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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2012

Open to Public Inspection

<u>A</u>	For the 2	2012 calendar year, or tax year beginning , and ending			
В	Check if applic	cable C Name of organization	D) Employ	er identification number
	Address chan	ge Iowa Turkey Federation Inc			
\equiv		Doing Business As		42-	0815721
الا	Name change		om/suite E		one number
	nitial return			•	
Ħ.		PO Box 825 535 E Lincoln Way		213	-232-7492
Ш	Terminated	City, town or post office, state, and ZIP code	1		
	Amended retu	m Ames IA 50010-0825	g	Gross rece	ipts \$ 392,626
	Application pe	F Name and address of principal officer	_		—
' لــا	Application pe	Gretta Irwin '	H(a) Is this a grou	p return for a	ffiliates? Yes X No
		272777 . 1172	H(b) Are all affilia	ates included	Yes No
		Ames IA 50010			(see instructions)
					
	Tax-exempt				
J	Website:		H(c) Group exem		
<u>K</u>	Form of orga	Inization X Corporation Trust Association Other ► L Year of	of formation 19	74	M State of legal domicile IA
P	art I	Summary			
	1 Brie	efly describe the organization's mission or most significant activities			
_	1	See Schedule O			
9	1	oce benedite o			
au					
E					
ě	2 Ch	eck this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of i	to not acceta		
<u>ဖိ</u>	i		is riet assets	1 . 1	1 5
•ర	l	mber of voting members of the governing body (Part VI, line 1a)		3	15
Activities & Governance	4 Nu	mber of independent voting members of the governing body (Part VI, line 1b)		4	_15
Z.	5 Tot	tal number of individuals employed in calendar year 2012 (Part V, line 2a)		5	6
.	6 Tot	tal number of volunteers (estimate if necessary)		6	250
⋖	l	•			-377
	1	tal unrelated business revenue from Part VIII, column (C), line 12		7a	
	b Ne	t unrelated business taxable income from Form 990-T, line 34		7b	-377
		<u> </u>	Pnor Year		Current Year
Φ	8 Co	ntributions and grants (Part VIII, line 1h)	· 	0	0
2	9 Pro	ogram service revenue (Part VIII, line 2g)	211	,522	227,713
Revenue	10 Inv	restment income (Part VIII, column (A) lines 3 dam (NOED)		-21	323
2	11 0#	ner revenue (Part VIII, column (A), lines 5, 60, 8c, 9c, 10c, and 11e	44	,604	43,540
	11 011	ler revenue (Fait VIII, column (A), intes 3, ou al-sc, roc, and rie)			
		tal revenue – add lines 8 through 11 (must equal Part XIII polumn (A) line 12)		,105	271,576
	13 Gra	ants and similar amounts paid (Part / 🍪 lufth 🖟 🐧 🕍 1=3) 🐪 💆 /	7	,250	7,750
	14 Bei	nefits paid to or for members (Part IX) Column (A), line 4)		0	0
w		laries, other compensation, employee benefits (Fart) (A), lines 5-10)	123	,567	122,087
Expenses		ofessional fundraising fees (Part IX, column (A) line (1e)		0	0
ē	1	-		-	
봈		tal fundraising expenses (Part IX, column (D), line 25) ▶ 0			
ш	17 Oth	her expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		,058	131,351
	18 Tot	tal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	258	,875	261,188
E	19 Re	venue less expenses Subtract line 18 from line 12	-2	,770	10,388
			ginning of Curre		End of Year
ets	20 Tot	tal assets (Part X, line 16)		,750	439,660
~—√§§ R	1	tal liabilities (Part X, line 26)		,963	4,123
~~\# <u>`</u>	•!	•			
<u></u>		t assets or fund balances Subtract line 21 from line 20	433	,787	435,537
P	art II	Signature Block			
U		ties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and		ny knowled	ige and belief, it is
_ tru	ue, correct,	and complete Declaration of preparer (other than officer) is based on all information of which preparer has any h	knowledge		
ON Signal		CAPTTON THE		T -	8/14/13
E Cic	.n	Signature of officer		Date	011:113
)''	Gretta Irwin, Executive Director			
Z ⊓e	re				
\leq		Type or print name and title			
Ψ	F	Print/Type preparer's name Preparer's signature	Date	Check	rf PTIN
₩2Pai	d , _{, т}	ames Henkel	06/12/1	13 self-em	ployed P00031726
	naror F	Wantania C Barani Hall Marc			42-1017239
	Only		Firr	n's EIN ▶	44-101/239
USE	. U.IIy	817 Keeler St			
		Firm's address Doone, IA 50036	Pho	one no	<u>515-432-8636</u>
May	the IRS	discuss this return with the preparer shown above? (see instructions)			X Yes No
		k Reduction Act Notice, see the separate instructions.			Form 990 (2012)
DAA					500 (2012)

DAA

	Iowa Turkey Fede		42-0815721	Page
	atement of Program Ser		in this Bort III	$\overline{\mathbf{x}}$
	neck if Schedule O contail to the organization's mission	ns a response to any question	in this Part III	
See Sche				
_	· ·	t program services during the year wh	ich were not listed on the	
If "Yes," desc	0 or 990-EZ?		ete any program	Yes X N
services?	ribe these changes on Schedule	ke significant changes in how it condu	icis, any program	Yes X N
Describe the expenses Se	organization's program service a	accomplishments for each of its three ganizations are required to report the		
for the cooperat	educational wor general betterm ion with the Fe	136,844 including grants of k and develop the ent of such industideral and State go of general concer	interest of the tu ry. To provide a vernments and all	rkey industry means of
			•	•
)(Expenses \$ on and Promotion ag of Turkeys.	45,197 including grants of of various ideas		
		,		
c (Code) (Expenses \$	including grants of	\$) (Revo	enue \$
				·
4d Other progra	am services (Describe in Sched	ule O)		
		ncluding grants of \$) (Revenue \$)
(Expenses	*	182,041	/ (

			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>
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	1	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,		ĺ	
	Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
Ū	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	ŀ	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,"			 -
0	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a		$\neg \neg$	 -
9	· · · · · · · · · · · · · · · · · · ·		ŀ	
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or	9		x
40	debt negotiation services? If "Yes," complete Schedule D, Part IV	-		- 22
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	10		x
4.4	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	-10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		ļ	
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	44-	x	
	complete Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	446		X
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	44.	-	X
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			v
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_	Α.
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		v
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40.		x
	Schedule D, Parts XI and XII	12a		
Þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	4.51		v
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	-	X
þ				
	fundraising, business, investment, and program service activities outside the United States, or aggregate			v
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			v
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15_		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			v
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			₹.
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			7.
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

orm	1990 (2012) lowa Turkey rederation inc 42-0815721			age 4
Pa	art 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			
	in the United States on Part IX, column (A), line 12 if "Yes," complete Schedule I, Parts I and II	21	X	
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	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		_X
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	24a	_	_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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	1		
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	ł		
	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	27		_ X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	1		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		_X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	İ		i
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31_		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		[
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	ľ		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36_		ļ
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	1	X

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

Form **990** (2012)

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 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and 1c reportable gaming (gambling) winnings to prize winners? 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 X 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a X 3b b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial X 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 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? X 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a 7b 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 required to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year 7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? h 7h 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 8 organization, have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? 9ь 10 Section 501(c)(7) organizations. Enter 10a Initiation fees and capital contributions included on Part VIII, line 12 а 10b b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources 11b against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 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 13b the organization is licensed to issue qualified health plans 13c c Enter the amount of reserves on hand X 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b

Form	1990 (2012) Iowa Turkey Federation Inc 42-0815721		F	age 6
Pa	Irt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "N	lo"	
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.	ee instr	uctior	าร
	Check if Schedule O contains a response to any question in this Part VI			\mathbf{X}
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 15			
	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			
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		x
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	-		
	one or more members of the governing body?	7a	х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	'a		_
~	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 by the following	76		
	The governing body?		х	
a	Each committee with authority to act on behalf of the governing body?	8a	X	-
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	8b	_	<u> </u>
3				x
Sec	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	9		
<u> </u>	tion b. Folicies (This Section b requests information about policies not required by the internal Revenue C	oue)		
100	Did the ergonization have lead charters bronches or officials?	40	Yes	-
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,			ļ
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	77	<u> </u>
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 conflicts?	12b	X	ļ
С	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	X	
14	Did the organization have a written document retention and destruction policy?	14	X	L
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	
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)			1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			Ì
	with a taxable entity during the year?	16a		X
þ	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 the			1
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
<u>Sec</u>	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ IA			
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 ▶ Gretta Irwin 535 E Lincolnway			
An	nes IA 50010 51	5-23	2-7	492

OIIII 000 (20 12					-	
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) Name and Title	(B) Average hours per week (list any	bo	x, unt	Pos check ess pe	rson	than one is both an or/trustee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Gretta Irwin		1							
	40.00								•
Executive Director	0.00	X			X		65,200	0	0
(2) Tim Doyle					ŀ			13.	
	1.00								
Past President	0.00	X			,		0	0	0
(3) Cal Halstead									
	2.00						_	_	
President	0.00	X	<u> </u>	X	<u> </u>	igsquare	0	0	0
(4) Tim Kasinger			į						
	1.00	l]		_	_
Director	0.00	X	<u> </u>		<u> </u>		0	0	0
(5) Glenn Elzey						[
	1.00		1						
Director	0.00	X	<u> </u>	<u> </u>			0	0	0
(6) Mark Graber	1								
	1.00							_	
Director	0.00	X	<u> </u>	<u> </u>		-	0	0	0
(7)Dana Haahr	1 00						•		
	1.00								
Director	0.00	X	-		<u> </u>	 	0	. 0	0
(8) Todd Hill	1 00								
	1.00	٦,				1	0	_	
Director	0.00	X		-	<u> </u>	 	<u> </u>	0	0
(9) Rich Hogrefe	1 00								
5 .	1.00	x					- 0	0	_
Director	0.00	+^	-		-		<u> </u>	<u> </u>	0
(10)Lynn Schable	1.00								
Dimostan	0.00	x					0	o	o
Director (11) Gerald Lessard	0.00	+~		-	\vdash	+		<u> </u>	
(II)Geraid Lessard	1.00								
Director	0.00	x					0	o	o
Director	1 0.00	12		—	i		<u> </u>	<u> </u>	Form 990 (2012)

Part VII , Section A. Officers	s, Directors, Tru	ıstee	s, K	ey E	mpl	oyee	es, a	and Highest Compensated	i Employees (continued)				
(A)* Name and title	(B) Average hours per week (list any	bo	x, uni	Pos check ess po	erson	than one of the state of the st	an	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		(F) Estimate amount other compens from the	ted t of r sation	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)		organiza and rela organiza	ation ated	
(12)Kim Reis													
-	0.00	.						o	0				0
Director (13)Russ Yoder	0.00	X	 	┢	├	\vdash	-		0				
(13)21433 10431	1.00		ļ										
Director	0.00	X	ㄴ	<u> </u>				0	0	<u> </u>			0
(14) Noel Thompson	2.00												
Vice Pres/Treasurer	0.00	x		$ \mathbf{x} $				0	О	İ			0
(15)Ross Thoreson													<u>-</u> -
Director	1.00	x		1				0	o				0
(16) Craig Pellersel:		1	 	 									
, , , , , , , , , , , , , , , , , , ,	1.00									-			
Director	0.00	X	1	<u> </u>	_	_	ļ	0	0				0
(17)					ļ								
(18)	-	╁	+	-	 	+	 						
(10)													
(19)													
1b Sub-total	<u></u>	•		•				65,200					
c Total from continuation she	eets to Part VII,	Sect	ion	A			•	CF 000					
d Total (add lines 1b and 1c) 2 Total number of individuals (in	cluding but not li	nited	to th	2000	lieto	d abo) Ne)	who received more than \$1		Ĺ			
reportable compensation from			Ö.		11310	u abt						Vaa	N.
3 Did the organization list any for employee on line 1a? If "Yes,"								yee, or highest compensated	d		3	Yes	No X
4 For any individual listed on line organization and related organ									m the		4		x
individualDid any person listed on line 1	a receive or accr	ue c	ompe	ensa	tion t	from	any	unrelated organization or in-	dıvıdual				-
for services rendered to the or		es," c	omp	lete	Sche	edule	J fo	r such person		<u>-</u>	5		X
Section B. Independent Contractor Complete this table for your five compensation from the organic	e highest compe	ensate	ed in	depe	ende	nt co	ntrac	ctors that received more tha	n \$100,000 of				
	(A) d business address	прс	10011	011 10	<i>,</i>	Journe	T		(B)		Co	(C) mpensat	tion
Name as	d business dudiess						T	Возапр	NOT OF SERVICES			трепзас	.ioii
<u> </u>		_					ļ						
							 						
							-						
					. .		-				ļ		
2 Total number of independent received more than \$100,000	contractors (inclu of compensation	ding from	but r	orga	nited iniza	to ti	nose •	e listed above) who	0				
DAA											r	<u> </u>	1201

42-0815721 Iowa Turkey Federation Inc Page **9** Form 990 (2012) Statement of Revenue Part VIII Check if Schedule O contains a response to any question in this Part VIII. (D) Revenue excluded from tax (C) (A) Unrelated Total revenue exempt business under sections 512, 513, or 514 revenue revenue Grants (mounts 1a 1a Federated campaigns 1b b Membership dues 1c c Fundraising events Contributions, Gifts, and Other Similar An 1d d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Program Service Revenue Busn Code 128,383 128,383 2a Council Operating Receipts 35,600 35,600 Allied Investment-Memb. Dues b 29,320 29,320 С Turkey Day Receipts 23,810 23,810 d Summer Meeting Support 9,000 9,000 Marketing Council Rent Rcpts 1,600 1,600 f All other program service revenue 227,713 g Total. Add lines 2a-2f Investment income (including dividends, interest, 323 323 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (II) Personal (ı) Real 6a Gross rents b Less rental exps Rental inc or (loss) \blacktriangleright Net rental income or (loss) Gross amount from (ii) Other (i) Securities sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) 14,800 See Part IV, line 18 15,177 b Less direct expenses b -377 -377 c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses • c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 147,431 а 105,873 b Less cost of goods sold 41,558 41,558 c Net income or (loss) from sales of inventory Busn Code Miscellaneous Revenue 864 864 11a CMN BBQ Receipts 780 780 b MDF Reimbursement 500 500 WEB Link Receipts

215

2,359

271,576

215

230,072

-377

All other revenue

Total. Add lines 11a-11d

Total revenue. See instructions

Form 990 (2012)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) Fundraising (A) (B) (C) Do not include amounts reported on lines 6b. Management and general expenses Total expenses Program service 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and 7,750 7,750 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 79,758 113,230 33,472 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 6,239 8,857 2,618 Payroll taxes Fees for services (non-employees) Management 485 485 b Legal 2,100 2,100 Accounting 15,000 15,000 Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 270 270 (A) amount, list line 11g expenses on Schedule O) 154 154 12 Advertising and promotion 7,745 9,905 2,160 13 Office expenses 4,318 4,318 14 Information technology 15 Royalties 7,684 3,842 3,842 16 Occupancy 10,150 10,150 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 25,533 25,533 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 15,192 15,192 22 Depreciation, depletion, and amortization 2,308 2,308 23 Insurance 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) 27,075 27,075 Turkey Day Expenses 5,740 5,740 Education/Prof Developmen b 2,516 2,516 Equipment lease 864 864 CMN Tenderloin d $1,\overline{327}$ 2,057 730 e All other expenses 182,041 79,147 261,188 0 Total functional expenses. Add lines 1 through 24e 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 following SOP 98-2 (ASC 958-720)

Form 990 (2012)

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 6,317 1,805 Cash-non-interest bearing 211,026 216,323 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 5 Complete Part II of Schedule L 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 sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 206 900 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or 361,634 other basis Complete Part VI of Schedule D 10a 151,812 213,933 209,822 b Less accumulated depreciation 10b 10c 11 11 Investments—publicly traded securities 12 12 Investments—other securities See Part IV, line 11 Investments—program-related See Part IV, line 11 13 13 14 Intangible assets 14 11,483 11,595 15 Other assets See Part IV, line 11 15 443,750 439,660 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 3,963 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 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 25 3,963 4,123 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 416,579 426,967 27 27 Unrestricted net assets 23,208 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 439,787 435,537 33 Total net assets or fund balances 33 439,660 443,750 Total liabilities and net assets/fund balances

Form 990 (2012)

orm	990 (2012) Iowa Turkey Federation Inc	42-0815721			Pag	_{je} 12
	t XI Reconciliation of Net Assets					_
	 Check if Schedule O contains a response to any question in this Part > 	<u>(</u>				X
1	Total revenue (must equal Part VIII, column (A), line 12)		1		71,	
2	Total expenses (must equal Part IX, column (A), line 25)		2		5 1 ,:	
3	Revenue less expenses Subtract line 2 from line 1		3			388
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4	4:	39,	787
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		14,	638
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X,	line				
	33, column (B))		10	4:	35,	537
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part 3	KII				
					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 according	ountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were					
	reviewed on a separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate	basis				
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 a	audited on a				
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate	e basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibil	ity for oversight		1		
	of the audit, review, or compilation of its financial statements and selection of an independ	lent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax	year, explain in				
	Schedule O					
За	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		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did n	ot undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to under	go such audits		3b		
				Fo	m 99	0 (2012)

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

Part I-A

► 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

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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

Section 501(c)(4), (5), or (6) organizations Complete Part III	
Name of organization	Employer identification number
Iowa Turkev Federation Inc	42-0815721

1	Provide a description of the organization's direct and indirect	t political campaign activities in l	Part IV		
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pai	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 organizat		· · · · · · · · · · · · · · · · · · ·	▶ \$	
2	Enter the amount of any excise tax incurred by organization			▶ \$	
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	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	n for section 527 exempt functio	n		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contribute	ed to other organizations for sec	tion		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 Ente	r 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 nur				
	organization made payments. For each organization listed, e				
	the amount of political contributions received that were prom				
	as a separate segregated fund or a political action committee	e (PAC) If additional space is r	eeded, provide info	rmation in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds if none, enter -0-	contributions received and promptly and directly
				Tando Wilana, amai a	delivered to a separate
					political organization If none, enter -0-
				<u></u>	none, enter -o-
(1)					
(2)					
_					
(3)					
(4)				[
		 			
(5)	• • • • • • • • • • • • • • • • • • •				
				-	
(6)			1		

Schoo	lule C (Form 990 or 990-EZ) 2012 Iowa	Turkey Fede	ration Inc		42-0815721	Page 2
	rt II-A Complete if the organ			1(c)(3) and f	iled Form 5768 (elec	
	· section 501(h)).	•				
A					IV each affiliated grou	ıp member's
	name, address, EIN					
В	Check 🕨 🗌 if the filing organiza			ol" provision:	s apply	
	Limits on Lo	obbying Expenditu	ıres	į	(a) Filing	(b) Affiliated
	(The term "expenditures				organization's totals	group totals
	Total lobbying expenditures to influence p					
b	Total lobbying expenditures to influence a		lobbying)	}		
C	, , , ,	and 1b)		}		
C	• • • •	1 4 1 4-lV		-		
	Total exempt purpose expenditures (add		- 4-bl beth	-		
1	Lobbying nontaxable amount. Enter the a	imount from the following	g table in both			
1	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxal	ole amount is			
	Not over \$500,000	20% of the amount on li				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th				
	Over \$1,000,000 but not over \$1,500,000		e excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the				
	Over \$17,000,000	\$1,000,000				
	Grassroots nontaxable amount (enter 25	% of line 1f)				
	Subtract line 1g from line 1a If zero or le					
	Subtract line 1f from line 1c If zero or les	s, enter -0-		Į		
	If there is an amount other than zero on e	either line 1h or line 1i, d	id the organization file	Form 4720		
	reporting section 4911 tax for this year?					Yes No
	(Some organizations t		ng Period Under			ae five
		elow. See the inst				10 1140
						·
	Lo	bbying Expenditu	res During 4-Yea	r Averaging	Period	
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 201	(d) 2012	(e) Total
22	Lobbying nontaxable amount					
t	Lobbying ceiling amount (150% of line 2a, column(e))					
_	: Total lobbying expenditures					
	Grassroots nontaxable amount		, ,			
-	Grassroots ceiling amount (150% of line 2d, column (e))					
	f Grassroots lobbying expenditures					

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).

a Current year

b Carryover from last year

2a

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
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?

Taxable amount of lobbying and political expenditures (see instructions)

4 5

2c

3

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 (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2012

Part IV Supplemental Information (continued)

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

2012
Open to Public

Inspection

Employer identification number Name of the organization Jowa Turkey Federation Inc 42-0815721 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 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 c 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 tax vear 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 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)? Yes No In Part XIII, 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 XIII, 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 Revenues included in Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Describe in Part XIII the intended uses of the organization's endowment funds

	Yes	No
3a(i)		
3a(iı)		
3b		

Description of	of property	(a) Cost or other basis	(b) Cost or other basis	(c) Accumulated	(d) Book value
		(investment)	(other)	depreciation	
1a Land					
b Buildings			231,593	72,117	159,476
c Leasehold improveme	ents				
d Equipment			130,041	79,695	50,346
e Other					
otal. Add lines 1a through	1e (Column (d) must equ	al Form 990, Part X, columi	n (B), line 10(c))	▶	209,822

Schedule D (Form 990) 2012

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Page	-3

Part VII Investments—Other Securities. See Form 9	90, Part X, line 12	Tage
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1) Financial denvatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		<u></u>
(E)		
(F)		
(G)		
(H)		
(1)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	DOO Dot V line 12	
Part VIII Investments—Program Related. See Form 9		A. Markada et al.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		<u> </u>
(2)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<u> </u>	
Part IX Other Assets. See Form 990, Part X, line 15.		
(a) Description		(b) Book value
(1)		
(2)		
(3)		· · · · · · · · · · · · · · · · · · ·
(4) (E)		
(5)		
(6) (7)		
(8) (9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)		>
Part X Other Liabilities. See Form 990, Part X, line	25	
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	>	
2. FIN 48 (ASC 740) Footpote. In Part XIII, provide the text of the footpote	to the organization's financial state	ements that reports the organization's

liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2012 Iowa Turkey Federation Inc		42-0815721	Page 4
	rt XI Reconciliation of Revenue per Audited Financial Stateme	ents With Re	evenue per Return	
1	Total revenue, gains, and other support per audited financial statements		1	
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		
С	Recovenes of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	·
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	
Pa	Int XII Reconciliation of Expenses per Audited Financial Staten	nents With E	xpenses per Return	
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b		
С	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5	

Part XIII Supplemental Information

Complete 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, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Part XIII Supplemental Information (continued)

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SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

▶ Attach to Form 990.

OMB No 1545-0047 2012

Open to Public

Inspection

Employer identification number

% ____ Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant Assist mission or assistance X Yes 42-0815721 non-cash assistance (a) Description of Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 7,750 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable IA 50266-5997 20-0995727 501C Iowa Turkey Federation Inc General Information on Grants and Assistance (p) EIN the selection criteria used to award the grants or assistance? (1) Coalition to Support Iowa Farmers Cashier, Federation Acctg N2 NW21 (a) Name and address of organization or governmen West Des Moines Part II Partl 9 € 9 3 8 6 3

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2012)

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42-0815721

groups to support the Coalition's mission statement: To advocate and help Directors of the Coalition. The Coalition is made up of various commodity non-partisan organization provides assistance to farmers at no cost, and The Coalition to Support Iowa's Farmers was created by farmers to help The non-profit, The amount of assistance is required to obtain a seat on the Board of implement on-farm best management practices that assist Iowa's farm - Procedures for Monitoring the Use of Grant Funds families in raising livestock responsibly and successfully. farmers raise livestock responsibly and successfully. Part I, Line 2

Information

CSIF is a joint partnership involving

does not lobby or develop policy.

Schedule I (Form 990) (2012) IOWA Turkey Federation Inc

Page 2

42-0815721

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22	Individuals in the Ur	nited States. Comp	lete if the organizatio	n answered "Yes" to Form	990, Part IV, line 22
	Part III can be duplicated if additional space is needed.	nal space is needed.				
	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	•
1						
7						
ന						
4						
LC.						
9						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional	plete this part to provi	de the information r	equired in Part I, line	2, Part III, column (b), and	any other additional
	IIIOIIIIauoii					

the Iowa Cattleman's Association, Iowa Corn Growers Association, Iowa Farm

Bureau Federation, Iowa Pork Producers Association, Iowa Soybean

Association, Iowa Turkey Federation and Midwest Dairy Association.

Schedule I (Form 990) (2012)

SCHEDULE O (Form 990 or 990-EZ)

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.

2012 Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Iowa Turkey Federation Inc

Employer identification number 42-0815721

Form 990 - Organization's Mission or Most Significant Activities

The Iowa Turkey Federation represents, supports and promotes the turkey industry and its members. The Federation coordinates and organizes educational and promotional activities for the turkey industry between their members as well as the industry's relationship with the general public along with governmental and educational entities.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

All turkey farmers that market over 5,000 turkeys per year are members.

This means that they are paying into our state check-off program. Allied companies may pay membership at the following levels:

Diamond - \$1,500

Gold - \$1,000

Silver - \$500

Bronze - \$300

With membership, they have access to our mailing list of farmers, recognition in the "Turkey Talk" publication and receive "Turkey Talk" for free.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

The members of this corporation shall consist of all members in good

standing of the Federation who have paid their dues through the EMT

check-off or allied membership in the Federation as shown by the books of

said Federation, and each active member shall have the power to vote at the

annual meeting and for elected directors of the corporation.

Iowa Turkey Federation Inc

Employer identification number 42-0815721

The State shall be divided into three districts: West, Central, and East. Each district shall be represented on the board of directors by two (2) directors who must hold residence and maintain their place of business in one of the three prescribed districts. These directors to be nominated and elected by the active members in each district and be elected by a vote conducted by mail prior to the annual meeting. There shall be three (3) directors at large. They shall be elected by a vote of all the active members (West, Central, and East districts and allied members) conducted by mail prior to the annual meeting. There shall be two (2) allied directors.

They shall be elected by a vote of all the active members (West, Central, and East districts and allied members) conducted by mail prior to the annual meeting. There shall be two (2) appointed representatives from Hillshire Brands Company and two (2) appointed representatives from West Liberty Foods.

All Board members shall be elected or appointed for a term of three (3) years and shall only serve three consecutive terms unless at the expiration of his/her third consecutive term he/she shall be serving as Vice President, he/she shall be eligible for a fourth term.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members
The only decisions of the governing body subject to the approval of its
members are by-law changes.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

The 990 Tax Return for the Iowa Turkey Federation is reviewed by the

Executive Director, the President of the Board of Directors, and the Vice

President. Upon approval, the tax return is signed and submitted to the IRS. A copy of the tax return is also made available to the entire Board of Directors.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Board members are given a written policy in their board notebook. This
notebook is reviewed with new board members by the executive director. On
an annual basis, board members disclose potential conflicts of interest of
themselves and their families and it is noted in the minutes. Minutes of
meetings where there is a potential conflict do disclose the conflict and
the member's abstinence from voting.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
The executive board conducts an annual review of the Executive Director's
performance. A closed session of the board is held to discuss staff
compensation. From that discussion employee compensation is submitted to
the annual budget. This budget is then approved by the board at their
annual meeting in November or December.

Form 990, Part VI, Line 15b - Compensation Process for Officers

A closed session of the board is held to discuss staff compensation. From that discussion employee compensation is submitted to the annual budget.

This budget is then approved by the board at their annual meeting in November.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
All of our governance policies are available upon request and are kept in a

Name of the organization

Iowa Turkey Federation Inc

Employer identification number 42-0815721

fireproof file in bookkeeper's office.

Form 990, Part XI - Additional Information

Net Changes to temporarily restriced

PAC Funds = \$ (14,638)

Depreciation and Amortization

(Including Information on Listed Property)

OMB No 1545-0172

179

Attachment Sequence No

Department of the Treasury Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Name(s) shown on return Iowa Turkey Federation Inc Identifying number 42-0815721

	ss or activity to	which this form relates									
Pä		Election To Expen							-	-	
1		Note: If you have a		, complete Part	V beto	ore you co	mpie	te Part I		1	500,000
2		amount (see instructions of section 179 property p	•	inetriotions)						- '	300,000
3		cost of section 179 property p	•	•	tructions	1				3	2,000,000
4		in limitation Subtract line	•	•	il delions	,				4	
5		ition for tax year Subtract lin		•	ied filina s	eparately, see	e instruc	tions		5	
6	2 4 11 41 11 11 11	(a) Descriptio				usiness use on			Elected cost		
			<u></u>		<u> </u>						
7	Listed pro	perty Enter the amount f	rom line 29				7				
8	Total elect	ted cost of section 179 pr	operty Add amounts	ın column (c), lines	6 and 7					8	
9	Tentative	deduction Enter the sma	aller of line 5 or line 8							9	
10	Carryover	of disallowed deduction	from line 13 of your 20	011 Form 4562						10	
11	Business	income limitation. Enter tl	he smaller of business	s income (not less th	han zero) or line 5 (se	ee inst	ructions)		11	
12	Section 17	9 expense deduction Ad	dd lines 9 and 10, but	do not enter more t	han line	11 ,		_		12	
13	Carryover	of disallowed deduction	to 2013 Add lines 9 a	nd 10, less line 12			13	_			
Note	: Do not us	e Part II or Part III below							· ·		
Pa	<u>art II</u>	Special Depreciat	ion Allowance a	nd Other Depre	<u>eciatio</u>	n (Do no	t ınclı	ude liste	d proper	ty) (Ş	See instructions)
14	Special de	preciation allowance for	qualified property (oth	ner than listed prope	erty) plac	ed in service	€			ĺ	
	during the	tax year (see instruction	s)							14	
15	Property s	subject to section 168(f)(1	l) election							15	
16		reciation (including ACR								16	
Pa	art III	MACRS Depreciat	ion (Do not inclu			<u>ee instruc</u>	tions				
				Section						· · · · ·	
17	MACRS d	eductions for assets plac	ed in service in tax ye	ears beginning befor	re 2012					17	14,612
18	If you are ele	cting to group any assets placed							<u> </u>		
		Section B—	Assets Placed in Se	T		ar Using th	ne Ger	ieral Depr	eciation :	System	<u>. </u>
	(a) Clas	ssification of property	(b) Month and year placed in service	(c) Basis for depred (business/investment only-see instruction	use	(d) Recovery period	(e) (Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year pr	roperty					<u> </u>				
b	5-year pr	operty	_				Ļ				
С	7-year pr	roperty	1	6	,533	7.0	L	HY	SL		466
<u>d</u>	10-year pr		_				<u> </u>				<u></u>
е	15-year pr		1		- 40	000					
f	20-year pi		4	4	,548	20.0		HY	SL		114
	25-year pr		 			25 yrs			S/L		
h	Residentia	al rental				27 5 yrs		MM	S/L	$\overline{}$	
	property					27 5 yrs		MM	S/L		
i	Nonreside property	ential real		 		39 yrs	 	MM	S/L		
	property			: D 2042 :		a I I a i a a 4b a	Altan	MM 	S/L		
		Section C—A	ssets Placed in Ser	Vice During 2012	iax rea	- Using the	Aiter	native De			em
	Class life		4			40	 		S/L		
	12-year		 	 		12 yrs	 	1414	S/L		
	40-year	S /2	Amuntin N	<u> </u>		40 yrs	L .	MM	S/L		
	art IV	Summary (See ins		- 				-		T . 1	
21 22		perty Enter amount from		40 100	L	C1	-	h		21	
22		d amounts from line 12, I	_				⊏nter	nere		ू	15 100
22		e appropriate lines of you				ISHUCTIONS		Γ		22	15,192
23		s shown above and place		e current year, ente	ıı tne		22			ļ	
	portion of	the basis attributable to s	section 263A costs				23	L			4500

Form 4562 - Depreciation and Amortization Election Not to Claim Additional Depreciation for Specific Classes

Name as shown on return: IOWA TURKEY FEDERATION INC

Taxpayer's ID#: 42-0815721

Year: 2012

Taxpayer makes the following elections pertaining to additional first year depreciation:

Classes	Assets Acquired in the Current Year
Classes	Elect Out
7 year class	YES
20 year class	YES

Department of the Treasury

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

OMB No 1545-1709

(Rev. January 2013) File a separate application for each return. Internal Revenue Service 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 Part I only 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 Employer identification number (EIN) or Name of exempt organization or other filer, see instructions Type or print 42-0815721 Iowa Turkey Federation Inc Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) File by the due date for 535 E Lincoln Way PO Box 825 filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See IA 50010-0825 Ames instructions 01 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Return Application Is For Code is For Code Form 990-T (corporation) 01 07 Form 990 or Form 990-EZ Form 1041-A 02 Form 990-BL Form 4720 09 Form 4720 (individual) 03 04 Form 5227 10 Form 990-PF Form 6069 11 05 Form 990-T (sec 401(a) or 408(a) trust) Form 8870 Form 990-T (trust other than above) Gretta Irwin 535 E Lincoln Way 50010 The books are in the care of ▶ Ames IA Telephone No FAX No D If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is ▶ If it is for part of the group, check this box and attach for the whole group, check this box a 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 until 08/15/13 , 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 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 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

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