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**Return of Organization Exempt From Income Tax** 

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

A	For the	2012 cal	endar year, or tax year beginning , and ending	<u>g</u>			
<u>B</u>	Check if a	applicable	C Name of organization WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC	D Employer identi	fication number		
╚	Address	change	Doing Business As	11-3673099			
	Name ch	ange	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone numb	er		
	Initial retu	שו	211 PROGRESS AVENUE	859-336-7741			
	Terminate	ed	City, town or post office, state, and ZIP code				
$\square$	Amended	d return	SPRINGFIELD KY 40069	G Gross receipts \$	466,480		
$\Box$	Application	on pending	F Name and address of principal officer H(a)	Is this a group return for			
_				Are all affiliates included	<b>=</b> =		
	Гах-ехет	int status	501(c)(3) X 501(c) ( 5 ) ◀ (insert no ) 4947(a)(1) or 527	If "No," attach a list (see			
		<u> </u>		`	,		
	Nebsite			Group exemption number	·		
		rganization	X Corporation Trust Association Other ► L Year of fo	ormation 1995 M	State of legal domicile KY		
	art I		mmary				
	1			inization's mission is			
-	1		ttle industry in Washington Co., KY. The organization holds monthly membe				
nc.	1		tion related to the beef industry, manages grant funds for agricultural progra	ms and promotes th	ne beef		
Activities & Governance			at various local events.				
Š	2		his box ▶ If the organization discontinued its operations or disposed of		ts net assets.		
- o5	3		of voting members of the governing body (Part VI, line 1a)		10		
fies	4		of independent voting members of the governing body (Part VI, line 1b).	. 4	10		
£	5		imber of individuals employed in calendar year 2012 (Part V, line 2a)		0		
ď	6		Imber of volunteers (estimate if necessary)	6	35		
	7a		prelated business revenue from Part VIII, column (C), line 12		0		
	<u> </u>	Net unit	elated business taxable income from Form 990-T, line 34		0 Current Year		
	8	Contribi	utions and grants (Part VIII, line 1h) .	684,775			
Jue	9		n service revenue (Part VIII, line 2g)	15,059			
Revenue	10	-	ent income (Part VIII, column (A), lines 3, 4, and 7d)	12,000			
č	11		evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .	1,900			
	12		venue—add lines 8 through 11 (must equal Part VIII, column (A), line 12).	701,746			
	13		and similar amounts paid (Part IX, column (A), Imes 1-3)	594,686			
	14	Benefits	s paid to or for members (Part IX eolymn (A) line 4	C			
á	15	Salaries	, other compensation, employee benefits (Part IX, column (A), lines 5–10).	5,832	2,820		
nse	16a	Profess	ional fundraising fees (Part X, column (A), line 1/16)3 . \vij	į. C	0		
Expenses	b		ndraising expenses (Part IX,\col\umn (Q)\u00e4line 25)				
ш	17	Other e	xpenses (Part IX, column (A), lines 1 ha−11d, 11f=24e)	189,244	125,357		
	18	Total ex	penses. Add lines 13–17 (must equal Part 1X Column A) tine 25) .	789,762			
	19	Revenu	e less expenses. Subtract line 18 from the 12	-88,016			
S.				ginning of Current Year	End of Year		
SSe	g   20		ssets (Part X, line 16)	115,335	<del>                                     </del>		
let A	20 21 22		abilities (Part X, line 26)	445.005	<del></del>		
			ets or fund balances. Subtract line 21 from line 20	115,335	44,548		
	art II		nature Block  ry, I declare that I have examined this return, including accompanying schedules and statements, ar	nd to the best of my know	ledge		
			ect, and complete Declaration of preparer (other than officer) is based on all information of which p				
,			Steve Devic	8-14			
	gn		Signature of officer	Date			
HE	ere						
١			Type or print name and title				
_		Pnr	1 / 1 * ./ 1	Date	PTIN		
Pa		BIC	KL DOWNS Kiele Down	8-/3-/_3 Check self-em	If Dooroeseo		
	epare	r	IN E DOVVINS	561-61	ployed P00295350 1349380		
Us	se Onl	v —	n's name ►RICK L DOWNS, CPA, PSC	FIIIISEIN			
_	<del> </del>		n's address ▶49 BONNIE BLVD, STE 3, SPRINGFIELD, KY 40069	Phone no 859	-336-7590		
Ma	ay the II	RS discu	ss this return with the preparer shown above? (see instructions)		X Yes No		

	990 (2012)		TON COUNTY CALL				11	-3673099	Page <b>2</b>
Pa	rt III		of Program Service			thin Dowl III			
_			nedule O contains a	response to a	any question in	this Part III .	<u> </u>	• • •	<u>· Ll</u>
1			anization's mission:	hoof cattle indi	star in Machinat	on Co. KV			
			ion is to promote the						
2			dertake any significan						
			90-EZ?					Yes	X No
			new services on Sch						
3			ase conducting, or ma					F-1	
					• • • •			. Yes	X No
4			changes on Schedule on's program service		its for each of its	throe lorgest n	roarom conject		l h
-			c)(3) and 501(c)(4) or						
			revenue, if any, for ea			on the amount c	or grants and and	ocations to oth	lC13,
		,	,	, 5					
4a	(Code:	)	(Expenses \$	inclu	ding grants of \$		) (Revenue \$		<del></del>
							•		
	The organ	uzation administ	ters agricultural program	grant funds paid	to members for us	se in improving th	eir beef cattle ope	rations	
	144 paym	ents were made	e from 9 different progra	ms					
4b	(Code:	)	(Expenses \$	inclu	ding grants of \$		) (Revenue \$		)
	The organ	ization sets up i	booths or caters at vario	us events in the	vasnington Co ar	ea serving			
	peer prod	this manner	re 4 events held in 2012	wiere the organ	ization promoted ti	ne beet			
				<b></b>					
4c	(Code:		(Expenses \$	inclu	iding grants of \$		) (Revenue \$	-	
46	•		onthly meetings for its m				) (Revenue \$		)
			the beef industry along						
			s some sponsorships fo						
	supply de					<b></b>			
			• • • • • • • • • • • • • • • • • • • •						
			·						
4d	Other prod	gram services	(Describe in Schedu	ıle O.)		-	·		
	(Expenses	-		grants of \$	0	) (Revenue \$		0)	
4-	T-Aslana	aram assiss				, <del>•</del>		- ,	

Part	V Checklist of Required Schedules			
	•		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	<u> </u>	X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		ł
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,			l
	Part III	5	х	
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		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	<u> </u>		<del>  ^`</del>
-	complete Schedule D, Part III	8		×
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a	-		<del>  ^`</del>
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt	1		
	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		<del>  ^</del>
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		├^
• •	VII, VIII, IX, or X as applicable.			
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete</i>			
a	Schedule D, Part VI	140		
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	11a		X
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
^	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110		<del>  ^</del>
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	440		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	11c		X
u	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	444		
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11d 11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		├^
•	the organization's separate or consolidated infancial statements for the tax year include a roundle that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
120		111		X
124	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	425	•	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	12a	<del></del>	_ X
D		406		l
13	1.0	12b	<b>-</b>	X
	Did the organization maintain an office, employees, or agents outside of the United States?		<u> </u>	X
	· · · · · · · · · · · · · · · · · · ·	14a		Х
D	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 foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	446		
45	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	ļ	X
15	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	145		
4.0		15	<del></del>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	40		
47	·	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	1		
40	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17	<b>├</b>	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
4.0	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	├	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			,.
00	If "Yes," complete Schedule G, Part III	19	<u> </u>	X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	<u> </u>	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	<u></u>

<ul> <li>21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 12 if "Yes," complete Schedule I, Parts I and III.</li> <li>22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III.</li> <li>23 Did the organization aswer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J</li> <li>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 through 24d and complete Schedule I. If "No," go to line 25</li> <li>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</li> <li>c Did the organization and an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>25a 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.</li> <li>b Is the organization 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.</li> <li>26 Was a loan to or by a current or former officer, director, trustee, key employee, disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III.</li> <li>27 Was a loan to or by a current or former officer, director, trustee, to member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV.</li> <li>28 A current</li></ul>		1	Yes	No
<ul> <li>22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.</li> <li>23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J</li> <li>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 through 24d and complete Schedule K. If "No," go to line 25</li> <li>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</li> <li>c Did the organization amantain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</li> <li>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>25a 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.</li> <li>b Is the organization are that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.</li> <li>35a Section 501(c)(3) and 501(c)(4) organization engage in an excess benefit transaction with a disqualified person outstanding as of the end of the organization and usual disqualified person outstanding as of the end of the organization and usual disqualified person outstanding as of the end of the organization is tax year? If "Yes," complete Schedule L, Part II.</li> <li>35a Old and to rive y a current or former officer, director, trustee, key employee, highest compensated employee, disqualified person outstanding as of the end of the organi</li></ul>	ſ			
United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.  2 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J  2 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 through 24d and complete Schedule K. If "No," go to line 25  5 Did the organization minest 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?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a 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.  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-E27 If "Yes," complete Schedule L, Part I.  25 Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part IV Instructions for applicable thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.  A current or former officer, director, trustee, or key employee? If "Yes," complete S	٠	21		_X_
<ul> <li>23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J</li> <li>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 through 24d and complete Schedule K. If "No," go to line 25</li> <li>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</li> <li>c Did the organization amantain an escorw account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</li> <li>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>d State organization and the transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I</li> <li>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.</li> <li>Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III</li> <li>Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, or a family member of any of these persons? If "Yes," complete Schedule L, Part III.</li> <li>Was the organization and party to a business transac</li></ul>		22	νl	
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<ul> <li>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 through 24d and complete Schedule K. If "No," go to line 25</li> <li>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</li> <li>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?</li> <li>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>25a 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.</li> <li>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-E27 If "Yes," complete Schedule L, Part I.</li> <li>26b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III.</li> <li>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 entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.</li> <li>28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV.</li> <li>b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Sch</li></ul>		23		Х
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37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization		36		
	•	_ 50		
VI	.	37		Х
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and				
19? Note. All Form 990 filers are required to complete Schedule O	<u></u> .	38	Х	

Statements Regarding Other IRS Filings and Tax Compliance Part V · Check if Schedule O contains a response to any question in this Part V Yes No Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. 88 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . ol Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns?. 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . . . . . . . 3a За Х If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O . . . . . . . . . . . . 3b At any time during the calendar year, did the organization have an interest in, or a signature or other authority 4a over, a financial account in a foreign country (such as a bank account, securities account, or other financial 4a If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . 5a 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?.... 5b If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 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 as charitable contributions? . . . . . . . Х If "Yes," did the organization include with every solicitation an express statement that such contributions or 6b Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods 7a If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . . Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was 7c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . 7e е 7f 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 8899 as required?... 7g g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? . . . . . . . 8 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? . . . . . . . . . 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations. Enter: 10a Initiation fees and capital contributions included on Part VIII, line 12 . . . . . . . . . . . . . b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . . . 10b Section 501(c)(12) organizations. Enter. Gross income from members or shareholders . . . . . 11a а b Gross income from other sources (Do not net amounts due or paid to other sources Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year . . . . | 12b| 13 Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? . . . . . 13a Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand . . . . . 13c Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

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	90 (2012) WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC  11-36;  t VI  Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response to any question in this Part VI	a "No	)"	ons.
Sect	ion A. Governing Body and Management			<u> </u>
10	Enter the number of voting members of the governing body at the end of the tax year   1a   10	,	Yes	No
ıa	Enter the number of voting members of the governing body at the end of the tax year	4		
	if the governing body delegated broad authority to an executive committee or similar	1		
	committee, explain in Schedule O.			i
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	] .		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	<u>X</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	ļ	_X_
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	1_		.,
	one or more members of the governing body?	7a		<u> </u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7.		v
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	7b		<u> </u>
Ü	the year by the following:		`:	1
а	The governing body?	8a	χ̈́	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.)		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	<u> </u>	_ <u>X</u> _
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	l		
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	<del> </del> -	-
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13	42-		
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b		<u> </u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	120		
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
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?			1
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b	<u> </u>	X
	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	<u> </u>	_ X _
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			
Cont	the organization's exempt status with respect to such arrangements?	16b	l	
	ion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ► NONE		_	
17 1Ω	List the states with which a copy of this Form 990 is required to be filed NONE  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T. (Section 501)	0\(2\-	انظمم	

Section C. L	Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)								
	available for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest								
	policy, and financial statements available to the public during the tax year.								

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► CHERYL MATTINGLY (859) 336-7741

211 PROGRESS AVE, SPRINGFIELD, KY 40069

•			٠.
Form 990 (2012)	WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC	11-3673099	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compen	sated	
	· Employees, and Independent Contractors		
-	Check if Schedule O contains a response to any question in this Part VII	<u>.</u>	
Section'A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete organization's	this table for all persons required to be listed. Report compensation for the calendar year ending stax year	with or within the	
	of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizations), reion. Enter -0- in columns (D), (E), and (F) if no compensation was paid.	egardless of amount	
<ul> <li>List the who received</li> </ul>	of the organization's current key employees, if any. See instructions for definition of "key employ organization's five current highest compensated employees (other than an officer, director, trust reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$1 and any related organizations.	tee, or key employee	<del>)</del> )
	of the organization's <b>former</b> officers, key employees, and highest compensated employees who reportable compensation from the organization and any related organizations.	received more than	
	of the organization's <b>former directors or trustees</b> that received, in the capacity as a former direction of		
	n the following order. individual trustees or directors; institutional trustees; officers; key employee employees; and former such persons	s; highest	

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

				_	C)					
(A) Name and Title	(B) Average hours per	box, office	unles er and	eck s pe d a d	rson	than one than the than the than the than the than the than the the than the	an ee)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Matthew Johnson Director	1.00	Х						0	0	0
(2) Anthony Moore	1.00			-	$\vdash$					
Director		Х						0	0	0
(3) Julie Waits Director	1.00	Х						0	0	0
(4) Patrick Wimsatt	1 00	_		$\vdash$	$\vdash$					
Director		Х						0	0	0
(5) Mike Lewis	1 00									
Director	· · · · · ·	Х						0	0	0
(6) Jeremy Hardin	1.00									1
Director (7)	1.00	X	_			<b>_</b>		0	0	0
(7) Jordan Settles Director	1 00	X						0	0	
(8) Steve Devine	4.00			_	-				<u> </u>	0
President				х				l o	۰ ا	0
(9) Chad Filiatreau	2.00									
Vice-President				Х				l o	о	0
(10) Cheryl Mattingly	4.00									
Secretary/Treasurer				X				2,820	0	0
(11)										•
(12)										
(13)		_		-						
(14)										
<del></del>	<u> </u>	L	Ш.		Ь_	L			l	<u> </u>

	Section A. Officers, Directors, 11	rustees, key Er	прю	yee		<u>na</u> >)	nigh:	est	Compensated	⊏mpioyees (co	ntinue	ea)
	(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unles er and	eck s pe d a d	rson irecti	ha of Highest compensated	an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	com fr orga	(F) ttmated nount of other pensation om the anization d related inizations
(15)												
(16)									!			
(17)												
(18)												
<u>(19)</u>												
(20)						_			· · · · · · · · · · · · · · · · · · ·			·
(21)				ļ ļ								
(22)			ļ									
(23)												· · · · · · · · · · · · · · · · · · ·
(24)												
(25)												·
1b c d	Sub-total  Total from continuation sheets to Part VII,  Total (add lines 1b and 1c).  Total number of individuals (including but not reportable compensation from the organization	Section A	 listed	d ab	ove				2,820 0 2,820 ved more than \$	0		0 0 0
3	Did the organization list any former officer, di employee on line 1a? If "Yes," complete Sche	rector, or truste	e, ke	y en	nplo		e, or h	nigh 	est compensate	ed 	3	Yes No
4	For any individual listed on line 1a, is the sum the organization and related organizations graindividual										4	x
5	Did any person listed on line 1a receive or act for services rendered to the organization? If "									ndıvıdual	5	, 1
Sec	tion B. Independent Contractors	ree, complete	00110	Gun	, , ,	0, 0	ouen j	001	3011	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
1	Complete this table for your five highest compound compensation from the organization. Report of year.											×
	(A) Name and business add	dress							(B) Description of se	rvices	(C Comper	
												0
									<del></del>			0
								<u> </u>			·	0
								-				0 0
2	Total number of independent contractors (inc	_	mited	to t	hos	e li	sted a	abo	ve) who receive	d		

Form 990 (2012)

12 Total revenue. See instructions

Pari	VIII	Statement of Revenue						
		Check if Schedule O contains a response	se to a	any question in t	this Part VIII			<i>.</i>
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	1a 1b 1c 1d 1e	0 2,555 0 0 447,576				
Con	g h	Noncash contributions included in lines 1a-1f:  Total. Add lines 1a-1f	* . ···	▶	450,131			
Revenue	2a b	Harvest Festival & Catering Events	- 1	Business Code 722320	14,842			
Program Service Revenue	c d e		-		0 0 0	•		
Progra	f g	All other program service revenue Total. Add lines 2a–2f			0 14,842			
	3 4 5	Investment income (including dividends, into other similar amounts)  Income from investment of tax-exempt bone Royalties	id pro		7 0 0			
	6a b c	Gross rents	0	(II) Personal		·	-	
	d 7a b	Net rental income or (loss)		(ii) Other	0			
	c d	and sales expenses Gain or (loss)  Net gain or (loss)	0 0	0 0	<u>0</u>			
Other Revenue	8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c) See Part IV, line 18	а	0				
Othe	С	` ,	b [ its.	. ▶	0			
		Gross income from gaming activities  See Part IV, line 19	. a	0				
	С	Net income or (loss) from gaming activities Gross sales of inventory, less returns and allowances		140	0	-		
		Less cost of goods sold	b	0	140			
	11a b	Miscellaneous Revenue Meeting Sponsors		Business Code	1,360			
	c d	All other revenue	·- ·-		0			
	e	Total, Add lines 11a-11d		<b>.</b>	1 360			

466,480

# Part IX Statement of Functional Expenses WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC

	Section	501(e)(3) and 501(c)(4)	organizations must complete all	columns. All other on	ganizations must complete column (	A)
--	---------	-------------------------	---------------------------------	-----------------------	------------------------------------	----

	Check if Schedule O contains a response to any	question in this Pai	rt IX		. 📙
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		·		
	organizations in the United States. See Part IV, line 21	700	700		i
2	Grants and other assistance to individuals in the			Ì	
	United States. See Part IV, line 22	408,391	408,391	İ	
3	Grants and other assistance to governments,	400,001	400,001	<del></del>	
Ū	organizations, and individuals outside the				·
	United States See Part IV, lines 15 and 16	o			!
4	Benefits paid to or for members				
	· · · · · · · · · · · · · · · · · · ·			<del></del>	
5	Compensation of current officers, directors,	0.000		0.000	
	trustees, and key employees	2,820		2,820	·
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		İ		
_	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0			· · <u>• · · · · · · · · · · · · · · · · ·</u>
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	0			
С	Accounting	1,430		1,430	
d	Lobbying [	O			
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column				
_	(A) amount, list line 11g expenses on Schedule O)	o			
12	Advertising and promotion	176	176		
13	Office expenses	584		584	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				*
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	4,950	4,950		
20	Interest	4,930	4,850		
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	
23	. · · · · · · · · · · · · · · · · · · ·	978		978	0
24	Other expenses. Itemize expenses not covered	970		976	
<b>4</b>	above (List miscellaneous expenses in line 24e If	.			1
	line 24e amount exceeds 10% of line 25, column				
		-			
_	(A) amount, list line 24e expenses on Schedule O.)	4.000		4 000	
a	Dues	1,000	465 655	1,000	
D	Return of Grant Funds	105,077	105,077		
C ·	Annual Filing Fee	15		15	··-
ď	Festival, events & other program expenses	11,147	11,147		
	All other expenses	0			
25	Total functional expenses. Add lines 1 through 24e	537,268	530,441	6,827	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)				

		'Check if Schedule O contains a response to any question in this Part X			<u></u> <u>.</u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	110,057	1	39,263
	2	Savings and temporary cash investments	5,278	2	5,285
	3	Pledges and grants receivable, net	0	3_	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.	_		
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
<b>.</b>		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
Assets	_	organizations (see instructions). Complete Part II of Schedule L		6	
\SS	7	Notes and loans receivable, net	0		0
•	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a				
	١.	other basis. Complete Part VI of Schedule D 10a 0			
	b	Less: accumulated depreciation 0	0		0
	11	Investments—publicly traded securities	0		0
	12	Investments—other securities. See Part IV, line 11	. 0		0
	13	Investments—program-related. See Part IV, line 11	0		0
	14	Intangible assets	0		0
	15	Other assets See Part IV, line 11	0		0
-	16 17	Total assets. Add lines 1 through 15 (must equal line 34)	115,335		44,548
	18	Accounts payable and accrued expenses		17	<del></del>
	19	· · · · · · ·		18	
	20	Deferred revenue	·	19	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	-4.	20 21	
s	22	Loans and other payables to current and former officers, directors,		21	1
Liabilities		trustees, key employees, highest compensated employees, and			
<u>=</u>		disqualified persons. Complete Part II of Schedule L	-	22	-
Ë:	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0		0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete			
		Part X of Schedule D	0	25	0
	26	Total liabilities. Add lines 17 through 25	0		0
		Organizations that follow SFAS 117 (ASC 958), check here▶ and			
es		complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27			27	
ä	28	Unrestricted net assets		27	
9	29	Permanently restricted net assets		28 29	
or Fund Balances	23		·	29	
<u> </u>		Organizations that do not follow SFAS 117 (ASC958), check here and			
Š		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds .	115,335		44,548
~	33	Total net assets or fund balances	115,335		44,548
	34	Total liabilities and net assets/fund balances	115 335	7.4	44 548

Form	990 (2012) WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC	11	-3673099	Pa	ge <b>12</b>
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		466	5,480
2	Total expenses (must equal Part IX, column (A), line 25)	2		537	7,268
3	Revenue less expenses. Subtract line 2 from line 1	3		-70	0,788
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		115	5,335
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			1
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
_	column (B))	10		44	1,548
Pari	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990. X Cash 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?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both			,	
	Separate basis Consolidated basis Both consolidated and separate basis			1	l i
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both		,		'
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh	t of		-	
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		. 2c		'
	If the organization changed either its oversight process or selection process during the tax year, explain i	n			
	Schedule O				
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				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		1
			Form	990	(2012)

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

### **Political Campaign and Lobbying Activities**

20**12** 

Quen to Public

Department of the Treasury Internal Revenue Service

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

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

See separate instructions.

Internal Revenue Service See separate instructions. Inspection

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

			•	, ,	- (	,
Nam	e of organization	rganizations Complete Part III			Employe	r identification number
		ITLEMEN ASSOCIATION, INC			Linbioye	11-3673099
		he organization is exempt und	er section 5016	c) or is a section	n 527 o	
1		he organization's direct and indirect				- gamzation.
2						
	Volunteer hours					
D -	-115 0		41			
1 1	rt I-B Complete if t	he organization is exempt und	er section 501(	c)(3).		
2	Enter the amount of any	excise tax incurred by the organizati excise tax incurred by organization in	ion under section	4955	. • •	
3	If the organization incurre	excise tax incurred by organization red a section 4955 tax, did it file Form	managers under s	ar?		
						Yes No
	If "Yes," describe in Part				•	res No
		he organization is exempt und	er section 5016	c), except secti	on 501(	c)(3)
		expended by the filing organization			<u> </u>	<u> </u>
	-			•	. ▶ \$	
2		filing organization's funds contributed				
		unction activities			▶ \$	
3		penditures Add lines 1 and 2 Enter				
					. ▶ \$	0
4		n file Form 1120-POL for this year?				. Yes No
5	Enter the names, addres	ses and employer identification num ents. For each organization listed, e	iber (EIN) of all se	ection 527 politica	l organiza	ations to which the filing
	the amount of political co	ents. For each organization listed, e	ntly and directly d	ald from the filing elivered to a sens	rate nolit	tical organization, such
	as a separate segregate	d fund or a political action committee	e (PAC). If additio	nal space is need	ed, provi	de information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid	from	(e) Amount of political
	(=)	(2) / (33.000	(0) 2	filing organizati	on's	contributions received and
				funds If none, en	ter -0-	promptly and directly delivered to a separate
						political organization If
						none, enter -0-
(1)						
					-	
(2)						
(3)						
					-	
(4)						
(5)						
(6)						

d Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

	WASHINGTON COUNTY CATTLEMEN A edule C (Form 990 or 990-EZ) 2012	ASSOCIATION,	INC		11-3673099	Page 2
Pa	art II-A Complete if the organiza under section 501(h)).	tion is exemp	t under section	501(c)(3) and filed	d Form 5768 (elect	tion
	Check ▶ if the filing organization	belongs to an	affiliated group (a	and list in Part IV e	each affiliated group	member's
	name, address, EIN, ex					THEITIDE S
В	Check ▶ if the filing organization	•		, , ,		
		obbying Expen	<del></del>	The providing ap	<del>i                                    </del>	
	(The term "expenditures"			d)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence		·	<u> </u>		
b	Total lobbying expenditures to influence	•	•	· ·	-	
c	Total lobbying expenditures (add lines 1	-			0	
d						
е	Total exempt purpose expenditures (ad				0	
f	Lobbying nontaxable amount Enter the		•			
	columns		<b>.</b>		o	C
ſ	If the amount on line 1e, column (a) or (b)	is: The lobby	ying nontaxable amo	unt is:		<del></del>
	Not over \$500,000		e amount on line 1e.			
Ĺ	Over \$500,000 but not over \$1,000,000		plus 15% of the exces			
	Over \$1,000,000 but not over \$1,500,000		plus 10% of the exces		}	
}	Over \$1,500,000 but not over \$17,000,000		plus 5% of the excess	over \$1,500,000		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	Over \$17,000,000	\$1,000,00			<u> </u>	
g	Grassroots nontaxable amount (enter 2	•			0	
h :	Subtract line 1g from line 1a. If zero or I				0	
!	Subtract line 1f from line 1c If zero or le				0	
J	If there is an amount other than zero on section 4911 tax for this year?				·	7 v -
	section 4911 tax for this year?	· · · · ·		<u> </u>	· · · · <u>  ·    </u>	Yes No
	(Some organizations that	t made a sectio				
	Lobb	ying Expenditu	res During 4-Year	Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount				0	
	Lobbying ceiling amount (150% of line 2a, column(e))					
_	Total lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2012

0

0

0

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Forr	n 5768		
For e	each "Yes," response to lines 1a through 1ı below, provide in Part IV a detailed description	(;	a)	(	b)	
	e lobbying activity	Yes	No	Am	ount	
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?					
þ	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?			<u> </u>		
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?					
i	Other activities?					
j	Total. Add lines 1c through 1i		3. 4 1			0
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			1 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	السائع	
	If "Yes," enter the amount of any tax incurred under section 4912	4				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.	- 29	43-44			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			The state of	1,20	٤ ر
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	c)(5),	or s	ection		
				,	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		Х
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			. 2	Х	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .			3		Х
	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," (answered "Yes."		) Par		ne 3,	is
1	Dues, assessments and similar amounts from members		1			
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).		2	ĺ		
_			***			
a	Current year	•	2a	ļ		
D	Carryover from last year	•	2b	<del> </del>		
C	Total	•	2c	<del>                                     </del>		0
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	•	3	<del>                                     </del>		
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			1		
	habbadan and add that a second of			į		
_	Tarable assert of labbrary and related a result and the labbrary	•	4	<b></b>		
5 Par		·	5			0
Par	La. 11-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-					
	plete 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, line 2, and Part II-B, line 1. Also, complete this part for any additional information		I-A (a1	Tiliated gi	oup	
	•••••••••••••••••••••••••••••••••••••••					
					<b>-</b>	
		- <b></b>				
		- <b></b>		<b></b>		

WASHINGTON COUNTY CATTL chedule C (Form 990 or 990-EZ) 2012	EMEN ASSOCIATION, INC	11-3673099
Part IV • Supplemental Information	tion (continued)	Page <b>4</b>
Supplemental information	non (communa)	
•••••		
•••••		
•••••		
•••••		

# SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

# Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

General Information on Grants and Assistance

Parti

WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC

Name of the organization

the selection criteria used to award the grants or assistance?

OMB No 1545-0047	2012	Onen to Public
No 154	20	Onen to Pu

11-3673099

Employer identification number

X Yes No

<ol><li>Describe in Part IV the organization's procedures for monitoring the use or grant funds in the United States.</li></ol>	anization's proce	dures for monitoring	g the Use or grant run	ds in the United States			
Part II, Grants and Other Assistance to Governments Part IV, line 21, for any recipient that received mo	Assistance to any recipient the	Governments a	nd Organizations i than \$5,000 Part I	n the United States I can be duplicated i	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	ganization answered needed.	"Yes" to Form 990,
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(9)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.	in 501(c)(3) and	government organi	zations listed in the lir	ne 1 table			O
For Panerwork Reduction Act Notice, see the Instructions for Form 990.	e see the Instruc	tions for Form 990.				SS	Schedule I (Form 990) (2012)
							/=: o+\ / ooo :::: o :\ : o:= o:

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

Page 2

WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC Schedule I (Form 990) (2012) Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, liné 22.
11-3673099

Part III can be duplicated if additional space is needed	ial space is needed				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Annuillural Program_An Oweresty	en en	10,953	0		
2 Agricultural Program-Cattle Handling	24	64,784	0		
3 Agricultural Program-Farm Structure	18	67,131	0		
4 Agricultural Program-Farmland Improvement	29	67,668	0		
5 Agricultural Program-Fencing	27	62,722	0		
6 Agricultural Program-Genetics	37	129,996	0		
7 Agricultural Program-Goat & Sheep Diversification		800	0		
Part IV Supplemental Information. Complete this part to	ete this part to prov	nde the information r	equired in Part I, line	provide the information required in Part I, line 2, Part III, column (b), and any other additional	ind any other additional
information					

Part IV	Supplemental Information. Complete this part to provide the information in Fart i, line 2, Fart ii, Column (5), and any other addition
Part   Line	Part I Line 2 To be eligible for the agricultural program grant funds, an application must be completed which contains the location and
serial numb	serial number for the farm being operated; the Board reviews the application and awards the grant funds; the applicant must attend 2
mandatory.	mandatory meetings providing information about the program, and original receipts for the applicants expenditures must be submitted.

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

**Transactions With Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

20**12** 

Open To Public

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Inspection Employer identification number

WASHING	VASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC									11-3673099							
Part I							ction 501(c)(4) or										
	Complete if the	e organiz	ation an	swered "Y	es" on F	orm 99	0, Part IV, line 25	a or 25b, or Fo	rm 990	0-EZ, F	art V,	line 4	0b				
1	1 (a) Name of disqualified person			(b) R	(b) Relationship between disqualified person			(c) Description of transaction					(d) Cor	rected?			
			_	a	nd organiz		Yes					No					
(1)				_													
(2)		<del></del>		_									ļ				
(3)	<u></u>					<del> </del>											
(4)												_	<u> </u>				
(5)				<del></del>	<del></del>												
(6)		<b>A</b>			-4:					_		_	L				
	nter the amount of nder section 4958		-	_		_		-	-	Γ		•					
										• •		*	-				
<b>3</b> E	nter the amount of	lax, II an	y, on line	2, above	e, reimbu	ii sea by	rine organization	1		• •		⊸—					
Part II	Loans to and	or From	Interest	ted Perso	ns.		<del></del>	· · · · · · · · · · · · · · · · · · ·									
, are n						Form 99	0-EZ, Part V, line	38a or Form 9	90 Pa	rt IV li	ine 26	or if t	he				
	organization re							0000011011110	00, . 0	,	IIIO EO	, 0, ,, ,					
(a) Name	e of interested person	(b) Relati		) Purpose (d) Loan to				(f) Balance due	(a) in	default?	(h) A=	(h) Approved		ntten			
(=)	• • · · · · · · · · · · · · · · · · · ·	with organization		of loan	the organization		1 ' '		(9)		by board or		agreement?				
											comm	nittee?					
					То	From			Yes	No	Yes	No	Yes	No			
(1)																	
(2)																	
(3)																	
(4)																	
(5)																	
(6)																	
(7)						ļ											
(8)																	
(9)							<u> </u>	ļ		<u> </u>							
_(10)					L.,		<u> </u>	l <u>.</u>		<u> </u>			ļ				
Total .	<u> </u>						<u> ▶ \$</u>		<u> </u>		<u> </u>						
Part III	Grants or Ass																
	Complete if the	e organiz	ation an	swered "Y	es" on f	orm 99	0, Part IV, line 27	7.			Υ						
(a) N	Name of interested perso	on		onship betwe		ted (c)	Amount of assistance	(d) Type of a	assistano	ce	(e) F	Purpose	of assist	ance			
				n and the org	anization						ļ						
	Part V - Supplement	tal Informa	ation								ļ	_					
(2)						-											
(3)						<del></del>		ļ			<del></del>						
(4)		<u> </u>				_		<del> </del>			}						
(5)	<del></del>					-+	<del></del>	<del> </del>			-						
(6)								<del> </del>			-						
(8)						-+	· ·				1						
101											1						

(9) (10)

### **SCHEDULE 0** (Form 990 or 990-EZ)

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC	11-3673099						
PART VI							
SECTION A - LINE 6 - The organization has members who pay dues							
SECTION B - LINE 11b - The organization's president reviews the Form 990 before signing and filing							
SECTION C - LINE 19 - The organization's governing documents are available for vie	wing at their office upon request						
PART XI - LINE 9 - Rounding difference							
	•••••						

## Form **8868**

(Rev January 2013)

Department of the Treasury

□Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box . . . . If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Type or Name of exempt organization or other filer, see instructions Employer identification number (EIN) or print WASHINGTON COUNTY CATTLEMEN ASSOCIATION, INC. 11-3673099 File by the Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) due date for 211 PROGRESS AVENUE filing your City, town or post office, state, and ZIP code For a foreign address, see instructions return See instructions SPRINGFIELD KY 40069 01 **Application** Return **Application** Return Is For Code is For Code Form 990 or Form 990-EZ 01 07 Form 990-T (corporation) Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ► CHERYL MATTINGLY Telephone No ► (859) 336-7741 FAX No. ▶ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . . . . . . ▶ . If it is for part of the group, check this box. . . . . . . . . . . . . . . . . . . list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 8/15/2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2012 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 0 3a | \$ If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b 0 Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. 0 Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions