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# Form

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)

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

OMB No 1545-0047 2011

Open to Public Inspection

| <u> A</u>                                    | For th   | <u>1e 2011 ca</u>                                 | lendar year, or tax year beginning1U/U1/11 _, and endingU9/3U/1   |                    |                  |                            |
|--|--|---|---|--------------------|------------------|----------------------------|
| В  | Check if a                                       | applicable  | Name of organization  |                    | D Employ         | yer identification number  |
|  | Address  | change  | TEXAS CATTLE FEEDERS ASSOCIATION  |                    |                  |                            |
|  | Name ch  | anne  | Doing Business As   |                    | 75-              | -1244584                   |
|  |  | ·   | Number and street (or P O box if mail is not delivered to street address)                                   | Room/suite         | E Telepho        | one number                 |
|  | Initial retu                                     | nw  | 5501 I-40 WEST  |                    | 806              | 5-457-2300                 |
|  | Terminat   | ed  | City or town, state or country, and ZIP + 4   |                    |                  |                            |
|  | Amended  | d return  | AMARILLO TX 79106   |                    | G Gross rece     | eipts \$ 3,910,033         |
| $\exists$                                    | Analiaalia                                       | on pending  | Name and address of principal officer   |                    |                  |                            |
| ш  | Аррисанс   | on pending  |   | H(a) Is this a gi  | roup return for  | affiliates? Yes X No       |
|  |  |   |   | H(b) Are all aff   | iliates included | yes No                     |
|  |  |   |   | If "No             | ," attach a list | (see instructions)         |
| _  | Tay-eye  | mpt status  | 501(c)(3) <b>X</b> 501(c) ( <b>6</b> ) <b>◄</b> (insert no ) 4947(a)(1) or 527                              | 1                  |                  |                            |
| ÷  | Website  |   | W. TCFA. ORG  | H(c) Group ex      | emption numbi    | or <b>&gt;</b>             |
| <u>,                                    </u> |  | organization                                      |   | ear of formation   | emption number   | M State of legal domicile  |
|  | Part I   |   | nmary   | ear or formation   |                  | M State of legal dofficile |
| <u> </u>                                     |  |   | cribe the organization's mission or most significant activities   |                    |                  |                            |
|  |  | -   | TION OF THE CATTLE FEEDING INDUSTRY   |                    |                  |                            |
| ခ္   |  | PROMO   | TION OF THE CATTLE FEEDING INDUSTRY   |                    |                  |                            |
| nar  | l  |   |   |                    |                  |                            |
| Governance                                   | İ  |   | . 🗂   |                    |                  |                            |
| ်  | 2  | Check this  | box ▶ ☐ If the organization discontinued its operations or disposed of more than 25%                        | of its net assets  | • ;              |                            |
| ಂಶ   | 3  | Number of   | voting members of the governing body (Part VI, line 1a)   |                    | 3                | 20                         |
| es   | 4  | Number of   | independent voting members of the governing body (Part VI, line 1b)   |                    | 4                | 20                         |
| Activities                                   | 5  | Total numb  | per of individuals employed in calendar year 2011 (Part V, line 2a)   |                    | 5                | 20                         |
| Ġ  | 1 .  |   | per of volunteers (estimate if necessary)   |                    | 6                | 200                        |
| •  | Į.   |   | ated business revenue from Part VIII, column (C), line 12   |                    | 7a               | 588,597                    |
|  | I .  |   | ed business taxable income from Form 990-T, line 34   |                    | 7b               | 0                          |
| فت   | <del>                                     </del> | riot am ciai                                      | od addinoso taxasie income nom rom 550 1, iino 64   | Prior Yea          |                  | Current Year               |
| <u> </u>                                     | 8  | Contributio                                       | ns and grants (Part VIII, line 1h)  | 3,09               | 2,963            | 2,926,229                  |
|  |  |   | ervice revenue (Part VIII, line 2g)   |                    | 4,753            | 961,715                    |
| WAR J S 2013                                 | 1  |   | ncome (Part VIII, column (A), lines 3, 4, and 7d)   |                    | 8,758            | 22,089                     |
| ~~~<br>~~~                                   | 1  |   | nue (Part VIII, column (A), lines 5, 4, and 74)   |                    | 0                | 22/000                     |
| $\stackrel{\sim}{=}$                         |  |   |   | 4 01               | 6,474            | 3,910,033                  |
| _ <del></del>                                | 1  |   | nue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)                                    | 3,01               | 0                | <u>3,910,033</u><br>0      |
| $\subseteq$                                  | 13   |   | I similar amounts paid (Part IX, column (A), lines 1–3) and to or for members (Part IX, column (A), line 4) | <del></del>        |                  | <u></u>                    |
| *penses/                                     | 14   | •   | 0   | 0                  |                  |                            |
| Z ś  | 15   |   | ther compensation, employee benefits (Part IX, column (A), lines 5–10)                                      | 1,40               | 5,944            | 1,348,243                  |
| Sign   | 16a  | Profession  | al fundraising fees (Part IX, column (A), line 11e)   |                    | 0                | 0                          |
| (A)  | b  | Total fundr                                       | aising expenses (Part IX, column (D), line 25) ▶ 0  |                    |                  |                            |
| C.   |  | Other expe  | nses (Part IX, column (A), lines 11a–11d, 11f–24e)  |                    | 7,114            | 2,321,100                  |
|  | 18   | Total exper                                       | nses Add lines 13–17 (must equal Part IX, column (A)-line 25)   | 3,91               | 3,058            | 3,669,343                  |
|  | 19   | Revenue le  | ess expenses Subtract line 18 from line 12  | 10                 | 3,416            | 240,690                    |
| 200  | 3  |   | S MAR'M 1 2013 Q  | Beginning of Cur   |                  | End of Year                |
| sets   | 20   | Total asset                                       | s (Part X, line 16)   | 3,73               | 4,693            | 4,151,057                  |
| AS   | 21   | Total liabilit                                    | ies (Part X, line 26)   | 90                 | 0,613            | 1,076,287                  |
| Net Assets or Fund Balances                  | 22 1   | Net assets  | or fund balances Subtract line 21 from line 20  | 2,83               | 4,080            | 3,074,770                  |
|  | art II   | Sign  | nature Block  |                    |                  |                            |
|  |  |   | jury, I declare that I have examined this return, including accompanying schedules and statements,          | and to the best of | mv knowled       | lge and belief, it is      |
|  |  |   | plete. Declaration of preparer (other than officer) is based on all information of which preparer has a     |                    | ,                | -g                         |
|  |  | T   | Lan Calilla   |                    | 7                | 1//2                       |
| Sig  | ın   | Sign  | nature of officer   |                    | Date             | <del>/// 12</del>          |
| _  | -  | 1 '   |   | יבאותי             |                  |                            |
| He   | 1 <del>C</del>                                   |   | ROSS WILSON PRESID  | EN I               |                  |                            |
|  |  | <del>  '                                   </del> | e or print name and title   | 15                 | -                | , DITTE                    |
| De:  |  | Print/Type p                                      | reparer's name Preparer's signalure   | Date               | Check            | ıf PTIN                    |
| Paid   |  | MICHAEL   | J. LOMAX, CPA Michael J. Zomas 44   | 01/30              | /13 self-em      |                            |
|  | parer  | Firm's name                                       |   | F                  | ım's EIN ▶       | 75-2333913                 |
| Use  | Only   |   | 418 S POLK ST STE 200   |                    |                  |                            |
|  |  | Firm's addre                                      | ss AMARILLO, TX 79101-1430  | Р                  | hone no          | 806-372-3331               |
| May  | the IR   | S discuss t                                       | his return with the preparer shown above? (see instructions)  |                    |                  | Yes No                     |
| For  |  |   | uction Act Notice, see the separate instructions.   |                    |                  | Form <b>990</b> (2011)     |
| DAA  |  |   | •   |                    |                  | كالمستر                    |

Part IV Checklist of Required Schedules

4 >

|     |   | i    | 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 (see instructions)?   | 2    |             | X        |
| 3   | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to  |      |             |          |
| •   | candidates for public office? If "Yes," complete Schedule C, Part I   | 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    | X           |          |
| 6   | Did the organization maintain any donor advised funds or any similar funds or accounts for which 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    |             | X        |
| 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    |             | X        |
| 10  | Did the organization, directly or through a related organization, hold assets in temporarily restricted   | 1    |             |          |
|     | endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10   |             | <u> </u> |
| 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   |   |      | ~-          |          |
|     | complete Schedule D, Part VI  | 11a  | Х           |          |
| b   | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more  |      |             | x        |
|     | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  | 11b  |             |          |
| С   |   | 440  |             | x        |
| ч   | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets | 11c  |             | <u> </u> |
| d   | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX   | 11d  | x           |          |
| е   |   | 11e  | x           |          |
| f   | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses   | -110 | <del></del> |          |
| •   | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  | 11f  | ŀ           | x        |
| 12a |   |      |             |          |
|     | Schedule D, Parts XI, XII, and XIII   | 12a  | x           |          |
| b   | Was the organization included in consolidated, independent audited financial statements for the tax year? 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  |             | Х        |
| b   | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,  |      |             |          |
|     | fundraising, business, investment, and program service activities outside the United States, or aggregate   |      | - 1         |          |
|     | foreign investments valued at \$100,000 or more? 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  |      | l           |          |
|     | organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV  | 15   |             | <u> </u> |
| 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  | ł    |             | _        |
|     | Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)  | 17   |             | <u> </u> |
| 8   | 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        |
| 9   | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  | ļ    |             |          |
|     | If "Yes," complete Schedule G, Part III   | 19   |             | X        |
|     | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H   | 20a  |             | X        |
| b   | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20b  |             |          |

75-1244584 Form 990 (2011) TEXAS CATTLE FEEDERS ASSOCIATION Page 4 Part IV Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization X 21 in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States X on Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III 22 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 X 23 employees? If "Yes," complete Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b X 24a through 24d and complete Schedule K If "No," go to line 25 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d 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 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled X entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 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) 28a X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X Schedule L, Part IV 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) X 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 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," X 32 complete Schedule N, Part II 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 X IV, and V, line 1 34 X 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the 35b X meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 related organization? If "Yes," complete Schedule R, Part V, line 2 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,

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

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

X Form 990 (2011)

X

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Part V Statements Regarding Other IRS Filings and Tax Compliance

|         | Check if Schedule O contains a response to any question in this Part V   |          |                |                    |  | i           |
|---------|--|----------|----------------|--------------------|--|-------------|
|         |  |          |                | ,                  | Yes  | No          |
| 1a      | Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable  | 1a       | 25             |                    |  |             |
| b       | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable   | 1b       |                |                    |  | ļ           |
| С       | Did the organization comply with backup withholding rules for reportable payments to vendors and   |          |                |                    |  |             |
|         | reportable gaming (gambling) winnings to prize winners?  |          |                | 1c                 | X  | <u> </u>    |
| 2a      | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax  |          | 0.0            |                    |  |             |
|         | Statements, filed for the calendar year ending with or within the year covered by this return  | 2a       | 20             | <del> </del>       | <b></b>  |             |
| b       | If at least one is reported on line 2a, did the organization file all required federal employment tax returns?   | ,        |                | 2b_                | X  | -           |
| 2-      | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)  |          |                |                    | x  |             |
| 3a      | Did the organization have unrelated business gross income of \$1,000 or more during the year?  |          |                | 3a<br>3b           | X  |             |
| b       | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O   |          |                | 30                 | A  | ├           |
| 4a      | At any time during the calendar year, did the organization have an interest in, or a signature or other authover, a financial account in a foreign country (such as a bank account, securities account, or other financial   | -        |                | ļ                  | }  |             |
|         | account)?  | Jai      |                | 4a                 |  | x           |
| b       | If "Yes," enter the name of the foreign country  |          |                | 1 70               |  |             |
| _       | See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Acc   | counts   |                |                    |  |             |
| 5a      | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  |          |                | 5a                 |  | X           |
| b       | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction  | 12       |                | 5b                 |  | X           |
| С       | 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?   |          |                | 6a                 |  | X           |
| þ       | If "Yes," did the organization include with every solicitation an express statement that such contributions  | or       |                |                    |  |             |
|         | gifts were not tax deductible?   |          |                | 6b                 |  | <u> </u>    |
| 7       | Organizations that may receive deductible contributions under section 170(c).  |          |                | :                  | ļ  |             |
| а       | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good   | ds       |                |                    |  |             |
|         | and services provided to the payor?  |          |                | 7a                 | <u> </u>   |             |
| b       | If "Yes," did the organization notify the donor of the value of the goods or services provided?  |          |                | 7b                 | ļ  |             |
| С       | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was   |          |                | _                  |  |             |
|         | required to file Form 8282?  | 1        |                | 7c                 |  |             |
| d       | If "Yes," indicate the number of Forms 8282 filed during the year  | 7d       |                | ———  <sub>72</sub> | Ì  |             |
| e       | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contributed the organization division the property of the organization of the organi |          |                | 7e<br>7f           | <del>                                     </del> |             |
| f       | 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   |          | e required?    | 7 <u>1</u><br>7g   | <del>                                     </del> |             |
| g<br>h  | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization   |          |                | 7 <u>9</u><br>7h   | <del>                                     </del> |             |
| 8       | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting  | i iiic a | 1 01111 1030-0 | <u> </u>           |  |             |
|         | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring   |          |                |                    | ŀ  |             |
|         | organization, have excess business holdings at any time during the year?   |          |                | 8                  |  |             |
| 9       | Sponsoring organizations maintaining donor advised funds.  |          |                |                    |  |             |
| а       | 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                 |  |             |
| 0       | Section 501(c)(7) organizations. Enter   |          |                |                    |  |             |
| а       | Initiation fees and capital contributions included on Part VIII, line 12   | 10a      |                |                    | ]  | 1           |
| b       | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10b      |                |                    |  | 1           |
| 1       | Section 501(c)(12) organizations. Enter  |          |                |                    |  | i           |
| а       | Gross income from members or shareholders  | 11a      |                |                    |  | ĺ           |
| b       | Gross income from other sources (Do not net amounts due or paid to other sources   |          |                |                    |  |             |
|         | against amounts due or received from them )  | 11b      |                |                    |  |             |
| 2a      | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1   |          |                | 12a                |  | -           |
| ь       | If "Yes," enter the amount of tax-exempt interest received or accrued during the year  | 12b      |                |                    |  |             |
| 3       | Section 501(c)(29) qualified nonprofit health insurance issuers.   |          |                | 40                 | <b> </b>   |             |
| а       | Is the organization licensed to issue qualified health plans in more than one state?   |          |                | _13a               |  |             |
| L       | 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   | 13ь      |                |                    |  |             |
| c       | the organization is licensed to issue qualified health plans  Enter the amount of reserves on hand   | 13b      | <del></del>    |                    |  |             |
| c<br>4a | Did the organization receive any payments for indoor tanning services during the tax year?   | LIJU     |                | 14a                | <b></b> -  | X           |
|         | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O  |          |                | 14b                |  | <del></del> |
|         |  |          |                | ,                  |  |             |

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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

| Sec    | tion A. Governing Body and Management   |          |          |              | <u> </u> | T              |  |  |  |  |
|--------|---|----------|----------|--------------|----------|----------------|--|--|--|--|
| 10     | Enter the number of union manhors of the necessary had not the and of the tourse  | 1a       | 20       |              | Yes      | No             |  |  |  |  |
| ıa     | Enter the number of voting members of the governing body at the end of the tax year   | <u> </u> | 20       | <b>⊣</b> ∣   |          |                |  |  |  |  |
|        | If there are material differences in voting rights among members of the governing body, or  |          | ]        | - }          |          |                |  |  |  |  |
|        | if the governing body delegated broad authority to an executive committee or similar  |          | }        |              |          | l              |  |  |  |  |
|        | committee, explain in Schedule O  | 1b       | 20       |              |          |                |  |  |  |  |
| ь<br>2 | Enter the number of voting members included in line 1a, above, who are independent  |          |          |              |          | l              |  |  |  |  |
| 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            |          | $ \mathbf{x} $ |  |  |  |  |
| 3      | Did the organization delegate control over management duties customarily performed by or under the direct   |          |          | <del>-</del> |          | <u></u>        |  |  |  |  |
| J      | 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      |   |          |          |              |          |                |  |  |  |  |
| 6      | 3   |          |          |              |          |                |  |  |  |  |
| 7a     | Did the organization have members of stockholders, or other persons who had the power to elect or appoint   |          |          | 6            |          | X              |  |  |  |  |
|        | one or more members of the governing body?  |          |          | 7a           | x        |                |  |  |  |  |
| b      | Are any governance decisions of the organization reserved to (or subject to approval by) members,   |          |          | 1            |          |                |  |  |  |  |
| ~      | stockholders, or persons other than the governing body?   |          |          | 7b           | х        |                |  |  |  |  |
| 8      | Did the organization contemporaneously document the meetings held or written actions undertaken during the year b   | v the f  | ollowina |              |          | $\vdash$       |  |  |  |  |
| а      | The governing body?   | ,        | 5        | 8a           | x        |                |  |  |  |  |
| 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            |          | x              |  |  |  |  |
| Sec    | tion B. Policies (This Section B requests information about policies not required by the Inter  | nal Re   | evenue C | ode.)        |          |                |  |  |  |  |
|        |   |          |          |              | Yes      | No             |  |  |  |  |
| 10a    | Did the organization have local chapters, branches, or affiliates?  |          |          | 10a          |          | X              |  |  |  |  |
| b      | If "Yes," did the organization have written policies and procedures governing the activities of such chapters,  |          |          |              |          |                |  |  |  |  |
|        | affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?   |          |          | 10b          |          |                |  |  |  |  |
| 11a    | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the   | form?    | •        | 11a          | X        |                |  |  |  |  |
| b      | Describe in Schedule O the process, if any, used by the organization to review this Form 990  |          |          |              |          |                |  |  |  |  |
| 12a    | Did the organization have a written conflict of interest policy? If "No," go to line 13   |          |          | 12a          | X        | <u> </u>       |  |  |  |  |
| b      | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to  | conflic  | ts?      | 12b          |          | X              |  |  |  |  |
| C      | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"   |          |          |              |          |                |  |  |  |  |
|        | describe in Schedule O how this was done  |          |          | 12c          |          | X              |  |  |  |  |
| 13     | Did the organization have a written whistleblower policy?   |          |          | 13           | Х        |                |  |  |  |  |
| 14     | Did the organization have a written document retention and destruction policy?  |          |          | 14           |          | X              |  |  |  |  |
| 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?   |          |          |              |          |                |  |  |  |  |
| а      | The organization's CEO, Executive Director, or top management official  |          |          | 15a          | X        | <u> </u>       |  |  |  |  |
| b      | Other officers or key employees of the organization   |          |          | 15b          | X        | ļ              |  |  |  |  |
|        | 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," did the organization follow a written policy or procedure requiring the organization to evaluate its  |          |          | 1            |          |                |  |  |  |  |
|        | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the   |          |          |              |          |                |  |  |  |  |
|        | organization's exempt status with respect to such arrangements?   |          |          | 16b          |          | Щ              |  |  |  |  |
| 200    | tion C. Disclosura  |          |          |              |          |                |  |  |  |  |

#### Section C. Disclosure

- List the states with which a copy of this Form 990 is required to be filed > NONE 17
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply
  - Another's website X Upon request
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the 20 5501 I-40 WEST

CHRISTIE CULP organization >

TX 79106

806-457-2300

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

| Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
|--|---|--------------------------------|-----------------------|-----------------------------------|------------------|-----------------------------------|----------|---|---|---|--|--|
| (A)<br>Name and Title  |   |                                | x, unle<br>ficer a    | Pos<br>check<br>ess pe<br>ind a d | rson ı<br>ırecto | than one<br>s both a<br>r/trustee | n<br>))  | (D) Reportable compensation from the organization | (E)  Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the |  |  |
|  | related<br>organizations<br>in Schedule<br>O) | Individual trustee or director | Institutional trustee | Officer                           | Key employee     | Highest compensated employee      | Former   | (W-2/1099-MISC)                                   |   | organization<br>and related<br>organizations        |  |  |
| (1)BO KIZZIAR  |   |                                |                       |                                   |                  | $\vdash$                          | $\dashv$ |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   |          | 0   | 0   | 0   |  |  |
| (2) JIM PETERS   |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| CHAIRMAN   | 5.00  | X                              |                       |                                   |                  | ll.                               |          | 0   | 0   | 0   |  |  |
| (3) WALT OLSON   |   | <b>l</b> i                     |                       |                                   |                  |                                   |          |   |   |   |  |  |
| CHAIRMAN-ELECT   | 3.00  | X                              |                       |                                   |                  |                                   |          | 0   | 0   | 0   |  |  |
| (4) MIKE ENGLER  |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  | $\sqcup$                          |          | 0   | 0   | 0   |  |  |
| (5) JASON HITCH  |   |                                |                       |                                   |                  | li                                |          |   |   |   |  |  |
| VICE-CHAIRMAN  | 2.00  | X                              |                       |                                   |                  |                                   |          | 0   | 0   | 0   |  |  |
| (6) ED ATTEBURY  |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   |          | 0   | 0   | 0   |  |  |
| (7) PAUL COLMAN  |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   |          | 0   | 0   | 0   |  |  |
| (8) KEVIN BUNCH  |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   |          | 0   | 0   | 0   |  |  |
| (9) KEVIN BUSE   | 1   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   | _        | 0   | 0   | 0   |  |  |
| (10) RUSSELL GOBLE   |   |                                |                       |                                   |                  |                                   | ı        |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   |          | 0   | <u> </u>  | 0   |  |  |
| (11) CHRIS HITCH   |   | ļ                              |                       |                                   |                  |                                   |          |   | _   | _   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  | <u> </u>                          | _        | 0   | 0   | 0   |  |  |
| (12) SHELBY HORN   |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  | <u></u>                           |          | 0   | 0   | 0   |  |  |
| (13) JIM LOVELL  |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   |          | 0   | 0   | 0   |  |  |
| (14) REX MCCLOY  |   |                                |                       |                                   |                  |                                   |          |   |   |   |  |  |
| DIRECTOR   | 2.00  | X                              |                       |                                   |                  |                                   | l        | 0   | 0   | 0   |  |  |

| Part VII Section A. Officers  (A)  Name and title                  | (B) Average hours per   |          |                   | Pos  | C)<br>sition | than o                            |             | (D) Reportable compensation           | (E)  Reportable compensation from     | (F)<br>Estimated<br>amount of |  |                              |              |
|--|---|----------|-------------------|--|--------------|-----------------------------------|-------------|---------------------------------------|---------------------------------------|-------------------------------|--|------------------------------|--------------|
|  | week (describe hours for related organizations in Schedule O) | bo       | x, uni<br>ficer a | ess pe   | erson i      | both Highest compensated employee | an<br>ee)   | from the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) |                               | other<br>compens<br>from the<br>organizate<br>and rela<br>organizate | ation<br>ne<br>ition<br>ited |              |
| (15)DAL REID   |   |          |                   |  |              | ed                                |             |                                       |                                       |                               |  |                              |              |
| DIRECTOR (16) PETE SCARMARDO                                       | 2.00  | X        |                   |  |              | _                                 |             | 0                                     | 0                                     |                               |  |                              | 0            |
| DIRECTOR   | 2.00  | x        |                   |  |              |                                   |             | 0                                     | 0                                     |                               |  |                              | 0            |
| (17) PAT SCHWAB  | 0.00  |          |                   |  |              |                                   |             |                                       |                                       |                               | _  |                              |              |
| DIRECTOR (18) SID SAWYER   | 2.00  | X        | -                 | ├  | _            | -                                 | -           | 0                                     | 0                                     | -                             |  |                              | 0            |
| DIRECTOR   | 2.00  | x        |                   |  |              |                                   |             | O                                     | 0                                     |                               |  |                              | 0            |
| (19)MIKE THOREN  |   |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
| DIRECTOR (20) MONTY WHEELER  | 2.00  | X        |                   | <del> </del>                                     | -            | <del> </del>                      |             | 0                                     | 0                                     | <br>                          |  |                              | 0            |
| DIRECTOR   | 2.00  | x        |                   |  |              |                                   |             | 0                                     | 0                                     |                               |  |                              | 0            |
| (21) ROSS WILSON   | <b>50.00</b>  |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              | 014          |
| PRESIDENT (22) BEN WEINHEIMER                                      | 70.00   | ╁        | ┝                 | X  |              |                                   | _           | 213,411                               | 0                                     | ļ — —                         |  | 29,                          | 914          |
| VICE-PRES.   | 70.00   |          |                   | x  |              |                                   |             | 137,817                               | 0                                     |                               | 2  | 26,                          | 981          |
| (23)   |   |          |                   |  |              |                                   |             |                                       |                                       |                               | -  |                              |              |
| (24)   |   |          |                   | <del>                                     </del> |              |                                   |             |                                       |                                       |                               |  |                              |              |
| (25)   |   |          |                   | _  |              |                                   |             |                                       |                                       |                               |  |                              |              |
| 1b Sub-total   | <u>.</u>  | L        | L                 | L  | 1            |                                   | <b>&gt;</b> | 351,228                               |                                       |                               | Ę  | 6,                           | 895          |
| c Total from continuation shee                                     | ets to Part VII, S  | ectio    | n A               |  |              |                                   | <b>&gt;</b> | 251 000                               |                                       |                               |  | - 6                          | 00E          |
| d Total (add lines 1b and 1c)  Total number of individuals (inc    | cluding but not lin   | nited    | to th             | ose  | listed       | d abo                             | ve)         | 351,228 who received more than \$10   | 00,000 in                             | <u> </u>                      |  | 00,                          | <u>895</u>   |
| reportable compensation from                                       | the organization  | <u> </u> | 2                 |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
| 3 Did the organization list any for                                | rmer officer, dire  | ctor.    | or tri            | ustee  | e, ke        | v em                              | plove       | ee, or highest compensated            |                                       | 1                             |  | Yes                          | No           |
| employee on line 1a? If "Yes," 4 For any individual listed on line | complete Schedu   | ile J    | for s             | uch i  | ndıv         | dual                              |             |                                       |                                       |                               | 3  |                              | <u> </u>     |
| organization and related organ                                     |   |          |                   |  |              |                                   |             |                                       |                                       |                               |  | x                            |              |
| individual  5 Did any person listed on line 1a                     | a receive or accru  | ie co    | mpe               | nsatı  | ion fi       | rom a                             | any ι       | inrelated organization or ind         | lividual                              |                               | 4  |                              |              |
| for services rendered to the org                                   |   | s," c    | ompl              | ete S  | Sche         | dule                              | J for       | such person                           |                                       |                               | 5  |                              | _ <u>x</u> _ |
| Section B. Independent Contract  Complete this table for your five |   | nsate    | d inc             | depe   | nder         | nt cor                            | ntrac       | tors that received more than          | <br>n \$100.000 of                    |                               |  |                              |              |
| compensation from the organiz                                      | ation Report cor  |          |                   |  |              |                                   |             | year ending with or within t          | he organization's tax year            |                               |  | (C)                          |              |
| (A)<br>Name and business address                                   |   |          |                   |  |              |                                   | H           | Descript                              | (B)<br>ion of services                |                               | Con  | (C)<br>npensat               | tion         |
|  |   |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
|  |   |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
|  |   |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
|  |   |          |                   |  |              |                                   |             |                                       |                                       |                               | _  |                              |              |
|  |   |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
|  |   |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
|  | <u>, , , , , , , , , , , , , , , , , , , </u>                 |          |                   |  |              |                                   |             |                                       |                                       |                               |  |                              |              |
| 2 Total number of independent co                                   | •   | _        |                   |  |              |                                   |             | listed above) who                     |                                       |                               |  |                              |              |
| received more than \$100,000 c                                     | or compensation (   | rom      | the c             | organ  | ızatı        | on 🕨                              | •           |                                       | 0                                     |                               | Form   | 990                          | (2011)       |

| Pa   | art V          | III Staten  | nent of Reve             | nue         |             |             | <u>,</u>             |  |   |   |
|--|----------------|---|--------------------------|-------------|-------------|-------------|----------------------|--|---|---|
|  |                |   |                          |             |             |             | (A)<br>Total revenue | (B) Related or exempt function revenue | (C)<br>Unrelated<br>business<br>revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| S  | 1a             | Federated can   | nnainns                  | 1a          |             |             | <u> </u>             | revenue                                |   | 512, 513, 01 514  |
| aut  | h              | Membership d  | . •                      | 1b          | 2           | ,818,598    |                      |  |   |   |
| õ  |                | Fundraising ev  |                          | 1c          |             | ,010,330    |                      |  |   |   |
| ifts   | Ä              | Related organi  |                          | 1d          |             |             |                      |  |   |   |
| 0.E  | Ğ              | Government grants   |                          | 1e          |             |             |                      |  |   |   |
| Sir  | Ĭ,             | All other contribution  | •                        | 16          |             |             |                      |  |   |   |
| i i i  |                | and similar amounts   |                          | 1f          |             | 107,631     |                      |  |   |   |
| Ęŏ   | g              | Noncash contribution  | ns included in lines 1a- | ·           | \$          | 107,031     |                      |  |   |   |
| 000  | h              | Total. Add line   |                          | "           | •           |             | 2,926,229            |  |   |   |
| <u> </u>   | <del>  "</del> | Total: / tad iiiic  | .5 14 11                 |             |             | Busn. Code  | 2,323,223            |  |   |   |
| Program Service Revenue Contributions, Gifts, Grants | 2a             | FNUTDON   | MENTAL C SAUT            | יייע פיזי   | ure.        | 541700      | 404,986              |  | 404,986                                 |   |
|  | _b             | b convention  |                          | 1 1 1 1 1 1 | 229,030     |             | 101,500              | 229,030                                |   |   |
|  | C              |   |                          |             | 511190      |             |                      | 100,378                                | 223,030                                 |   |
| ē  | d              | SEMINARS  | 2                        |             |             |             | 85,485               |  | 200,570                                 | 85,485  |
| S  | e              |   | CES SERVICE              |             |             | 524298      |                      |  | 83,233                                  | 007100  |
| ga   | f              |   |                          | 1110        |             |             | 58,603               | _                                      | 33,233                                  | 58,603  |
| P<br>5   |                | f All other program service revenue g Total. Add lines 2a–2f                |                          |             |             | <b></b>     | 961,715              |  |   | 30,003  |
|  | 3              |   |                          | ıvıdend     | ds interes  |             | 3027,23              |  |   |   |
|  |                | Investment income (including dividends, interest and other similar amounts) |                          |             |             | ·"          | 22,089               |  |   | 22,089  |
|  | 4              |   | vestment of tax-         | exemn       | t bond pr   | oceeds 🕨    |                      |  |   |   |
|  | 5              | Royalties   |                          |             | <b>•</b>    |             |                      |  |   |   |
|  |                | 1.0,2   | (ı) Real                 |             | (n) l       | Personal    |                      |  |   |   |
|  | 6a             | Gross rents   |                          |             | ,,          |             |                      |  |   |   |
|  | b              | Less rental exps  |                          |             |             |             |                      |  |   |   |
|  | c              | Rental inc or (loss)  |                          |             |             |             |                      |  |   |   |
|  | ď              | Net rental inco   | me or (loss)             |             |             | <b>•</b>    |                      |  |   |   |
|  | 7a             | Gross amount from   | (i) Secunties            |             | (11)        | ) Other     |                      |  |   |   |
|  |                | sales of assets<br>other than inventory                                     |                          |             |             | -           |                      |  |   |   |
|  | ь              | Less cost or other  |                          |             |             |             |                      |  |   |   |
|  | ~              | basis & sales exps  |                          |             |             |             |                      |  |   |   |
|  | c              | Gain or (loss)  |                          |             |             |             |                      |  |   |   |
|  | d              | Net gain or (los  | ss)                      |             |             | <b>•</b>    |                      |  |   |   |
| 4  | 8a             | •   | m fundraising even       | ts          |             |             |                      |  |   |   |
| nue  |                | (not including \$   | ·                        |             |             |             |                      |  |   |   |
| eve  |                |   | eported on line 1c)      |             |             |             |                      |  |   |   |
| Other Revel  |                | See Part IV, line   |                          | а           |             |             |                      |  |   |   |
| the  | b              | Less direct ex  |                          | b           |             |             |                      |  |   |   |
| 0  | С              | Net income or   | (loss) from fundr        | aising `    | events      | <b>•</b>    |                      |  |   |   |
|  | 9a             | Gross income fro  | m gaming activities      | · [         |             |             |                      |  |   |   |
|  |                | See Part IV, line   | 19                       | а           |             |             |                      |  |   |   |
|  | b              | Less direct ex  | penses                   | ь           |             |             |                      |  |   |   |
|  | С              | Net income or   | (loss) from gamı         | ng acti     | vities      | <b>&gt;</b> |                      |  |   |   |
|  | 10a            | Gross sales of  | inventory, less          |             |             |             |                      | _                                      |   |   |
|  |                | returns and allo  | owances                  | а           |             |             |                      |  |   |   |
|  | b              | Less cost of go   | oods sold                | b           |             |             |                      |  |   |   |
|  | C              | Net income or   | (loss) from sales        | of inve     | entory      | <b>•</b>    |                      | _                                      |   |   |
|  |                | Misc  | cellaneous Revenue       |             |             | Busn Code   |                      |  |   |   |
|  | 11a            |   |                          |             | <del></del> |             |                      |  |   |   |
|  | b              |   |                          |             |             |             |                      | -                                      |   |   |
|  | С              |   |                          |             |             |             |                      |  |   |   |
|  | d              | All other revenu  | ue                       |             |             |             |                      |  |   |   |
|  | е              | Total. Add line   | s 11a–11d                |             |             | ▶           |                      |  |   |   |
|  | 12_            | Total revenue   | . See instruction        | s           |             | <b>•</b>    | 3,910,033            | 0                                      | 588,597                                 | 395,207   |

### Part IX Statement of Functional Expenses

Form 990 (2011)

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)

|          | red to complete columns (B), (C), and (D)  Check if Schedule O contains a response t           | o any question in this Part IX | ·                        |                                    |                                       |
|----------|--|--------------------------------|--------------------------|------------------------------------|---------------------------------------|
| Do       | not include amounts reported on lines 6b,  | (A)                            | (B)                      | (C)                                | (D)<br>Fundraising                    |
|          | , 8b, 9b, and 10b of Part VIII.  | Total expenses                 | Program service expenses | Management and<br>general expenses | Fundraising<br>expenses               |
| 1        | Grants and other assistance to governments and   |                                |                          |                                    |                                       |
|          | organizations in the U.S. See Part IV, line 21   |                                |                          |                                    |                                       |
| 2        | Grants and other assistance to individuals in  |                                |                          | -                                  |                                       |
|          | the U.S. See Part IV, line 22  |                                |                          |                                    |                                       |
| 3        | Grants and other assistance to governments,  |                                |                          |                                    |                                       |
|          | organizations, and individuals outside the   |                                |                          |                                    |                                       |
|          | U.S. See Part IV, lines 15 and 16  |                                |                          |                                    |                                       |
| 4        | Benefits paid to or for members  |                                |                          |                                    |                                       |
| 5        | Compensation of current officers, directors,   |                                |                          |                                    |                                       |
|          | trustees, and key employees  | 351,229                        | 351,229                  |                                    |                                       |
| 6        | Compensation not included above, to disqualified   |                                |                          |                                    |                                       |
|          | persons (as defined under section 4958(f)(1)) and  |                                |                          |                                    |                                       |
|          | persons described in section 4958(c)(3)(B)   |                                |                          |                                    |                                       |
| 7        | Other salaries and wages   | 667,807                        | 667,807                  |                                    | ,                                     |
| 8        | Pension plan accruals and contributions (include   | 104 070                        |                          |                                    |                                       |
|          | section 401(k) and 403(b) employer contributions)  | 104,259                        | 104,259                  |                                    | ·····                                 |
| 9        | Other employee benefits  | 152,332                        | 152,332                  |                                    |                                       |
| 10       | Payroll taxes  | 72,616                         | 72,616                   |                                    |                                       |
| 11       | Fees for services (non-employees)  |                                |                          | i                                  |                                       |
| a        | Management   | 705                            | 705                      |                                    |                                       |
| b        | Legal  | 785                            | 785                      |                                    |                                       |
| C        | Accounting   | 14,663                         | 14,663                   |                                    |                                       |
| d        | Lobbying   |                                |                          |                                    | <del></del>                           |
| e        | Professional fundraising services See Part IV, line 17   |                                |                          |                                    | · · · · · · · · · · · · · · · · · · · |
| T        | Investment management fees   |                                |                          |                                    |                                       |
| g<br>40  | Other  |                                |                          |                                    |                                       |
| 12       | Advertising and promotion  | 01 007                         | 01 007                   |                                    |                                       |
| 13       | Office expenses  | 91,807                         | 91,807                   |                                    |                                       |
| 14       | Information technology   | 1,025                          | 1,025                    | -                                  |                                       |
| 15       | Royalties  | 80,301                         | 80,301                   |                                    |                                       |
| 16<br>17 | Occupancy<br>Travel  | 160,937                        | 160,937                  |                                    |                                       |
| 18       | F  | 100,557                        | 100,337                  |                                    |                                       |
| 10       | Payments of travel or entertainment expenses for any federal, state, or local public officials |                                |                          |                                    |                                       |
| 19       | Conferences, conventions, and meetings   | 269,625                        | 269,625                  |                                    |                                       |
| 20       | Interest   | 203,023                        | 200,020                  |                                    |                                       |
| 21       | Payments to affiliates   | 703,934                        | 703,934                  |                                    |                                       |
| 22       | Depreciation, depletion, and amortization  | 73,668                         | 73,668                   |                                    | <u> </u>                              |
| 23       | Insurance  | 9,795                          | 9,795                    |                                    |                                       |
| 24       | Other expenses Itemize expenses not covered  |                                |                          |                                    |                                       |
| ~~       | above (List miscellaneous expenses in line 24e If  |                                |                          |                                    |                                       |
|          | line 24e amount exceeds 10% of line 25, column   |                                |                          |                                    |                                       |
|          | (A) amount, list line 24e expenses on Schedule O)  |                                |                          |                                    |                                       |
| а        | MEMBER REBATES   | 302,244                        | 302,244                  |                                    |                                       |
| b        | RESEARCH GRANTS  | 125,218                        | 125,218                  |                                    |                                       |
| c        | ENVIRO SUPPLIES  | 110,562                        | 110,562                  |                                    |                                       |
| d        | GOVERNMENT   | 103,447                        | 103,447                  |                                    |                                       |
| e        | All other expenses   | 273,089                        | 273,089                  |                                    | <del></del>                           |
|          | Total functional expenses Add lines 1 through 24e  | 3,669,343                      | 3,669,343                | 0                                  |                                       |
| 26       | Joint costs. Complete this line only if the  | - / /                          |                          |                                    |                                       |
|          | organization reported in column (B) joint costs  |                                |                          |                                    |                                       |
|          | from a combined educational campaign and fundraising solicitation. Check here ▶ if             |                                |                          |                                    |                                       |
|          | following SOP 98-2 (ASC 958-720)   |                                |                          |                                    |                                       |
| DAA      | <u> </u>   |                                | <del></del>              | <del></del>                        | Form <b>990</b> (201                  |

Form 990 (2011)

Part X **Balance Sheet** (B) (A) Beginning of year End of year 25,004 138,752 Cash-non-interest bearing 1 2,980,164 3,120,405 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 161,133 172,764 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 6 employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net Inventories for sale or use 8 39,783 39,379 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or <u>1,482,013</u> other basis Complete Part VI of Schedule D 10a 1,095,285 321,409 386,728 10b 10c b Less accumulated depreciation 8,560 11 11 Investments—publicly traded securities 12 12 Investments—other securities See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 14 14 Intangible assets 198,640 289,296 Other assets See Part IV, line 11 15 15 3,734,693 4,151,057 16 Total assets. Add lines 1 through 15 (must equal line 34) 53,704 91,109 17 Accounts payable and accrued expenses 17 18 Grants payable 18 329,154 418,584 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 517,755 566,594 25 of Schedule D 1,076,287 900,613 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ X 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 2,834,080 3,074,770 32 32 Retained earnings, endowment, accumulated income, or other funds 2,834,080 3,074,770 33 Total net assets or fund balances 3,734,693 4,151,057 Total liabilities and net assets/fund balances 34

Form 990 (2011)

| orn | 1 990 (2011) TEXAS CATTLE FEEDERS ASSOCIATION 75-1244584  |     |            | Pa <sup>e</sup> | <u>ge 12</u> |  |  |  |  |
|-----|---|-----|------------|-----------------|--------------|--|--|--|--|
| Pa  | art XI Reconciliation of Net Assets   |     |            |                 |              |  |  |  |  |
|     | Check if Schedule O contains a response to any question in this Part XI                                       |     |            |                 |              |  |  |  |  |
|     |   | 1 1 |            |                 |              |  |  |  |  |
| 1   | Total revenue (must equal Part VIII, column (A), line 12)   | 1   | 3,9<br>3,6 |                 |              |  |  |  |  |
| 2   | Total expenses (must equal Part IX, column (A), line 25)  |     |            |                 |              |  |  |  |  |
| 3   | Revenue less expenses Subtract line 2 from line 1   | 3   |            |                 | <u>690</u>   |  |  |  |  |
| 4   | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                     | 4   | 2,8        | 34,             | 080          |  |  |  |  |
| 5   | Other changes in net assets or fund balances (explain in Schedule O)  | 5   |            |                 |              |  |  |  |  |
| 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   | 3,0        | 74,             | <u>770</u>   |  |  |  |  |
| Pa  | art XII 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   |     |            |                 |              |  |  |  |  |
|     | If the organization changed its method of accounting from a prior year or checked "Other," explain in         |     |            |                 |              |  |  |  |  |
|     | Schedule O  |     |            |                 |              |  |  |  |  |
| 2a  | Were the organization's financial statements compiled or reviewed by an independent accountant?               | 1   | 2a         |                 | Х            |  |  |  |  |
| b   | Were the organization's financial statements audited by an independent accountant?                            |     | 2b         | Х               |              |  |  |  |  |
| С   | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight   |     |            |                 |              |  |  |  |  |
|     | of the audit, review, or compilation of its financial statements and selection of an independent accountant?  |     | 2c         | 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   |     |            |                 |              |  |  |  |  |
|     | issued on a separate basis, consolidated basis, or both   |     |            |                 |              |  |  |  |  |
|     | X Separate basis Consolidated basis Both consolidated and separate basis                                      |     |            |                 |              |  |  |  |  |
| 3a  | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in   |     |            |                 |              |  |  |  |  |
|     | the Single Audit Act and OMB Circular A-133?  |     | 3a         |                 | x            |  |  |  |  |
| b   | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the  |     | 1.0        |                 |              |  |  |  |  |
| _   | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits       |     | 3b         |                 |              |  |  |  |  |

Form 990 (2011)

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

## **Political Campaign and Lobbying Activities**

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.

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

► 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 35c (Proxy Tax), then

| Nan | e of organization   |                                    |                       | Employer identificati   |  |  |  |  |  |  |
|-----|---|------------------------------------|-----------------------|-------------------------|--|--|--|--|--|--|
|     | TEXAS CATTLE FEEDERS  |                                    |                       | 75-12445                |  |  |  |  |  |  |
| Pa  | t I-A Complete if the organization is exem  | pt under section 501(c)            | or is a section 5     | 27 organization         | n  |  |  |  |  |  |
| 1   | Provide a description of the organization's direct and indirect   | political campaign activities in F | Part IV               |                         |  |  |  |  |  |  |
| 2   | Political expenditures  |                                    |                       | ▶ \$                    |  |  |  |  |  |  |
| 3   | Volunteer hours   |                                    |                       |                         |  |  |  |  |  |  |
|     |   |                                    |                       |                         |  |  |  |  |  |  |
| Pa  | t I-B Complete if the organization is exem  | pt under section 501(c)            | (3).                  |                         |  |  |  |  |  |  |
| 1   | Enter the amount of any excise tax incurred by the organization   | ion under section 4955             |                       | ▶ \$                    |  |  |  |  |  |  |
| 2   | Enter the amount of any excise tax incurred by organization in  | managers under section 4955        |                       | <b>▶</b> \$             |  |  |  |  |  |  |
| 3   | If the organization incurred a section 4955 tax, did it file Form   | n 4720 for this year?              |                       |                         | Yes No   |  |  |  |  |  |
| 4a  | Was a correction made?  |                                    |                       |                         | Yes No   |  |  |  |  |  |
| b   | If "Yes," describe in Part IV   |                                    |                       |                         |  |  |  |  |  |  |
| Pa  | t I-C Complete if the organization is exem  | pt under section 501(c)            | , except section      | 501(c)(3).              |  |  |  |  |  |  |
| 1   | Enter the amount directly expended by the filing organization   | for section 527 exempt function    | 1                     |                         |  |  |  |  |  |  |
|     | activities  |                                    |                       | ▶ \$                    |  |  |  |  |  |  |
| 2   | Enter the amount of the filing organization's funds contributed   | d to other organizations for sect  | on                    |                         |  |  |  |  |  |  |
|     | 527 exempt function activities  |                                    |                       | ▶ \$                    |  |  |  |  |  |  |
| 3   | Total exempt function expenditures Add lines 1 and 2 Enter  | here and on Form 1120-POL,         |                       |                         |  |  |  |  |  |  |
|     | line 17b  |                                    |                       | ▶ \$                    | _  |  |  |  |  |  |
| 4   | Did the filing organization file Form 1120-POL for this year?   |                                    |                       |                         | Yes No   |  |  |  |  |  |
| 5   | Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing  |                                    |                       |                         |  |  |  |  |  |  |
|     | organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter    |                                    |                       |                         |  |  |  |  |  |  |
|     | the amount of political contributions received that were promptly and directly delivered to a separate political organization, such |                                    |                       |                         |  |  |  |  |  |  |
|     | as a separate segregated fund or a political action committee   | e (PAC) If additional space is ne  | eded, provide informa | ation in Part IV        |  |  |  |  |  |  |
|     | (a) Name  | (b) Address                        | (c) EIN               | (d) Amount paid from    | (e) Amount of political                              |  |  |  |  |  |
|     | • •   |                                    |                       | filing organization's   | contributions received and                           |  |  |  |  |  |
|     |   |                                    | f.                    | unds If none, enter -0- | promptly and directly                                |  |  |  |  |  |
|     |   |                                    |                       |                         | delivered to a separate<br>political organization If |  |  |  |  |  |
|     |   |                                    |                       |                         | none, enter -0-                                      |  |  |  |  |  |
| (1) |   |                                    |                       |                         |  |  |  |  |  |  |
|     |   |                                    |                       |                         |  |  |  |  |  |  |
| (2) |   |                                    |                       |                         | · · -  |  |  |  |  |  |
|     |   |                                    |                       |                         |  |  |  |  |  |  |
| (3) |   |                                    |                       |                         |  |  |  |  |  |  |
|     |   |                                    |                       |                         | - <del></del>  |  |  |  |  |  |
| (4) |   |                                    |                       |                         |  |  |  |  |  |  |
|     |   |                                    |                       |                         |  |  |  |  |  |  |
| (5) |   |                                    |                       |                         |  |  |  |  |  |  |
|     |   |                                    |                       |                         |  |  |  |  |  |  |
| (6) |   |                                    |                       |                         |  |  |  |  |  |  |
|     |   |                                    |                       |                         |  |  |  |  |  |  |
| n-  |   |                                    |                       |                         |  |  |  |  |  |  |

| Schedule C  | (Form 990 or 990-EZ) 2011 <b>TEXAS</b>  | CATTLE FEE                | EDERS ASSOCI              | TATION       | 7       | 75-1244584          | Page 2         |
|-------------|---|---------------------------|---------------------------|--------------|---------|---------------------|----------------|
| Part II     | I-A Complete if the organ   | ization is exemp          | t under section 5         | 01(c)(3) and | filed   | Form 5768 (elec     |                |
| A Che       | section 501(h)).  eck if the filing organization name, address, EIN eck if the filing organization. | , expenses, and s         | hare of excess lob        | bying exper  | nditure | es)                 | ıp member's    |
|             |   | bbying Expendit           |                           | TO PIOVISIO  | ns app  | (a) Filing          | (b) Affiliated |
|             | (The term "expenditures"  |                           |                           |              | or      | ganization's totals | group totals   |
| 1a To       | ital lobbying expenditures to influence po  |                           |                           |              |         |                     |                |
|             | tal lobbying expenditures to influence a  |                           |                           |              |         |                     |                |
| c To        | tal lobbying expenditures (add lines 1a   | and 1b)                   |                           |              |         |                     |                |
| d Ot        | her exempt purpose expenditures   |                           |                           |              |         | ·                   |                |
| e To        | tal exempt purpose expenditures (add li   | nes 1c and 1d)            |                           |              |         |                     |                |
|             | bbying nontaxable amount Enter the ar lumns   | nount from the followin   | ig table in both          |              |         |                     |                |
| If ti       | he amount on line 1e, column (a) or (b) is:   | The lobbying nontaxab     | ole amount is,            |              |         |                     |                |
| Not         | over \$500,000  | 20% of the amount on lin  | ne 1e                     |              |         |                     |                |
| Ove         | er \$500,000 but not over \$1,000,000   | \$100,000 plus 15% of the | e excess over \$500,000   |              |         |                     |                |
| Ove         | er \$1,000,000 but not over \$1,500,000   | \$175,000 plus 10% of the | e excess over \$1,000,000 |              |         | į.                  |                |
| Oye         | er \$1,500,000 but not over \$17,000,000  |                           |                           |              |         |                     |                |
| Ove         | er \$17,000,000   | \$1,000,000               |                           |              |         |                     |                |
| <b>g</b> Gr | assroots nontaxable amount (enter 25%   | of line 1f)               |                           |              |         |                     |                |
| h Su        | btract line 1g from line 1a If zero or less   |                           |                           |              |         |                     |                |
| i Su        | btract line 1f from line 1c If zero or less   | , enter -0-               |                           |              |         |                     |                |
| jlft        | here is an amount other than zero on ei   | her line 1h or line 1i, d | lid the organization file | Form 4720    |         |                     |                |
| rep         | porting section 4911 tax for this year?   |                           |                           |              |         |                     | Yes No         |
|             |   |                           | ng Period Under           |              |         |                     |                |
|             | (Some organizations th  |                           |                           |              |         | -                   | e tive         |
|             | columns be  | low. See the ins          | tructions for line        | s 2a throug  | h 2f o  | n page 4.)          |                |
|             | Lob   | bying Expenditu           | res During 4-Yea          | r Averaging  | Perio   | od                  |                |
|             | Calendar year (or fiscal year beginning in)   | (a) 2008                  | <b>(b)</b> 2009           | (c) 201      | 0       | (d) 2011            | (e) Total      |
| 2a Lol      | bbying nontaxable amount  |                           |                           |              |         |                     |                |
|             | bbying ceiling amount<br>50% of line 2a, column(e))   |                           |                           |              |         |                     |                |
| c To        | tal lobbying expenditures   |                           |                           |              |         |                     |                |
| d Gra       | assroots nontaxable amount  |                           |                           |              |         |                     |                |
|             | assroots ceiling amount<br>60% of line 2d, column (e))  |                           |                           |              |         |                     |                |

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

| Pa | ort II-B Complete if the organization is exempt under section 501(c)(3) and has I (election under section 501(h)).   | NOT filed F | orm 57 | 768    |
|----|--|-------------|--------|--------|
|    |  | (a          | 1)     | (b)    |
|    | each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description ne lobbying activity   | Yes         | No     | Amount |
| 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 |             |        |        |
| а  | Volunteers?  |             |        |        |
| b  | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?   |             |        |        |
| С  | Media advertisements?  |             |        |        |
| d  | Mailings to members, legislators, or the public?   |             |        |        |
| е  | Publications, or published or broadcast statements?  |             |        |        |
| f  | Grants to other organizations for lobbying purposes?   |             |        |        |
| g  | Direct contact with legislators, their staffs, government officials, or a legislative body?  |             |        |        |
| h  | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  |             | 1      |        |
| i  | i Other activities?  |             |        |        |
| j  | j Total Add lines 1c through 1i  |             |        |        |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  |             |        |        |
|    | If "Yes," enter the amount of any tax incurred under section 4912  |             |        |        |
| С  | If "Yes," enter the amount of any tax incurred by organization managers under section 4912   |             |        |        |
| d  | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?   | 1           |        |        |

# Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

|    |   |   | Yes | No |
|----|---|---|-----|----|
| 1  | 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?                 | 2 |     | X  |
| _3 | Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3 |     | X  |

# Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) if Part III-A, line 3, is answered "Yes."

| 7 | Dues, assessments and similar amounts from members   |    | 2,616,391 |
|---|--|----|-----------|
| 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).                                       |    |           |
| а | Current year   | 2a | 180,399   |
| b | Carryover from last year   | 2b |           |
| С | Total  | 2c | 180,399   |
| 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     |    |           |
|   | excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying |    |           |
|   | and political expenditure next year?   | 4  |           |
| 5 | Taxable amount of lobbying and political expenditures (see instructions)                             | 5  | 180,399   |

Part IV Supplemental Information

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

1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2011 TEXAS CATTLE FE

Schedule C (Form 990 or 990-EZ) 2011

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number TEXAS CATTLE FEEDERS ASSOCIATION 75-1244584 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

| <u>Sche</u> | edule D (Form 990) 2011 TEXAS CA  | TTLE FEEDE              | RS AS      | SSOCIATI         | ON              | 75-12           | 44584         |          |               | Page 2   |
|-------------|---|-------------------------|------------|------------------|-----------------|-----------------|---------------|----------|---------------|----------|
| Pa          | art III Organizations Maintainin  | g Collections of        | Art, H     | istorical Tr     | easures, o      | or Other S      | Similar As    | sets     | (continued    |          |
| 3           | Using the organization's acquisition, accessi collection items (check all that apply) | on, and other records   | , check a  | ny of the follow | ring that are a | a significant u | ise of its    |          |               |          |
| а           | Public exhibition   | d i                     | Loan or    | exchange prog    | grams           |                 |               |          |               |          |
| b           | Scholarly research  | e i                     | Other      |                  |                 |                 |               |          |               |          |
| С           | Preservation for future generations   | -                       |            |                  |                 |                 |               |          |               |          |
| 4           | Provide a description of the organization's co  | ollections and explain  | how they   | further the org  | anization's e   | xempt purpos    | se in Part    |          |               |          |
|             | XIV   | •                       | ,          |                  |                 |                 |               |          |               |          |
| 5           | During the year, did the organization solicit o                                       | r receive donations of  | art, histo | orical treasures | , or other sim  | nılar           |               |          |               |          |
|             | assets to be sold to raise funds rather than to                                       | o be maintained as pa   | irt of the | organization's o | collection?     |                 |               |          | Yes           | No       |
| Pa          | art IV Escrow and Custodial Ar  | rangements. Co          | mplete     | ıf the organ     | ization an      | swered "Ye      | es" to For    | m 990    | , Part IV,    |          |
|             | line 9, or reported an amou   | int on Form 990,        | Part X,    | line 21          |                 |                 |               |          |               |          |
| 1a          | Is the organization an agent, trustee, custodi  | an or other intermedia  | ary for co | ntributions or o | ther assets n   | not             |               |          |               |          |
|             | included on Form 990, Part X?   |                         |            |                  |                 |                 |               |          | Yes           | No       |
| b           | If "Yes," explain the arrangement in Part XIV   | and complete the foll   | owing tab  | ole              |                 |                 |               |          |               |          |
|             |   |                         |            |                  |                 |                 |               | <u> </u> | Amount        |          |
| С           | Beginning balance   |                         |            |                  |                 |                 | 1c            | l        |               |          |
| d           | Additions during the year   |                         |            |                  |                 |                 | 1d            |          |               |          |
| е           | Distributions during the year   |                         |            |                  |                 |                 | 1e            |          |               |          |
| f           |   |                         |            |                  |                 |                 | 1f            |          |               |          |
| 2a          | Did the organization include an amount on Fe  | orm 990, Part X, line 2 | 21?        |                  |                 |                 |               |          | Yes           | No       |
| b           | If "Yes," explain the arrangement in Part XIV   |                         |            |                  |                 |                 |               |          |               |          |
| Pa          | art V Endowment Funds. Comp   | olete if the organi     | zation a   | answered "Y      | 'es" to For     | m 990, Pa       | rt IV, line   | 10       |               |          |
|             |   | (a) Current year        | (          | b) Pnor year     | (c) Two yea     | ars back        | (d) Three yea | rs back  | (e) Four yea  | ars back |
| 1a          | Beginning of year balance   |                         |            |                  |                 |                 |               |          |               |          |
| b           | Contributions   | •                       |            |                  |                 |                 |               |          |               |          |
| c           | Net investment earnings, gains, and   |                         |            |                  | f               |                 |               |          |               |          |
|             | losses  |                         |            |                  | ļ               |                 |               |          |               |          |
| d           | Grants or scholarships  |                         |            |                  |                 |                 |               |          |               |          |
| е           | Other expenditures for facilities and   |                         |            |                  |                 |                 |               |          |               |          |
|             | programs  |                         |            |                  |                 | 1               |               |          |               |          |
| f           | Administrative expenses   |                         |            |                  |                 |                 |               |          |               |          |
|             |   |                         |            |                  |                 |                 |               |          | 1             |          |
| 2           | Provide the estimated percentage of the curr  | ent vear end balance    | (line 1a.  | column (a)) he   | ld as           | ···             |               |          | <del></del>   |          |
| а           | Board designated or quasi-endowment ▶   | %                       | (          | (-,,             |                 |                 |               |          |               |          |
| b           | Permanent endowment ▶ %   |                         |            |                  |                 |                 |               |          |               |          |
| С           | Temporarily restricted endowment ▶  | %                       |            |                  |                 |                 |               |          |               |          |
|             | The percentages in lines 2a, 2b, and 2c shou  | ıld equal 100%          |            |                  |                 |                 |               |          |               |          |
| 3a          | Are there endowment funds not in the posses   | ssion of the organizati | on that a  | re held and ad   | ministered fo   | r the           |               |          |               |          |
|             | organization by   | -                       |            |                  |                 |                 |               |          | Ye            | s No     |
|             | (i) unrelated organizations   |                         |            |                  |                 |                 |               |          | 3a(i)         |          |
|             | (ii) related organizations  |                         |            |                  |                 |                 |               |          | 3a(ii)        |          |
| b           | If "Yes" to 3a(ii), are the related organizations                                     | s listed as required on | Schedul    | e R?             |                 |                 |               |          | 3b            |          |
| 4           | Describe in Part XIV the intended uses of the   | organization's endov    | vment fur  | nds              |                 |                 |               |          |               |          |
| Pa          | rt VI Land, Buildings, and Equ  | ipment. See For         | m 990,     | Part X, line     | 10              |                 |               |          |               |          |
|             | Description of property   | (a) Cost or other       |            | (b) Cost or o    |                 | (c) Acci        | umulated      |          | (d) Book valu | е        |
|             |   | (investment)            |            | (othe            | er)             | depre           | eciation      |          |               |          |
| 1a          | Land  |                         |            |                  |                 |                 |               |          |               |          |
| b           | Buildings   |                         |            | 8                | 91,060          |                 | 638,06        | 4        | 252           | ,996     |
| c           | Leasehold improvements  |                         |            |                  |                 |                 |               |          |               |          |
| d           | Equipment   |                         |            | 5                | 90,953          |                 | 457,22        | 1        | 133           | ,732     |
| е           | Other   |                         |            |                  |                 |                 |               |          |               |          |

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) )

▶

386,728

DEFERRED COMPENSATION 51,579 (5) 23,975 TRADE ASSN. OKLAHOMA REBATE (6) 15,240 (7) ACCRUED PROPERTY TAXES TRADE ASSN. NEW MEXICO REBATE 5,565 EDUCATION FOUNDATION PAYBACK (9) (10)(11)566,594

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

<sup>2.</sup> 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)

|           | dule D (Form 990) 2011 TEXAS CATTLE FEEDERS ASSOCIAT   |        | 75-124458                    |             | Page 4      |
|-----------|--|--------|------------------------------|-------------|-------------|
| _Pa       | art XI Reconciliation of Change in Net Assets from Form 990 to                                       | Audit  | ed Financial Stateme         | <u>ents</u> |             |
| 1         | Total revenue (Form 990, Part VIII, column (A), line 12)   |        |                              | 1           | 3,910,033   |
| 2         | Total expenses (Form 990, Part IX, column (A), line 25)  |        |                              | 2           | 3,669,343   |
| . 3       | Excess or (deficit) for the year Subtract line 2 from line 1   |        |                              | 3           | 240,690     |
| 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_          |             |
| <u>10</u> | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9             |        |                              | 10_         | 240,690     |
| _Pa       | irt XII Reconciliation of Revenue per Audited Financial Statemer                                     | nts W  | ith Revenue per Reti         | ırn         |             |
| 1         | Total revenue, gains, and other support per audited financial statements                             |        |                              | _1_         | 3,324,173   |
| 2         | Amounts included on line 1 but not on Form 990, Part VIII, line 12                                   |        |                              |             |             |
| а         | Net unrealized gains on investments  | 2a     |                              |             |             |
| b         | Donated services and use of facilities   | 2b     |                              |             |             |
| C         | Recoveries of prior year grants  | 2c     |                              |             |             |
| d         | Other (Describe in Part XIV)   | 2d     |                              |             |             |
| е         | Add lines 2a through 2d  |        |                              | 2e          |             |
| 3         | Subtract line 2e from line 1   |        |                              | 3           | 3,324,173   |
| 4         | Amounts included on Form 990, Part VIII, line 12, but not on line 1:                                 |        |                              |             | <del></del> |
| а         | Investment expenses not included on Form 990, Part VIII, line 7b                                     | 4a     |                              |             |             |
| b         | Other (Describe in Part XIV)   | 4b     | 585,860                      |             |             |
| С         | Add lines 4a and 4b  |        |                              | 4c          | 585,860     |
| 5         | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)                        |        |                              | 5           | 3,910,033   |
| Pa        | rt XIII Reconciliation of Expenses per Audited Financial Stateme                                     | ents V | Vith Expenses per R          | eturr       | )           |
| 1         | Total expenses and losses per audited financial statements   |        | -                            | 1           | 3,083,483   |
| 2         | Amounts included on line 1 but not on Form 990, Part IX, line 25                                     |        |                              |             |             |
| 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           | 3,083,483   |
| 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     |                              |             |             |
|           | Other (Describe in Part XIV )  | 4b     | 585,860                      |             |             |
|           | Add lines 4a and 4b  |        |                              | 4c          | 585,860     |
| 5         | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)                       |        |                              | 5           | 3,669,343   |
|           | rt XIV Supplemental Information  | 1 11   | 1                            |             |             |
|           | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines | 1a and | 4, Part IV, lines 1b and 2b. |             | <del></del> |
|           | /, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and   |        |                              |             |             |
| any a     | dditional information  |        | , , ,                        |             |             |
| -         | ART XI, LINE 8 - RECONCILIATION OF CHANGES -   | - OT   | HER                          |             |             |
|           | ·  |        |                              |             | 000 044     |
| M         | EMBER REBATES NETTED AGAINST INCOME  |        | \$                           |             | -302,244    |
| PI        | ROGRAM REVENUE NETTED AGAINST RELATED EXPENS   | SES    | \$                           |             | -283,616    |
| MI        | EMBER REBATES NETTED AGAINST INCOME  |        | \$                           |             | 302,244     |
|           |  |        | •                            |             |             |
| PI        | ROGRAM REVENUE NETTED AGAINST RELATED EXPENS   | SES    | \$                           |             | 283,616     |

PART XII, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER

| Schedule D (Form 990) 2011 | TEXAS CATTLE FEEDERS ASSOCIATION  | N 75-1244584      | Page 5  |
|----------------------------|-----------------------------------|-------------------|---------|
| Part XIV Supplemen         | tal Information (continued)       |                   |         |
| MEMBER REBATES             | NETTED AGAINST INCOME             | \$                | 302,244 |
| PROGRAM REVENU             | E NETTED AGAINST RELATED EXPENSES | \$                | 283,616 |
| PART XIII, LIN             | E 4B - EXPENSE AMOUNTS INCLUDED ( | ON RETURN - OTHER |         |
| MEMBER REBATES             | NETTED AGAINST INCOME             | \$                | 302,244 |
| PROGRAM REVENU             | E NETTED AGAINST RELATED EXPENSES | \$                | 283,616 |

# **SCHEDULE J**

(Form 990)

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OM8 No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

TEXAS CATTLE FEEDERS ASSOCIATION

Employer identification number 75-1244584

| Pa | Part I Questions Regarding Compensation  |         |          |         |
|----|--|---------|----------|---------|
|    |  |         | Yes      | No      |
|    |  |         |          |         |
| 1a | 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form |         |          |         |
|    | 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items        |         |          |         |
|    | First-class or charter travel Housing allowance or residence for person  | nat use |          |         |
|    | Travel for companions Payments for business use of personal res  |         |          |         |
|    | Tax indemnification and gross-up payments  Health or social club dues or initiation fees                             | i i     |          |         |
|    | Discretionary spending account Personal services (e.g., maid, chauffeur, c   |         | ŀ        |         |
|    | Discretionary speciality account   | 1101)   |          |         |
| h  | b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment         |         |          | •       |
| J  |  | ļ       |          |         |
|    | or reimbursement or provision of all of the expenses described above? If "No," complete Part III to                  | 1b      |          |         |
| 2  | explain  | 15      | -        |         |
| 2  |  |         |          |         |
|    | directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?                         |         |          |         |
|    |  |         | 1        |         |
| 3  | , ,,   |         | ļ        |         |
|    | organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a              |         |          |         |
|    | related organization to establish compensation of the CEO/Executive Director. Explain in Part III                    |         |          |         |
|    | Compensation committee Written employment contract   |         |          | i       |
|    | Independent compensation consultant  X Compensation survey or study  |         |          |         |
|    | Form 990 of other organizations  X Approval by the board or compensation co  | mmittee |          |         |
|    |  |         |          |         |
| 4  | During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing         |         |          |         |
|    | organization or a related organization   |         |          |         |
| а  | a Receive a severance payment or change-of-control payment?  | 4a      | <u> </u> | X       |
| þ  | b Participate in, or receive payment from, a supplemental nonqualified retirement plan?                              | _4b     |          | X       |
| С  | c Participate in, or receive payment from, an equity-based compensation arrangement?                                 | 4c      |          | X       |
|    | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III         |         |          |         |
|    |  |         |          |         |
|    | Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.  |         |          |         |
| 5  | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any                 | !       |          |         |
|    | compensation contingent on the revenues of   |         |          |         |
| а  | a The organization?  | 5a      |          | <u></u> |
| b  | b Any related organization?  | 5b      |          |         |
|    | If "Yes" to line 5a or 5b, describe in Part III  |         |          |         |
| 6  | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any                 |         |          |         |
|    | compensation contingent on the net earnings of   |         |          |         |
| а  | a The organization?  | 6a      |          |         |
| b  | b Any related organization?  | 6b      |          |         |
|    | If "Yes" to line 6a or 6b, describe in Part III  |         |          |         |
| 7  |  |         |          |         |
|    | payments not described in lines 5 and 6? If "Yes," describe in Part III  | 7       |          |         |
| 8  |  |         |          |         |
| •  | to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe               |         |          |         |
|    | in Part III  | 8       | -        | 1       |
| 9  |  | -       |          |         |
| •  | Regulations section 53 4958-6(c)?  | 9       |          |         |
|    |  |         |          |         |

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

Schedule J (Form 990) 2011

Page

TEXAS CATTLE FEEDERS ASSOCIATION

Schedule J (Form 990) 2011 Part II

75-1244584

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

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

238,548 160,243 (F) Compensation reported as deferred in prior Form 990 Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual 243,325 164,798 (E) Total of columns (B)(-)(B) 11,914 14,981 (D) Nontaxable benefits 12,000 18,000 (C) Retirement and other deferred compensation 00 (III) Other reportable compensation (B) Breakdown of W-2 and/or 1099-MISC compensation
) Base (II) Bonus & Incentive (III) Oil pensation compensation reportal 00 00 213,411 137,817 (i) Base compensation Ξ ε Ξ Ξ 3 3 3 3 3 Ξ Ξ Œ Ξ (A) Name BEN WEINHEIMER ROSS WILSON 7 뭐

Schedule J (Form 990) 2011

Supplemental Information Part III

Schedule J (Form 990) 2011

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information.

### SCHEDULE O (Form 990 or 990-EZ)

0

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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.

2011
Open to Public Inspection

OMB No 1545-0047

Name of the organization

TEXAS CATTLE FEEDERS ASSOCIATION

Employer identification number 75–1244584

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT
PROGRAM SERVICE CONTRACTING AND ADMINISTERING GROUP
HEALTH INSURANCE FOR MEMBERS
CONDUCTING SEMINARS OF INTEREST TO CATTLE FEEDERS MEMBERS
PROVIDING AUTOMATED MARKET SERVICE TO MEMBERS
PROVIDING ECONOMICAL LONG-DISTANCE SERVICE TO MEMBERS
PROVIDING SAFETY CONSULTATIONS TO MEMBERS
PROVIDING ECONOMICAL WORKMENS' COMPENSATION TO MEMBERS

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS

NEW MEMBERS FOR THE BOARD OF DIRECTORS ARE PROPOSED BY A NOMINATING

COMMITTEE. THEY ARE VOTED ON AT THE ANNUAL CONVENTION. NOMINATIONS FROM THE

FLOOR ARE ALLOWED. OFFICERS ARE ELECTED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS

THERE IS NO FORMAL PROCEDURE FOR MEMBERSHIP APPROVAL OF BOARD ACTIONS.

BOARD MEETINGS ARE OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE
IN THE MEETINGS.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990
THE RETURN WAS EXAMINED AND DISCUSSED BY THE BUDGET AND AUDIT COMMITTEE
AT THE JANUARY 2013 BOARD MEETING. THE PREPARER WAS PRESENT TO ANSWER
QUESTIONS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

Employer identification number 75-1244584

COMPENSATION IS SET BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS.

COMPARABILITY DATA FROM OTHER FORM 990S AND BUSINESS ASSOCIATION EXECUTIVE
SALARY REVIEW WAS CONSULTED.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

COMPENSATION SET BY THE CEO WITH APPROVAL FROM THE EXECUTIVE COMMITTEE

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION DOCUMENTS ARE MADE AVAILABLE ON REQUEST.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ See separate instructions. ▶ Attach to Form 990.

2011 OMB No 1545-0047

Open to Public Inspection

(f) Direct controlling

entity

Employer identification number Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) 75-1244584 (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33 (d) Total income (c)
Legal domicile (state or foreign country) (b) Primary activity TEXAS CATTLE FEEDERS ASSOCIATION (a)Name, address, and EIN of disregarded entity Name of the organization Part II Partl Ξ 2 ල 3 3

| (a) Name, address, and EIN of related organization    | elated organization |            | (b)<br>Primary activity | (c)<br>Legal domicile (state<br>or foreign country) | (d)<br>Exempt Code section | (e) Public chanty status (if section 501(c)(3)) | (f) Direct controlling entity | Section 512(b)(13) controlled entity? Yes No | 2(b)(13)<br>entity?<br>No |
|---|---------------------|------------|-------------------------|---|----------------------------|---|-------------------------------|--|---------------------------|
| (1) TCFA EDUCATION FOUNDATION 5501 I-40 WEST AMARILLO | ON<br>TX 79106      | 75-2440704 | EDUCATION               | ΤX  | 50103                      | 118   | N/A                           |  | ×                         |
| (2)   |                     |            |                         |   |                            |   |                               |  |                           |
| (3)   |                     |            |                         |   |                            |   |                               |  |                           |
| (4)   |                     |            |                         |   |                            |   |                               |  |                           |
| (5)   |                     |            |                         |   |                            |   |                               |  |                           |

Schedule R (Form 990) 2011

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

Part V

Page 3

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36)

| Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule   |                           |                             |                              |         | Yes No   | 9        |
|---|---------------------------|-----------------------------|------------------------------|---------|----------|----------|
| 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?                       | ed organizations listed i | n Parts II–IV?              |                              |         | $\vdash$ |          |
| a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity  |                           |                             |                              | 1a      | _        | ×        |
| b Gift, grant, or capital contribution to related organization(s)   |                           |                             |                              | 1b      | _        | <u></u>  |
| c Gift, grant, or capital contribution from related organization(s)   |                           |                             |                              | 10      |          | ×        |
| d Loans or loan guarantees to or for related organization(s)  |                           |                             |                              | 1d      | *        | ×        |
| e Loans or loan guarantees by related organization(s)   |                           |                             |                              | 1e      |          | ×        |
| f Sale of assets to related organization(s)   |                           |                             |                              | 16      |          | ×        |
| g Purchase of assets from related organization(s)   |                           |                             |                              | 1g      | _        | ×        |
| h Exchange of assets with related organization(s)   |                           |                             |                              | 4       | _        | ×        |
| i Lease of facilities, equipment, or other assets to related organization(s)  |                           |                             |                              | Ę       |          | ×        |
| j Lease of facilities, equipment, or other assets from related organization(s)  |                           |                             |                              | Ĺ       | ×        | ابر      |
| k Performance of services or membership or fundraising solicitations for related organization(s)  |                           |                             |                              | 4       | ×        |          |
| I Performance of services or membership or fundraising solicitations by related organization(s)   |                           |                             |                              | 1       | ^        | ×        |
| m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)   |                           |                             |                              | 13      | ×        |          |
| n Sharing of paid employees with related organization(s)  |                           |                             |                              | ŧ       | ×        |          |
| o Reimbursement paid to related organization(s) for expenses  |                           |                             |                              | 9       |          | ×        |
| p Reimbursement paid by related organization(s) for expenses  |                           |                             |                              | 4       | ×        | <b>.</b> |
| q Other transfer of cash or property to related organization(s)   |                           |                             |                              | 19      |          | ×        |
| Other transfer of cash or property from related organization(s)   |                           |                             |                              | -       |          | ×        |
| If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds | ine, including covered re | elationships and transactic | on thresholds                |         |          |          |
| (a) Name of other organization  | (b)<br>Transaction        | (c)<br>Amount involved      | (d)<br>Method of determining | ģ       |          |          |
|   | type (a–r)                |                             | amount involved              |         |          |          |
| (1)   |                           |                             |                              |         |          |          |
| (2)   |                           |                             |                              |         |          |          |
| (3)   |                           |                             |                              |         |          |          |
| (4)   |                           |                             |                              | :       |          | - 1      |
| (5)   |                           |                             |                              |         |          |          |
| (9)   |                           |                             |                              |         |          |          |
|   |                           |                             | Schedule R (Form 990) 201    | R (Form | 26 (066  | 5        |

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OCIATION 75-1244584

Schedule R (Form 990) 2011 TEXAS CATTLE FEEDERS ASSOCIATION

Unrelated Organizations Taxable as a Partnership (Complete of the organization answered "Yes" to Form 990, Part IV, line 37) Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

| 1 des | (a) Name, address and EIN of entity | (b) Primary activity | (c) Legal domicile (state or foreign | (d) Predomnant Income (related, unrelated, excluded from tax under section 512-514) |     | thers<br>()  | (f)<br>Share of<br>total income | (g) Share of end-of-year assets | 1 - 5 - 6 | (I) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) | 1     | (k)<br>Percentage<br>ownership |
|---|-------------------------------------|----------------------|--------------------------------------|---|-----|--------------|---------------------------------|---------------------------------|-----------|---|-------|--------------------------------|
|   |                                     |                      |                                      |   | S S | 9            |                                 |                                 | X es      | 0   | X Aes | 0                              |
|   |                                     |                      |                                      |   |     | <u> </u>     |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     |              |                                 |                                 |           |   |       |                                |
|   |                                     |                      |                                      |   |     | <del>-</del> |                                 |                                 |           |   |       |                                |

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Part VII Suppleme

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

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