0.	0.		0.
(25) WILEY MURPHY DIRECTOR	2	Х						0.	0.		0.
(26) PAUL OLLERTON VICE PRESIDENT	2	х		х				0.	0.		0.
(27) LYALL PACHECO DIRECTOR	. 2	Х						0.	0.		0.
(28) ARDEN PALMER DIRECTOR	2	х						0.	0.		0.
(29) DENNIS PALMER SEC/TREAS	2	Х		х				0.	0.		0.
1 b Sub-total		1				·	>	0.	0.		0.
c Total from continuation sheets to Part VII, Section	Α						•	154,147.	0.	7.	861.
d Total (add lines 1b and 1c)							•	154,147.	0.		861.
 Total number of individuals (including but not limite from the organization ► 1 	ed to the	se li	stec	d ab	ove)	wh	o re	·	\$100,000 in reporta		
Did the organization list anyformer officer, director on line 1a? If 'Yes.' complete Schedule J for such it	or trust	ee, k	еу е	emp	loye	e, c	or hi	ghest compensate	ed employee	Yes	No

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 or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person

	Yes	No
- '	Ξ	
3		Χ
编号	ا الله موجود الله موجود الله موجود	1
4	Х	
: :7	-	
5		X

Section	B. Inde	pendent	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 but not limited to those listed above) who received more than \$100,000 in compensation from the organization► 0

i a	t 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
S	1a Federated campaigns 1a		1010100		312, 313, 01 314
INT:		-			
SR/	'	4			
S,	c Fundraising events 1c				
FE	d Related organizations 1d	_			
S, III	e Government grants (contributions)]			
S S	f All other contributions gifts grants and				1
필돔	f All other contributions, gifts, grants, and similar amounts not included above	1			
E O	g Noncash contributions included in Ins 1a-1f: \$	1			
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	h Total. Add lines 1a-1f				
	Business Code				
EN		505,205.			E0E 20E
Ē		303,203.	· · · · · ·		505,205.
9	b				
₹	c				
SEI	d				
ΑW	e				
PROGRAM SERVICE REVENUE	f All other program service revenue				
PR	g Total. Add lines 2a-2f	505,205.			
,	3 Investment income (including dividends, interest and	, , , , , , , , , , , , , , , , , , , ,		-	<u>'</u>
	 Investment income (including dividends, interest and other similar amounts) 	20,011.			20,011.
	4 Income from investment of tax-exempt bond proceeds				· · · · · ·
	5 Royalties				
	(i) Real (ii) Personal				<u> </u>
	6a Gross Rents				
	b Less. rental expenses	-			
		+			
	c Rental income or (loss).				
	a rectalitation of (1633)				-
	7a Gross amount from sales of (i) Securities (ii) Other	1			
	assets other than inventory	1			
	b Less' cost or other basis	1			
	and sales expenses.				
	c Gain or (loss)				
	d Net gain or (loss). ▶	•			
IUE	8a Gross income from fundraising events (not including \$				
EN EN	of contributions reported on line 1c).				
OTHER REVEN	0 D - + D/ 10				
ĒR		-			
Ē	· · · · · · · · · · · · · · · · · · ·	-			
	t free meanie or (1833) from landraising events				
	9a Gross income from gaming activities.				
	See Part IV, line 19 a	_			
	b Less: direct expenses b				
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns				
	and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory				
	Miscellaneous Revenue Business Code				
	11a				
	b				
	d All other revenue			-	
			-		
	o rotali / da liilos i la li la				F05 05 5
	12 Total revenue. See instructions	525,216.	<u> </u>	0.	525, 216.

বার 🔯 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)

	All other organizations must comp	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
<i>ob,</i> 1	7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U.S. See Part IV,		expenses	general expenses	expenses
2	line 21 Grants and other assistance to individuals in				
3	the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the				<u>, , , , , , , , , , , , , , , , , , , </u>
4	U.S See Part IV, lines 15 and 16 Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	119,801.	0.	119,801.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	47,512.		47,512.	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,465.		4,465.	
9	Other employee benefits	49,577.		49,577.	
10	Payroll taxes	13,300.		13,300.	
11	Fees for services (non-employees):				
;	a Management				
1	s Legal	700.		700.	
•	- Accounting	3,500.		3,500.	· <u>····························</u>
	d Lobbying				
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	g Other		 		
	Advertising and promotion	0.007		2 207	
13	'	2,287.		2,287.	
14	Information technology				
15	Royalties	25,824.		25,824.	
16 17	Occupancy Travel	10,765.		10,765.	
	Payments of travel or entertainment expenses for any federal, state, or local public officials	10,703.		10,703.	
19	Conferences, conventions, and meetings	4,212.		4,212.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	892.		892.	
23		4,080.		4,080.	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f if line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
	a PROPERTY TAXES	10,856.		10,856.	
	b EQUIPMENT RENTAL & REPAIR	3,404.		3,404.	
	c TELEPHONE	2,653.		2,653.	
	d PROXY_TAX	2,628.		2,628.	
	e POSTAGE AND SHIPPING	2,552.		2,552.	
	f All other expenses.	5,994.		5,994.	
_25	Total functional expenses Add lines 1 through 24f	315,002.	0.	315,002.	0.
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BA	1				Form 990 (2010)

				(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		100.	1	100.
	2	Savings and temporary cash investments	,	1,275,818.	2	1,337,333.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, director and highest compensated employees. Complete Part	s, trustees, key employees, II of Schedule L		5	The Carlotte Alaba
	6	Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contraponsoring organizations of section 501(c)(9) volunta organizations (see instructions)	ed under section 4958(f)(1)) ibuting employers and ry employees' beneficiary		6	
A S E T	7	Notes and loans receivable, net			7	
S E	8	Inventories for sale or use		200.	8	200
S	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,345,401.			
		Less: accumulated depreciation.	10ь 92,248.	2,250,247.	10c	2,253,153
	11			11		
	12	Investments – other securities. See Part IV, line 11			12	
	13	Investments – program-related See Part IV, line 11		13		
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equal line	34)	3,526,365.	16	3,590,786
	17	Accounts payable and accrued expenses		18,167.	17	2,628
	18	Grants payable		18		
	19	Deferred revenue		19		
L	20	Tax-exempt bond liabilities			20	
A B	21	Escrow or custodial account liability. Complete Part	IV of Schedule D	401,283.	21	395,462
 	22	Payables to current and former officers, directors, tru highest compensated employees, and disqualified pe of Schedule L	stees, key employees, rsons. Complete Part II		22	
E S	23	Secured mortgages and notes payable to unrelated to	nird parties		23	
	24	Unsecured notes and loans payable to unrelated third	i parties	119,160.	24	
	25	Other liabilities, Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		538,610.	26	398,090
N E		Organizations that follow SFAS 117, check here►	X and complete lines			
		27 through 29 and lines 33 and 34.			: <u>:</u>	
ASSETS	27	Unrestricted net assets		2,987,755.	27	3,192,696
Ĕ	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets		O Jan San San San San San San San San San S	29	
R		Organizations that do not follow SFAS 117, check he	ere and complete			
FUND		lines 30 through 34.		NAME OF THE PARTY		
	30	Capital stock or trust principal, or current funds			30	
Ŗ	31	Paid-in or capital surplus, or land, building, or equipment			31	
Ā	32	Retained earnings, endowment, accumulated income	, or other funds.		32	
BALAZCES	33	Total net assets or fund balances.		2,987,755.	33	3,192,696
5	34	Total liabilities and net assets/fund balances		3,526,365.	34	3,590,786.

TEEA0111L 12/21/10

Forr	n 990 (2010) ARIZONA COTTON GROWERS ASSOCIATION	86-0002407		Pa	ge 12
Pa	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI			,	X
		1 1			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5, 2	
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,0	
3	Revenue less expenses. Subtract line 2 from line 1	3			<u>14.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,98		
5	Other changes in net assets or fund balances (explain in Schedule O) SEE SCHEDULE O	5		5,2	<u>73.</u>
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3,19	2,6	96.
Pa	Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			ŀ	
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	b Were the organization's financial statements audited by an independent accountant?		2b	Х	
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	it of the audit,	2 c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			_	
	d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were separate basis, consolidated basis, or both:	s issued on a			
	X Separate basis Consolidated basis Both consolidated and separate basis				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	n the Single	3a		<u>X</u>
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the	e required audit	36	Ì	

BAA

Form **990** (2010)

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

ARIZONA COTTON GROWERS ASSOCIATION 86-0002407 Rankvill Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours		tion (k all t	hat app		Reportable compensation from	Reportable compensation from	Estimated
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
TED PIERCE										
DIRECTOR	2	X						0.	0.	0.
DIANN PRECHEL	_									
DIRECTOR	2	X	ļ			ļ		0.	0.	0.
PAUL PRECHEL DIRECTOR	١,	v		ļ					0	•
RON RAYNER	2	X						0.	0.	0.
DIRECTOR	2	X						0.	0.	0.
KEVIN ROGERS							-	0.		<u> </u>
VICE PRESIDENT	2	X		x				0.	0.	0.
DEAN ROVEY	†				ļ :			0.		<u></u>
DIRECTOR	2	Х				L		0.	0.	0.
JERRY ROVEY										
DIRECTOR	2	X			_			0.	0.	0.
BILL SCOTT	1		:					_		
DIRECTOR	2	X			_			0.	0.	0.
CLYDE_SHARPDIRECTOR	վ _	_v							0	2
RODNEY SHEDD	2	X	<u> </u>	_		 	-	0.	0.	0.
DIRECTOR	2	x	ļ					0.	0.	0.
LE SMITH	-	 ^-		-	 			0.	0.	<u></u>
DIRECTOR	2	X						0.	0.	0.
TIM SMITH							•			
DIRECTOR	2	Х						0.	0.	0.
STEVE_SOSSAMAN	╛									
DIRECTOR	2	X	<u> </u>		<u> </u>			0.	0.	0.
DAVID STAMBAUGH								_	_	_
DIRECTOR BORRY STONE	2	X	┡			ļ	<u> </u>	0.	0.	0.
BOBBY STONE DIRECTOR	2	Х	1				ŀ			0
DAN THELANDER	- 2		┢			-		0.	0.	0.
PRESIDENT	2	х		X			ļ	0.	0.	0.
RYAN TREGASKES	-			 		 	1			
DIRECTOR	2	Х						0.	0.	0.
JOHN WALKER										
DIRECTOR	2	Х						0.	0.	0.
CARL WEILER	_		ĺ							
DIRECTOR	2	X	ļ	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
DEAN WELLS	4 _							_		
DIRECTOR	2	X	-	<u> </u>		<u> </u>	<u> </u>	0.	0.	0.
GREG WUERTZ VICE PRESIDENT	2	х	1	<u>.</u>					2	^
AICE LEGIDENI	1 4	<u> </u>		X	<u> </u>	L	<u> </u>	0.	0.	0. Form 990 2010

Form 990 2010

Form 990

Continuation Sheet for Form 990

OMB No 1545-0047

2010

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

ARIZONA COTTON GROWERS ASSOCIATION 86-0002407

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Employees (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	1	Posi	tion (hat app	ly)	1		Estimated amount of other
	Average hours per week	Individual trustee or director	Institutional trustee	Officer	_	Highest compensated employee	Former	Reportable compensabon from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
HOWARD WUERTZ DIRECTOR	2	x						0	0	
CHUCK_YOUNGKER			_					0.	0.	0
DIRECTOR	2	x						0.	0.	0
RICK LAVIS					\vdash	ļ		- 0.	0.	
EXECUTIVE VP	40			Х				154,147.	0.	7,861
								, , , , , , , , , , , , , , , , , , , ,		
						_				
							-			 :
	-					-				
		-								
									_	· ·
					-	-				
						-				
							L			Form 990 20

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047 **2010**

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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) or Form 990-EZ, Part V, line 35a (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Employer identification number ARTZONIA COTTON CROWERS ASSOCIATION

	IZONA COLION GROWER			00-000240							
Pa		rganization is exempt under section			zation.						
1		organization's direct and indirect political o	ampaign activities in	Part IV.							
2	Political expenditures			► \$							
	Volunteer hours										
Pa		rganization is exempt under section		7N. 1							
1	-	ise tax incurred by the organization under		► \$							
2	= = = = = = = = = = = = = = = = = = =	ise tax incurred by organization managers		► \$							
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?										
	a Was a correction made?				Yes No						
	o If 'Yes,' describe in Part IV.										
		rganization is exempt under secti									
1	Enter the amount directly ex	pended by the filing organization for section	n 527 exempt function	on activities ►\$							
2	Enter the amount of the filing function activities	g organization's funds contributed to other	organizations for sec	tion 527 exempt ►\$							
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ►\$										
4	Did the filing organization fileForm 1120-POL for this year?										
	(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-						
(1)											
(2)											
(3)											
(4)											
(5)											
(6)	-										

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010				86-0002	
Part HA Complete if the section 501(h	ne organizatio)).	n is exempt under se	ction 501(c)(3) and	d filed Form 5768 (el	ection under
—	_	ongs to an affiliated group			
B Check ► If the filing	organization che	ecked box A and 'limited co	ntrol' provisions apply.	·	
(The term '	Limits on Lobb expenditures' me	ying Expenditures eans amounts paid or incui	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditur	es to influence p	ublic opinion (grass roots lo	obbying).		
b Total lobbying expenditur		• • •	bying)		
c Total lobbying expenditur	•	and 1b)			
d Other exempt purpose ex					
e Total exempt purpose exp	penditures (add li	ines 1c and 1d)			
f Lobbying nontaxable amo both columns.	ount. Enter the ar	mount from the following tal	ble in		
If the amount on line 1e, colun	nn (a) or (b) is	The lobbying nontaxable a	amount is		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,00		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$1,	·	\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$17	7 <u>,000,000</u>	over \$1,500,000.			
Over \$17,000,000	mount (anter 25%	\$1,000,000			
g Grassroots nontaxable and h Subtract line 1g from line	·	•		-	
i Subtract line 1f from line		·			
j If there is an amount othe	er than zero on e	•	the organization file Fo	orm 4720 reporting	
section 4911 tax for this y	year?	4.7			Yes No
(Some	e organizations t colum	4-Year Averaging Period hat made a section 501(h) ons below. See the instruct	election do not have to tions for lines 2a throu	o complete all of the five ugh 2f.)	
	Lot	bying Expenditures Durin	g 4-Year Averaging Pe	eriod	
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures	·				
BAA				Schedule C (Forr	m 990 or 990-EZ) 2010

		1	<u>, </u>		(b)	
			1)			
		Yes	No		Amoui	nt
1	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					
ē	Volunteers?					=
t	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				- 11	ئىر، ئ
•	: Media advertisements?					
•	Mailings to members, legislators, or the public?					
•	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
ç	Direct contact with legislators, their staffs, government officials, or a legislative body?					
ł	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If 'Yes,' describe in Part IV					
	Total Add lines 1c through 1s.					
28	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	olf 'Yes,' enter the amount of any tax incurred under section 4912	gradia Alia National Alia				
	: If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912	i.e · · · · · · · · · · · · · · · · · · ·				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			E		
Pa	Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or			
	section 501(c)(6).					
-	M(, , , , , , , , , , , , , , , , , , ,			_		es No
١	Were substantially all (90% or more) dues received nondeductible by members?			-	1	X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			F	2	X
	Did the organization agree to carryover lobbying and political expenditures from the prior year?	(a)(E)			3	X
*1#G1	section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered 'No' OR if Pais answered 'Yes.'	irt III-	, or A, lin	e 3		
1	Dues, assessments and similar amounts from members		1		505	5,205.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				_	
	Current year		2a			7,509.
ŀ	Carryover from last year		2b			
•	: Total		2c			7,509.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pol expenditure next year?	ss tıcal	4			0.
5	Taxable amount of lobbying and political expenditures (see instructions)		5		7	7,509.
.P.a	Supplemental Information					
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; a	nd Par	H-B.	line 1i		

Schedule C (F	orm 990 or 990-EZ)2010 AF Supplemental Info	RIZONA COT	TON GROWERS	ASSOCIATION		86-0002407	Page 4
Part IV	Supplemental Info	ormation (c	ontınued)	· · · · · · · · · · · · · · · · · · ·			
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection Employer identification number

ADTEONS COMMON CROSSED ACCOUNTING

0.0000407

	ZUNA CUTTON GROWERS ASSOCIATE				1002407	
Par	t I Organizations Maintaining Donor the organization answered 'Yes' to	r Advised Funds or Othe to Form 990, Part IV, line	er Similar Funds e 6.	or Accounts	. Comple	te if
		(a) Donor advised	funds	(b) Funds a	and other acc	ounts
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	<u></u>				
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the to the organization's exclusive	assets held in dono e legal control?	r advised	Yes	☐ No
6	Did the organization inform all grantees, dono used only for charitable purposes and not for purpose conferring impermissible private bene	the benefit of the donor or doi	ng that grant funds one or advisor, or for an	can be ny other	Yes	□No
Day	t II Conservation Easements. Comp		navarad 'Vas' ta	Form 000 D		
	Purpose(s) of conservation easements held by			FOIII 990, P	art iv, inte	; /
'	Preservation of land for public use (e.g., r	- · · · · · · · · · · · · · · · · · · ·	Preservation of a	n historically imi	nortant land	aroa
	Protection of natural habitat	recreation or education,	Preservation of a			aiea
	Preservation of open space			r cer anea mstoric	3 Structure	
2	Complete lines 2a through 2d if the organization last day of the tax year.	ion held a qualified conservati	on contribution in the	e form of a cons	ervation ease	ement on the
				Held at	the End of t	he Tax Year
á	Total number of conservation easements.			2 a		
ŀ	Total acreage restricted by conservation ease	ments		2 b		
(: Number of conservation easements on a certi	ified historic structure included	f in (a)	2c		
(I Number of conservation easements included i structure listed in the National Register	in (c) acquired after 8/17/06, a	and not on a historic	2 d		
3	Number of conservation easements modified, tax year ►	transferred, released, extingu	iished, or terminated	by the organiza	tion during th	ne
4	Number of states where property subject to co	onservation easement is locate	ed >			
5	Does the organization have a written policy re and enforcement of the conservation easemer	egarding the periodic monitorin	ng, inspection, handl	ing of violations,	Yes	☐ No
6	Staff and volunteer hours devoted to monitorii	ng, inspecting, and enforcing	conservation easeme	ents during the y	rear	_
7	Amount of expenses incurred in monitoring, in \$	nspecting, and enforcing cons	ervation easements	during the year		
8	Does each conservation easement reported of 170(h)(4)(B)(i) and section 170(h)(4)(B)(i)?	n line 2(d) above satisfy the re	equirements of section	on	Yes	☐ No
9	In Part XIV, describe how the organization repinclude, if applicable, the text of the footnote conservation easements.	ports conservation easements to the organization's financial	ın its revenue and e statements that des	expense stateme cribes the organ	nt, and balar ization's acc	nce sheet, and ounting for
Pa	Organizations Maintaining Colle Complete if the organization ans	ections of Art, Historical swered 'Yes' to Form 990	Treasures, or O , Part IV, line 8.	ther Similar /	Assets.	
1:	alf the organization elected, as permitted unde art, historical treasures, or other similar asset in Part XIV, the text of the footnote to its fina	ts held for public exhibition, ed	ducation, or research	e statement and in furtherance o	balance shee of public serv	et works of rice, provide,
ı	 If the organization elected, as permitted unde historical treasures, or other similar assets he following amounts relating to these items: 	er SFAS 116 (ASC 958), to repeld for public exhibition, educa	ort in its revenue station, or research in f	atement and bala furtherance of pu	ance sheet w iblic service,	orks of art, provide the
	(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 a amounts required to be reported under SFAS	art, historical treasures, or oth 116 (ASC 958) relating to the	er sımılar assets for se items:	financial gain, p	rovide the fo	llowing
	a Revenues included in Form 990, Part VIII, line	e 1			►\$	
	Assets included in Form 990. Part X				►\$	

Schedule D (Form 990) 2010 ARIZO				86-000			Page 2
Paন্য 🎹 Organizations Mainta	ining Collecti	ons of Art, Histo	rical Treasures, or	Other Similar Ass	ets (co	ntını	леd)
3 Using the organization's acquisititems (check all that apply):	ion, accession, a	_	, ,	g that are a significant u	se of its c	ollecti	íon
a Public exhibition		d Loan o	or exchange programs				
b Scholarly research		e 💹 Other	 "				
c Preservation for future gener							
4 Provide a description of the organ Part XIV.			-		se in		
5 During the year, did the organiza assets to be sold to raise funds r	ather than to be	maintained as part o	of the organization's col	llection?	Yes		No
Part M Escrow and Custodia 9, or reported an amo	I Arrangement unt on Form S	i ts. Complete if 990, Part X, line	organization answe 21.	ered 'Yes' to Form S	}90, Par	t I∨,	line
1a Is the organization an agent, trus	stee, custodian, c	or other intermediary	for contributions or oth	ner assets not	Yes		No
b If 'Yes,' explain the arrangement	in Part XIV and	complete the followi	ng table:			[11]140
, , ,					Amount		
c Beginning balance				1c			
d Additions during the year				1 d			
e Distributions during the year				1 e			
f Ending balance				1f			0.
2a Did the organization include an a	amount on Form	990, Part X, line 21?			X Yes		No
b If 'Yes,' explain the arrangement		SEE PART XIV					
Part V. Endowment Funds. C	omplete if the	organization ans	swered 'Yes' to For	rm 990, Part IV, line	e 10.		
	(a) Current yea	r (b) Prior year	r (c) Two years back	k (d) Three years back	(e) Fou	ır years	back
1 a Beginning of year balance							_
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
 Other expenditures for facilities and programs 							
f Administrative expenses							
g End of year balance							
2 Provide the estimated percentag	e of the year end	l balance held as:					
a Board designated or quasi-endo	wment ►	%					
b Permanent endowment ►	%						
c Term endowment ►	%						
3a Are there endowment funds not	in the possession	n of the organization	that are held and admi	inistered for the	_		
organization by:	·	· ·				Yes	No
(i) unrelated organizations					3a(i)		
(ii) related organizations					3a(ii)		
b If 'Yes' to 3a(II), are the related	-	· ·			3b		
4 Describe in Part XIV the intende			****				
Park VI Land, Buildings, and							
Description of investmen	t (a)	Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Bo	ok va	lue
1 a Land			2,238,700.		2,	238,	700.
b Buildings			77,601.	64,444.		13,	157.
c Leasehold improvements							
d Equipment	<u></u>		13,312.	12,016.		1,	296.
e Other			15,788.	15,788.			0.
Total. Add lines 1a through 1e (Colum	n (d) must equal	Form 990, Part X, c	olumn (B), line 10(c))	>			153.
BAA				Sche	dule D (Fo	rm 99	0) 2010

Schedule **D** (Form 990) 2010

Total. (Column (b) must equal Form 990, Part X, column (B) line 25)

^{2.} FIN 48 (ASC 740) Footnote. 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 (ASC 740).

Schedile D (Louin aan) Solo WETSOMY COLLON GROMEVS W220CTVIT		86-000240	Page 4
Part XI. Reconciliation of Change in Net Assets from Form 990 to Audited Fin	iancial Statements	 	
1 Total revenue (Form 990, Part VIII,column (A), line 12)		<u> </u>	525,216.
2 Total expenses (Form 990, Part IX, column (A), line 25)			315,002.
3 Excess or (deficit) for the year Subtract line 2 from line 1			210,214.
4 Net unrealized gains (losses) on investments			<u>-5,273.</u>
5 Donated services and use of facilities			
6 Investment expenses.			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net). Add lines 4 through 8			-5,273.
10 Excess or (deficit) for the year per audited financial statements. Combine lin	es 3 and 9		204,941.
Part XII Reconciliation of Revenue per Audited Financial Statem		r Return	· ·
1 Total revenue, gains, and other support per audited financial statements		1	519,943.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		17.00	
a Net unrealized gains on investments.	2a -5,2	73	
b Donated services and use of facilities	2b 3,2	/ 5 .	
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	2d	2009	F 070
e Add lines 2a through 2d		2e	<u>-5,273.</u>
3 Subtract line 2e from line 1	1 1	3	525,216.
4 Amounts included on Form 990, Part VIII, line 12, but not on line1:		1 m	
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV.)	46		
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2)	5	525,216.
Part XIII Reconciliation of Expenses per Audited Financial Stateme		Return	•
Total expenses and losses per audited financial statements.		1	315,002.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		11 30 C	
a Donated services and use of facilities	2a	23	
b Prior year adjustments	2b		
c Other losses	2c	 漢	
d Other (Describe in Part XIV.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1	1 1	3	315,002.
4 Amounts included on Form 990, Part IX, line 25, but not on line1:		196	
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV.)	4b	a to mic a ti	
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18)	5	315,002.
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9 Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XI any additional information.	9; Part III, lines 1a and 4; Pa III, lines 2d and 4b. Also com	art IV, lines 1b a aplete this part	and 2b; to provide
PART IV, LINE 2B - EXPLANATION OF ESCROW ACCOUNT L	LIABILITY	·	
CUSTODIAL FUNDS HELD IN TRUST FOR THE ARIZONA HY	BRID SEED PROJECT,	<u>, A JOINT</u>	VENTURE_OF_
THE_ARIZONA_COTTON_GROWERS_ASSOCIATION_AND_THE_A	ARIZONA COTTON RESI	EARCH_AND_	PROTECTION_
COUNCIL_TO_RESEARCH_AND_DEVELOP_HYBRID_COTTON_SE	CEDS AND IMPROVE CO	OTTON_PROD	UCTION IN
ARIZONA.		·	
		. 	
	<i> </i>		
			- -

Schedule D (Form 990) 2010 ARIZONA COTTON GROWERS ASSOCIATION Part XIV Supplemental Information (continued)	86-0002407	Page 5
Part 200 Supplemental Information (continued)		
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SCHEDULE J (Form 990) .

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

4 DV 15 - 22

86-0002407

2010
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

ARIZONA COTTON GROWERS ASSOCIATION

Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 Attach to Form 990.
 See separate instructions.

Employer identification number

Partil Questions Regarding Compensation					
				Yes	No
1	a Check the appropriate box(es) if the organization provided any VII, Section A, line 1a. Complete Part III to provide any relevant	of the following to or for a person listed in Form 990, Part nt information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use	1		
	Travel for companions	Payments for business use of personal residence	į		
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)	!		
	_		!		
	b If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described all	n follow a written policy regarding payment or bove? If 'No,' complete Part III to explain	1 b		
2	Did the organization require substantiation prior to reimbursing trustees, and the CEO/Executive Director, regarding the items	g or allowing expenses incurred by all officers, directors, checked in line 1a?	2		
_					
3	Indicate which, if any, of the following the organization uses to CEO/Executive Director. Check all that apply.	o establish the compensation of the organization's			
	X Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, S or a related organization:	ection A, line 1a with respect to the filing organization			
	a Receive a severance payment or change-of-control payment fr	rom the organization or a related organization?	_ 4a		X
	${\bf b}$ Participate in, or receive payment from, a supplemental nonqu	ualified retirement plan?	_ 4b		X
	${f c}$ Participate in, or receive payment from, an equity-based comp	pensation arrangement?	4c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the a	pplicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must comp	plete lines 5-9.			
5	6 For persons listed in Form 990, Part VII, Section A, line 1a, di contingent on the revenues of:	d the organization pay or accrue any compensation			
	a The organization?		_ 5a		ļ
	b Any related organization?		5b		
	If 'Yes' to line 5a or 5b, describe in Part III.				Ì
6	6 For persons listed in Form 990, Part VII, Section A, line 1a, di contingent on the net earnings of:	d the organization pay or accrue any compensation			
	a The organization?		6a		<u> </u>
	b Any related organization?		6ь		<u> </u>
	If 'Yes' to line 6a or 6b, describe in Part III.				
7	For persons listed in Form 990, Part VII, Section A, line 1a, di described in lines 5 and 6? If 'Yes,' describe in Part III	id the organization provide any non-fixed payments not	7		
8	Were any amounts reported in Form 990, Part VII, paid or accontract exception described in Regulations section 53 4958-4	crued pursuant to a contract that was subject to the initial = (a)(3)? If 'Yes,' describe in Part III	8		
9	If 'Yes' to line 8, did the organization also follow the rebuttable section 53.4958-6(c)?	e presumption procedure described in Regulations	9		

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

Schedule J (Form 990) 2010

Page 2

ARIZONA COTTON GROWERS ASSOCIATION

Part II. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2010

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
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)	(ii)						
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			TEEA4102L 11/	11/15/10		Schec	Schedule J (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public

Employer identification number

ARIZONA COTTON GROWERS ASSOCIATION	86-0002407				
FORM 990 - EXPLANATION OF AMENDED RETURN					
CORRECT FORM 990 PART X LINES 2 AND 21, AND SCHEDUI REFLECT CUSTODIAL FUNDS HELD BY THE ORGANIZATION. FORM 990, PART III, LINE 1 - ORGANIZATION MISSION	LE D PART IV LINES 2A AND 2B TO				
PROTECT AND IMPROVE THE ECONOMIC VIABILITY OF THE ARIZONA COTTON PRODUCER; PROMOTE					
SOUND ENVIRONMENTAL POLICIES; PROTECT AND ENHANCE A	ARIZONA AIR, WATER, AND LAND				
RESOURCES; AND ENCOURAGE PRODUCER PARTICIPATION IN IMPLEMENTING PRACTICES THAT					
CONTRIBUTE TO A BETTER ENVIRONMENT.					
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHI	IP OF OFFICERS, DIRECTORS, ETC.				
ART AND BRUCE HEIDEN - FAMILY RELATIONSHIP, ARDEN A	AND DENNIS PALMER - FAMILY				
RELATIONSHIP, PAUL AND DIANN PRECHEL - FAMILY RELAT	TIONSHIP, DEAN AND JERRY ROVEY -				
FAMILY RELATIONSHIP, GREG AND HOWARD WUERTZ - FAMIL	LY RELATIONSHIP				
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS					
FORM 990 IS REVIEWED BY THE EXECUTIVE VICE PRESIDE	NT BEFORE IT IS FILED.				
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING A	AND ENFORCEMENT OF CONFLICTS				
THE BOARD OF DIRECTORS MONITORS THE POLICY ON AN O	NGOING BASIS.				
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPR	OVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MG				
THE BOARD OF DIRECTORS REVIEWS THE SALARY OF THE EX	XECUTIVE VICE PRESIDENT ON AN				
ANNUAL BASIS.					
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMEN	TS PUBLICLY AVAILABLE				
UPON REQUEST.					

2010

SCHEDULE O - SUPPLEMENTAL INFORMATION

PAGE 2

ARIZONA COTTON GROWERS ASSOCIATION

86-0002407

FORM 990, PART XI, LINE 5 OTHER CHANGES IN NET ASSETS OR FUND BALANCES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

TOTAL $\frac{$}{$}$ -5,273.