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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

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

OMB No 1545-0047

A F	or the	2010 calendar year, or tax year beginning NOV 1, 2010 and ending	SEP 30, 2011			
В	Check if pplicable	C Name of organization	D Employer identifi	cation number		
	_Addre	S NEVADA CATTLEMEN'S ASSOCIATION				
	Name chang		88-6	004337		
	∏Initial _return	Number and street (or P.O. box if mail is not delivered to street address) Room/si	uite E Telephone numbe	er e e e e e e e e e e e e e e e e e e		
	Terma	P. O. BOX 310	775-	738-9214		
	Amen return	City or town, state or country, and ZIP + 4	G Gross receipts \$	485,817.		
	Applic tion pendi	ELKO, NV 89803-0310	H(a) Is this a group re			
	pendi	F Name and address of principal officer MEGHAN BROWN	for affiliates?	Yes X No		
		285 TENTH ST., ELKO, NV 89801	H(b) Are all affiliates inc			
				list (see instructions)		
		te: N/A	H(c) Group exemption			
	art I	forganization: X Corporation Trust Association Other ► LY Summary	ear of formation: 1935 I	M State of legal domicile: NV		
		Briefly describe the organization's mission or most significant activities TO ASSIS	T CATTLE AND	HORSE		
Governance		GROWERS IN THE STATE OF NEVADA BY GIVING GRO				
nar	1	Check this box If the organization discontinued its operations or disposed of n				
Vel		Number of voting members of the governing body (Part VI, line 1a)	3	0		
Ğ	1	Number of independent voting members of the governing body (Part VI, line 1b)	4	0		
ကို လူ	1	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	2		
Źį,	l	Total number of volunteers (estimate if necessary)	6	0		
	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.		
3	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.		
S Activities			Prior Year	Current Year		
ہ سے		Contributions and grants (Part VIII, line 1h)	72,168.	78,495.		
Revenue		Program service revenue (Part VIII, line 2g)	33,371.	40,523.		
₩ ₩	10	Investment income (Part VIII, column (A) imag 3, 4, and 7d)	4,310.	5,402.		
		Other revenue (Part VIII, column (A), times 5, 60, 86, 9c, 10c, and 11e)	53,204.	61,307.		
<u>`</u> _		Total revenue - add lines B through 11 (must equal Part VI); column (A), line 12)	163,053.	185,727.		
2012	1	Grants and similar amount paid (Part) X (column (A) line (13)	0.	0.		
_	14	Benefits paid to or for members (Part IX, column (A), line (A)	70,686.	68,916.		
ses		Salaries, other compensation, employee benefits (Fart IX, column (A), lines 5-10) Professional fundraising tees (Fart IX, column (A), line 11e)	70,000.	00,510.		
Expenses	1	Total fundraising expenses (Part IX, column (D), line 25)				
Щ	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	92,284.	90,615.		
	1	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	162,970.	159,531.		
	19	Revenue less expenses. Subtract line 18 from line 12	83.			
Net Assets or Fund Balances			Beginning of Current Year	End of Year		
sets alan	20	Total assets (Part X, line 16)	338,245.	334,238.		
t As	21	Total liabilities (Part X, line 26)	119,911.	89,708.		
컐	22	Net assets or fund balances Subtract line 21 from line 20	218,334.	244,530.		
	art II	Signature Block	-			
		alties of perjury, I declare that I have examined this return, including accompanying schedules and sta		ny knowledge and belief, it is		
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which prepared to the complete of the complete o	parer has any knowledge.	/ 		
		Signature of officer	Date	12		
Sig			Duit •			
Here MEGHAN BROWN, EXECUTIVE DIRECTOR Type or print name and title						
		Print/Type preparer's name Preparer's signature	Date, Check	PTIN		
Paid	į	TERI GAGE	2/7/12 if L self-employ	 }		
	- parer	Firm's name KAFOURY, ARMSTRONG & CO.	Firm's EIN			
	Only	Firm's address 975 FIFTH STREET				
		ELKO, NV 89801	Phone no. 7	75-738-5134		
Ma	the I	RS discuss this return with the preparer shown above? (see instructions)		X Yes No		
		LHA For Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2010)		

	1990 (2010) NEVADA CATTLEMEN'S ASSOCIATION 88-600433	/ Page Z
Par	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1	Briefly describe the organization's mission	NC
	TO ASSIST CATTLE AND HORSE GROWERS IN THE STATE OF NEVADA BY GIVI	NG
	GROUP REPRESENTATION AND CONSIDERATION TO PROBLEMS OF INTEREST TO	
	CATTLEMEN	
2	Did the organization undertake any significant program services during the year which were not listed on	
2	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4 h	(Code) (Expenses \$ including grants of \$) (Revenue \$	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
	· · · · · · · · · · · · · · · · · · ·	
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses	<u> </u>

	1			
_			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		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		x
	public office? If "Yes," complete Schedule C, Part I	3		
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		
_	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
٠	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "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° If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	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
С	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		X
d				
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	<u> </u>	x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		- 22
D	If "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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
_	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, 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	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		X
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		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	-	X
b	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)	20b	000	(2010)
		Form	330	いいれへ

Form 990 (2010) NEVADA CATTLEMEN'S ASSOCIATION

Part IV Checklist of Required Schedules (continued)

	B. II		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			v
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	00		v
00	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
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	00		X
040	Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
24 a	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease		-	
C	any tax-exempt bonds?	24c		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
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-EZ? If "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
27	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? If "Yes," complete			
	Schedule L, Part III	27		Х
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		_X_
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		<u> X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part i	31		_X_
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			7.7
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_33_		<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity?		1	7.7
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
26	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?	00		
27	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	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	37		х
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	3/		
38	Note. All Form 990 filers are required to complete Schedule O	38	x	
	Mores vini i criti con mero grie i edonen ro combiere conenne o			2010\

Part V

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Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V No Yes 0 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 10 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 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Х 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Х Did the organization have unrelated business gross income of \$1,000 or more during the year? За Х b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3h 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 4a **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. 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 X any contributions that were not tax deductible? 6a b If "Yes." did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). 7 Х 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? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required X to file Form 8282? 7c 7d d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 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 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting R organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter 10a a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against 11b amounts due or received from them) 12a Section 4947(a)(1) non-exempt 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 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 which the 13b organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand X 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? b | f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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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
Sec	tion 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 1a	<u>o</u>		
b	Enter the number of voting members included in line 1a, above, who are independent 1b	<u>o</u>		
2	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?	2		X
3	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		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7а	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	_7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following			
а	The governing body?	8a	X	ļ
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, 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	9	<u> </u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		ı	Τ
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		X
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?	10b	77	
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	├
	Describe in Schedule O the process, if any, used by the organization to review this Form 990	1	ļ	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	40.		
	to conflicts?	12b	 	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-		
	in Schedule O how this is done	12c		Х
13	Does the organization have a written whistleblower policy?	13	-	X
14	Does the organization have a written document retention and destruction policy?	14	\vdash	 ^ -
15	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?	15a		х
	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15b	<u> </u>	X
В	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	130		1
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ioa	taxable entity during the year?	16a		x
L	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	104	·	
b	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		
Sec	tion C. Disclosure	,		
17	List the states with which a copy of this Form 990 is required to be filed ►NV			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	le for		
-	public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
-	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organic	zation 🕽	-	
	MEGHAN BROWN - 775-738-9214			
	285 TENTH ST., ELKO, NV 89801			

	$\alpha \alpha \alpha$	(2010)	
-()1111	990		

NEVADA CATTLEMEN'S ASSOCIATION

<u>88-6004337</u>

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Part VII 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

(A) Name and Title	(B) Average hours per week (describe hours for related	_		Posi all t	ition			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week (describe hours for	_	neck	all t	that					
	(describe hours for	ector				app	ly)	compensation	compensation	amount of
	organizations in Schedule O)	sal trustee or d	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
RON CERRI										_
PRESIDENT	5.00			X				0.	0.	0
J. J. GOICOECHEA									_	_
PRESIDENT ELECT	3.00			Х				0.	0.	0
RON TORRELL										•
1ST VICE PRESIDENT	3.00		<u> </u>	X				0.	0.	0
JON GRIGGS	3.00			х				0.	0.	0
2ND VICE PRESIDENT	3.00			Λ				0.	0.	
MEGHAN BROWN EXECUTIVE DIRECTOR	40.00							0.	37,515.	0

Par	t VII Section A: Officers, Directors, Tru	ıstees, Key Er	npio	yee	s, a	nd H	ligh	est	Compensated Employ	ees (continued)			
	(A)	(B)			(0	C)			(D)	(E)		(F)	
	Name and title	Average	١,,	Position F (check all that apply) col				Reportable	Reportable	- 1	stimate	_	
		hours per week	(C	neck	all	inat	app	iy)	compensation from	compensation from related	a	mount other	of
		(describe	ector						the	organizations	coi	npensa	tion
		hours for	or di	8			sated		organization	(W-2/1099-MISC		from th	
		related organizations	rustee	l trust		 82	mpen		(W-2/1099-MISC)			ganızat	
		in Schedule	Individual trustee or director	Institutional trustee	ь	Key employee	Highest compensated employee	ıeı				nd relat ganızatı	
		O)	μ	ınstı	Officer	Key	돌흡	Former				,	
				İ									
													
				_			ļ				+		
							ļ						
			_										
			<u> </u>								+		
							ļ						
1b	Sub-total								0.	37,51			0.
	Total from continuation sheets to Part V	II, Section A							0.).		0.
	Total (add lines 1b and 1c)						<u>.</u>		0.	37,515			0.
2	Total number of individuals (including but r compensation from the organization	ot limited to tr	nose	liste	ed a	bove	e) wi	no r	eceived more than \$100	0,000 in reportable			C
	compensation from the organization	 										Yes	No
3	Did the organization list any former officer,	director or tru	stee	, ke	y en	olgr	yee,	or h	nighest compensated ei	nployee on			
	line 1a? If "Yes," complete Schedule J for s	such individual			•	•			,		3		X
4	For any individual listed on line 1a, is the si	um of reportab	le c	omp	ensa	atior	n and	d ot	her compensation from	the organization			
	and related organizations greater than \$15										4		X
5	Did any person listed on line 1a receive or							elat	ted organization or indiv	idual for services	_		·
	rendered to the organization? If "Yes," contion B. Independent Contractors	iplete Schedul	e J	or s	uch	pers	son				5	<u> </u>	X
1	Complete this table for your five highest co	mpensated in	den	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of comp	ensation	from	
•	the organization. NONE	pocatoa								• 100,000 or 00111p			
	(A)								(B)			(C)	
									Comp	ensatio	n		
									.,				
		in about			-1 '				d ala ava V i to a v	Alac -			
2	Total number of independent contractors (\$100,000 in compensation from the organi		iot l	mite	a to		se II 0	stec	apove) who received r	nore than			
	φτου, σου με compensation from the organi	Lation					<u> </u>						

Part VIII . Statement of Revenue (D) Revenue excluded from (A) (B) (C) Related or Unrelated Total revenue exempt function business tax under sections 512, 513, or 514 revenue revenue 1a 1 a Federated campaigns 78,495. b Membership dues 1b 1c c Fundraising events d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 78,495 h Total. Add lines 1a 1f **Business Code** 40,523. 40,523. 999999 2 a NEVADA CATTLEMEN'S CON Program Service f All other program service revenue 40,523. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 5,402. 5,402. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue ıncluding \$ __ _____ of contributions reported on line 1c) See a 311,057 Part IV, line 18 ь 300,090 b Less direct expenses 10,967. 10,967. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 50,340. 50,340. 999999 11 a MISCELLANEOUS REVENUE d All other revenue 50,340. e Total. Add lines 11a-11d 96,265. 10,967. Total revenue. See instructions.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	All other organizations must com	plete column (A) but are			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21		··-		
2	Grants and other assistance to individuals in				
	the US See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the US				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	62.002			
7	Other salaries and wages	62,982.			
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits	5,934.			
10	Payroll taxes Fees for services (non-employees)	3,334.			
11 a	Management				
a b	Legal	58.	<u> </u>		
c	Accounting	4,200.			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	5,451.			
14	Information technology				
15	Royalties				·
16	Occupancy	14,993.			
17	Travel	6,757.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	13,811.			
19	Conferences, conventions, and meetings	13,011.	<u> </u>		
20	Interest Payments to affiliates				
21 22	Depreciation, depletion, and amortization	528.			
23	Insurance	690.			
23 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 0.)				
а	MISCELLANEOUS EXPENSE	16,878.			
b	PRINTING, PUBLICATIONS,	11,957.			
С	TELEPHONE	4,920.			
d	UNREALIZED LOSS ON INVE	4,607.			
е	SCHOLARSHIP EXPENSE	4,201.		=	
f	All other expenses	1,564.			
25	Total functional expenses. Add lines 1 through 24f	159,531.			
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				

Part X **Balance Sheet** (A) Beginning of year (B) End of year 158,095. 153,180, 1 Cash - non-interest-bearing 1 171,912. 171,481. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 8,816 2,996. Accounts receivable, net 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 Notes and loans receivable, net 7 7 40 30. 8 Inventories for sale or use 8 3,584. 1,451. 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 28,632. basis Complete Part VI of Schedule D 10a 28,447 185. 10b 713. 10c ь Less accumulated depreciation Investments - publicly traded securities 11 11 Investments - other securities See Part IV, line 11 12 12 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets See Part IV, line 11 338,245. 334,238 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 4,435. 1,378 17 Accounts payable and accrued expenses 17 18 18 Grants payable 88,330. 115,476. Deferred revenue 19 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities. Complete Part X of Schedule D 25 25 119,911 89,708. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 224,960. 198,159. 27 27 Unrestricted net assets 20,175. 19,570. Temporarily restricted net assets 28 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 218,334. 244,530. 33 33 Total net assets or fund balances 334,238. 338,245. Total liabilities and net assets/fund balances 34

Form **990** (2010)

Form	990 (2010) NEVADA CATTLEMEN'S ASSOCIATION	<u>88-600</u>	<u>)4337 </u>	Pag	ge 12
Pai	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	185	5,7	<u>27.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	159	, 5	<u>31.</u>
3	Revenue less expenses Subtract line 2 from line 1	3	26	5,1	<u>96.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	218	3,3	<u>34.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
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	244	1,5	<u>30.</u>
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		х	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?				
b	Were the organization's financial statements audited by an independent accountant?		2b		_X_
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	1 1		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or guides, explain why in Schadula O and describe any stone taken to undergo such guides		3h		1

Form **990** (2010)

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990) '

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

NEVADA CATTLEMEN'S ASSOCIATION

Employer identification number

88-6004337

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		sed only
	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Pa	rt IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an histo	orically important land area
	Protection of natural habitat	Preservation of a certifi	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structur	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		└── Yes └── No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements du	ring the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h	
	and section 170(h)(4)(B)(ii)?		└── Yes
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes th	ne organization's accounting for
	conservation easements	(4.11)	harron Oirreitan Assarta
Par	t III Organizations Maintaining Collections of		ner Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex		ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS	·	
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pub	lic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		S
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre		gaın, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		S
b	Assets included in Form 990, Part X		▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			CATTLEMEN'				Oth				7 Page 2
cheek all that apply a	Ь										
a Public exhibition d Loan or exchange programs b Scholarly research e Other c	3	•	on, and other record	is, checi	k any of the	following that	are a sig	nificant u	se of its (collection	items
b			_	. —		haasa mraara					
c			C								
4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990 Part X, line 21 1a. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b. If "Yes," explain the arrangement in Part XIV and complete the following table 1c. Beginning balance 1d. Amount			е	· L	Other						
5 During the year, dut the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 Is it the organization on agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Is if "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance		_	. ()	- l · · · Al-			!	-4	D	. VIV	
to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, Inne 9, or reported an amount on Form 990, Part X, line 21 Is is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Inne 21 Is is the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, Inne 21 Is Is Is Is Is Is Is I	-		· ·		•	-			se in Pan	AIV.	
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Additions during the year 1d	5										
reported an amount on Form 990, Part X, Inne 21 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment % b Permanent endowment % 9 Permanent endowment 8 Perm 990, Part X line 10 Part VI Land, Buildings, and Equipment. See Form 990, Part X line 10 Description of investment 8 Part X VIV the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. See Form 990, Part X line 10 Description of investment 990, Part X line 21 Description 900, Part VIV line 10 Description	Dar						Voo" to E	orm 000	Dort IV		NO NO
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	Га		-	ete ii trie	organizatio	ii answered	TES LOF	om 990,	rail IV, I	ine 9, or	
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance b Permanent endowment 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment 3 Are there endowment 3 Are there endowment Funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (ii) related organizations (ii) related organizations (iii) related organizations (ii) related organizations (iii) related or				diany for	contribution	e or other acc	eete not in	ocluded			
b if "Yes," explan the arrangement in Part XIV and complete the following table c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b if "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶ % 5 Permanent endowment ▶ % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) ir elated organizations (iii) related organizations (iii) related organizations b If "Yes" to Sa(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other basis (investment) b Buildings c Leasehold improvements d Equipment 26, 422. 26, 237. 185. c Cleasehold improvements d Equipment c Edulor Sa(ii) a 185. c Cleasehold improvements d Equipment c Edulor Sa(ii) a 185. c Cleasehold improvements d Equipment c Edulor Sa(ii) a 185. c Cleasehold improvements d Equipment c Edulor Sa(ii) a 185. c Cleasehold improvements d Equipment c Edulor Sa(ii) a 185. c Cleasehold improvements d Edulor Sa(iii) a 185. c Cleasehold improvements d Edulor	та		an or other intermet	Jiaiy ioi	CONTINUUTION	is or other as:	sets not ii	iciaaea		7 vaa	□ No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? 2 Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV. line 10 Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance p Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶		•	and complete the fe	Mouna	tabla					J 162	NO
C Beginning balance 1c 1d	D	in res, explain the arrangement in Part XIV	and complete the ic	Dilowing	lable					Amount	
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (d) Three years back (e) Four	_	Decimping helenes						10		Amount	
e Distributions during the year f. Ending balance 2 Did the organization include an amount on Form 990, Part X, line 217 b. If "Yes," explain the arrangement in Part XIV Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 1a Beginning of year balance b. Contributions c. Net investment earnings, gains, and losses d. Grants or scholarships e. Other expenditures for facilities and programs f. Administrative expenses g. End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment y/6 b. Permanent endowment part y/6 c. Term endowment part xiv the intended uses of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iii) related organizations b. If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization sendowment funds Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Describe in Part XIV the intended uses of the organization basis (other) Describe or part xiv the intended uses of the organization basis (other) Describe of investment (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b. Buildings c. Leasehold improvements d. Equipment. 26, 422. 26, 237. 185. c. Cost or Other c. Leasehold improvements d. Equipment. C. See Tother c. See Tother c. C. Accumulated depreciation 1a Land b. Buildings c. Leasehold improvements d. Equipment. C. See Tother c. C. Accumulated depreciation 1a Land b. Buildings c. Leasehold improvements d. Equipment. C. See Tother c. C. Accumulated depreciation 1a Land b. Buildings c. Leasehold improvements d. Equipment. C. Accumulated depreciation C. A											
Ending balance Int		-									
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10	_										
Describe in Part XIV the intended uses of the organization's endowment funds Describe in Part XIV the intended uses of the organization's endowment Description of investment Description of investment Described in Part XIV Described in Part XIV the intended uses of the passis (investment) Described in Part XIV Described in XIV D		•	000 Dart V Ivaa	010				11] v	□ No
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back		•	orm 990, Part X, line	217					_	ı res	
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back			f the organization or	aswored	"Voc" to Fo	rm 000 Part	IV line 10				
Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment ▶	I ai	Endowment i unus. Complete				T			are back	(a) Four	veare back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as a Board designated or quasi-endowment \(\bigcup_{\text{s}} \) b Permanent endowment \(\bigcup_{\text{s}} \) c Term endowment \(\bigcup_{\text{s}} \) d Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10 Description of investment (a) Cost or other (b) Cost or other depreciation 1a Land b Buildings c Leasehold improvements d Equipment 26, 422. 26, 237. 185. e Other 2, 210. 2, 210. 0.	4	Decument of year balance	(a) Current year	(10) -	Tior year	(C) TWO year	S Dack (C	a) illee ye	ais back	(e) i oui	years back
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Schedule D (Form 990) 2010

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	dule D (Form 990) 2010 NEVADA CATTLEMEN'S ASSOCIA	MOITA				<u> 6004337</u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	o Audit	ed Finan	cial S	tatement		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			<u>,727.</u>
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		<u> 159</u>	<u>,531.</u>
3	Excess or (deficit) for the year Subtract line 2 from line 1			3		26	<u>,196.</u>
4	Net unrealized gains (losses) on investments			4			
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)			8			
9	Total adjustments (net) Add lines 4 through 8			9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 ar	nd 9		10		26	,196.
	t XII Reconciliation of Revenue per Audited Financial Stateme		ith Rever	nue p	er Return		
1	Total revenue, gains, and other support per audited financial statements			<u> </u>	1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12						
a	Net unrealized gains on investments	2a					
	Donated services and use of facilities	2b					
b	Recoveries of prior year grants	2c					
C C	Other (Describe in Part XIV)	2d					
d	,	_ Zu					
e	Add lines 2a through 2d				2e	<u> </u>	
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
С	Add lines 4a and 4b				4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) † XIII Reconciliation of Expenses per Audited Financial Statem	nonto V	Vith Evno	ncoc	5 Por Potu	rn	
Pai		Helita V	viui Expe	11562			
1	Total expenses and losses per audited financial statements				1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 1					
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
С	Other losses	2c					
d	Other (Describe in Part XIV)	_2d					
е	Add lines 2a through 2d				2e		
3	Subtract line 2e from line 1				3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
С	Add lines 4a and 4b				4c	<u> </u>	
_5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	_			5		
Pa	rt XIV Supplemental Information						
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	III, lines 1	la and 4, Pa	art IV, li	nes 1b and	2b, Part V, line	e 4, Part
	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also com						
•		-			-		
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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 Inspection

Employer identification number

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: CONSIDERATION TO PROBLEMS OF INTEREST TO CATTLEMENT FORM 990, PART VI, SECTION B, LINE 11: A COPY OF FORM 990 IS GIVEN TO THE EXECUTIVE DIRECTOR FOR REVIEW PRIOR TO SIGNATURE AND FILING OF ITS FORM 990 FORM 990, PART VI, SECTION C, LINE 19: INFORMATION AVAILABLE UPON REQUEST
FORM 990, PART VI, SECTION B, LINE 11: A COPY OF FORM 990 IS GIVEN TO THE EXECUTIVE DIRECTOR FOR REVIEW PRIOR TO SIGNATURE AND FILING OF ITS FORM 990
EXECUTIVE DIRECTOR FOR REVIEW PRIOR TO SIGNATURE AND FILING OF ITS FORM 990
EXECUTIVE DIRECTOR FOR REVIEW PRIOR TO SIGNATURE AND FILING OF ITS FORM 990
FORM 990, PART VI, SECTION C, LINE 19: INFORMATION AVAILABLE UPON REQUEST

2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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Current Year Deduction	. &	0	&	13.	e e	0	0	0	0	504.	520.	528.		
Current Sec 179			0								.0	0		
Accumulated Depreciation	1,883.	319.	2,202.	9,954.	2,097.	1,164.	1,494.	8,758.	418.	1,832.	25,717.	27,919.		
Basis For Depreciation	1,891.	319.	2,210.	9,967.	2,100.	1,164.	1,494.	8,758.	418.	2,521.	26,422.	28,632.		
Reduction In Basis			0								0	0		
Bus % Excl							•							
Unadjusted Cost Or Basis	1,891.	319.	2,210.	9,967.	2,100.	1,164.	1,494.	8,758.	418.	2,521.	26,422.	28,632.		
No S	16	16		16	16	16	16	16	16	16		·		
Life	7.00	7.00		7.00	5.00	5.00	5.00	5.00	5.00	5.00				
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Asset No	7	9		H 1	<u>ო</u>	4	D		&	6			 	

(D) - Asset disposed