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Form 990

Extended to 5-15-14

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)

OMB No 1545-0047

Open to Public

Department of the Treasury

	nal Revenue	-	The organization may have to use a copy of this return to satisfy state report		ı	, 1113	pection (
Ā	For the 2	012 calend	dar year, or tax year beginning $10/01$, 2012, and ending			, 2013	
В	Check if app	licable	C	D	Employer	Identification N	umber
	Address	s change	IOWA BEEF CATTLE PRODUCERS ASSOCIATION		42-09	931773	
	Name o	-	DBA IOWA BEEF INDUSTRY COUNCIL	E	Telephone		
	Initial re	-	P.O. BOX 1490		(515)	296-23	05
	Termina		AMES, IA 50014-1490	-		, 230 20	
	H	ed return		ء ا	Gross rece	aunts Š 1	,998,367.
	H		F Name and address of principal officer	H(a) Is this a gi			Yes X No
	Аррнса	tion pending	The transfer of the transfer o		-		Yes No
	T	-4 -4-4	SAME AS C ABOVE	If 'No,' atta	ach a list (s	led? ee instructions)	
<u>ٺ</u>	Tax-exem		501(c)(3) X 501(c) (5) (Insert no) 4947(a)(1) or 527	_		. •	
J	Website			H(c) Group exe			
K		rganization	X Corporation Trust Association Other ► L Year of Formation	on 1951	M Sta	te of legal domic	cile IA
Pa	rt I	Summar					
			be the organization's mission or most significant activities THE ORGAN				
ģ	<u>EX</u>	<u>PANDIN</u>	<u>G_CONSUMER_DEMAND_FOR_BEEF, STRENGTHENING_BEEF</u>	<u>'S_POSI</u>	<u>TION_</u> I	N_THE_G	LOBAL
auc	<u>MA</u>	RKETPL	ACE, AND IMPROVING PRODUCER PROFITABILITY.				
Activities & Governance							
Š			if the organization discontinued its operations or disposed of more	re than 25%	6 of its ne		1.0
%	_		iting members of the governing body (Part VI, line 1a) dependent voting members of the governing body (Part VI, line 1b)		1	3	16
es			of individuals employed in calendar year 2012 (Part V. line 2a)		<u> </u> -	5	16 6
Viti			of volunteers (estimate if necessary)		-	6	0
cti			ed business revenue from Part VIII, column (C), line 12		-	7 a	0.
1			business taxable income from Form 990-T, line 34		-	7b	0.
				Pric	r Year	Сп	rrent Year
	8 Cor	ntributions	and grants (Part VIII, line 1h)	<u> </u>			
SE C			rice revenue (Part VIII, line 2g)	1.	918,51	8 1	,992,854.
(10 Inve	estment in	come (Part VIII, column (A), lines 3, 4, and 7d) RECEIVED	1	6,65		5,513.
	11 Oth	er revenu	e (Part VIII. column (A) lines 5, 6d, 8c, 9d, 10c, and 11e)			-	
ENCYPHINED MARSENIE 2014			e – add lines 8 through 11 (must equal Parts) (II, column (A), line 12)	1.	925,17	3. 1	,998,367.
皿			milar amounts paid (Part IX, column (A), limes 1-3MAR 2 4 2014)	962,51		886,008.
U			to or for members (Part IX, column (A), line 4)	<u> </u>	302,02		
₹	15 Sal	aries othe	er compensation, employee benefits (Part X, column A) tines 5-1107	356,3		5	373,564.
岩	16 a Pro	fossional	fundraising fees (Part IX, column (A), line He)		330,30	, 5 . 	373,304.
€E)				-			
ķ			sing expenses (Part IX, column (D), line 25) >				
2	1		es (Part IX, column (A), lines 11a-11d, 11f-24e)		<u>644,68</u>		646,383.
){{	1		es Add lines 13-17 (must equal Part IX, column (A), line 25)	1,	963,57	9. 1	.,905,955.
	19 Rev	enue less	expenses Subtract line 18 from line 12		-38,40		92,412.
900				Beginning o	of Current \	Year En	d of Year
Net Assets of Fund Balances	20 Tot		(Part X, line 16)		463,81		,590,125.
A P	21 Tot	al liabilitie	s (Part X, line 26)		<u>224,86</u>	6.	258,762.
Σď	22 Net	assets or	fund balances Subtract line 21 from line 20	1,	238,95	51. 1	,331,363.
Pa	rt II	Signatur	e Block	•		•	·
Unde	er penalties o	of perjury, I de	clare that I have examined this return, including accompanying schedules and statements, and to the	he best of my k	nowledge ar	nd belief, it is tru	e correct, and
com	plete Declara	ation of prepa	rer (other than officer) is based on all information of which preparer has any knowledge				
			Manufallaner, Shewowe Macce	70	3-12	1-201	4
Sig	n	Signatu	re of officer	Date			
He	re	N	ancy Degner Executive Director				
		Type or	print nameland title				
		Print/Type p	reparer's signature Date	, Ct	neck	ıf PTIN	
Pa	id	STEPHE	EN L KOEHN AL COL 3-11-14	se	ت If-employedء	P0008	39588
	eparer	Firm's name	/	-			
	e Only	Firm's addre		Fu	rm's EIN 🏲	42-0731	256
_	•		WEST DES MOINES, IA 50266-6717			515-223-	
Mar	the IRS	discuss th	is return with the preparer shown above? (see instructions)			X Y	
				A0113L 12/18/	/12		orm 990 (2012)
				12/10/			

` `Form	990 (2012) IOWA BEEF CATTLE PRODUCERS ASSOCIATION	42-0	93177	73	P	age 2
Par	3	·				
	Check if Schedule O contains a response to any question in this Part III					
1	Briefly describe the organization's mission:					
	THE ORGANIZATION IS DEDICATED TO EXPANDING CONSUMER DEMAND FOR B					<u> </u>
	BEEF'S POSITION IN THE GLOBAL MARKETPLACE, AND IMPROVING PRODUCE	R_PROF	ITAB]	LITY	<u>-</u>	
						.
	Did the organization undertake any significant program services during the year which were not listed on the pr	101				
2	Form 990 or 990-EZ?	101	П	Yes	V	No
	If 'Yes,' describe these new services on Schedule O			103	Δ	110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	ervices?	П	Yes	x	No
•	If 'Yes,' describe these changes on Schedule O		ш			
4	Describe the organization's program service accomplishments for each of its three largest program service.	vices, as n	neasure	ed by e	expen	ses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount cothers, the total expenses, and revenue, if any, for each program service reported	of grants an	d alloca	ations t	o ʻ	
	others, the total expenses, and revenue, if any, for each program service reported					
4 a	(Code) (Expenses \$ including grants of \$) (I	Revenue	\$)
	BEEF PROMOTION - NATIONAL. HELPS FUND NATIONAL BEEF PROMOTIONAL			S. BC	тн	
	DOMESTICALLY AND INTERNATIONALLY, THROUGH ORGANIZATIONS SUCH AS					RT
	FEDERATION, THE FEDERATION OF STATE BEEF COUNCILS, AND OTHERS.					
					<u>.</u>	
4 b		Revenue	-)
	BEEF PROMOTION IN IOWA. HELPS PROMOTE DEMAND FOR BEEF IN IOWA T					
	ADVERTISING, RETAIL AND FOOD SERVICE PROMOTIONS, AND EDUCATIONAL	AND O	THEK	PROC	ZKAM	5
						
						-
4 c	(Code) (Expenses \$ including grants of \$) (I	Revenue	\$)
	PRODUCER COMMUNICATION. COMMUNICATES CHECKOFF-RELATED INFORMATI			PROI	DUCE	RS
	AND HELPS KEEP THEM INFORMED ABOUT RELATED PROGRAMS AND ACTIVITI					
		_				_
	Olbert and the Color of Color					
4 d	Other program services. (Describe in Schedule O) (Figure 2005 S. C.					
	(Expenses \$ including grants of \$) (Revenue \$	-)	
4 e	Total program service expenses ▶			Form	990	(2012)
BAA	TEEA0102L 08/08/12					

	n 990 (2012) IOWA BEEF CATTLE PRODUCERS ASSOCIATION 42-093.	L//3		age 3
Pa	rt IV 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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts 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 1	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III .	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	ļ		
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	х	
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	——	Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	X	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	<u> </u>	Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization entity located outside the United States? If 'Yes,' complete Schedule F, Parts II and IV	ion 15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
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		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

42-0931773 Page 4 Part IV | Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II Х 21 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 Х 22 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 Х 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L. Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L. Part II Х 26 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 Х 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Х 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M30 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I... X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-37 If 'Yes,' complete Schedule R, Part I Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 34 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a Х b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 35b 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

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Х Form 990 (2012)

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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

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

Check if Schedule O contains a response to any question in this Part V			П					
Check it Schedule O contains a response to any question in this 1 art v		Yes	No					
1 a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	3	1						
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b	0	İ						
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
(gambling) winnings to prize winners?	1	c X	<u> </u>					
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 2 a	6							
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2	b X	<u> </u>					
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)								
3 a Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u> </u>	a	X					
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O .	3	ь	<u> </u>					
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		la	Х					
b If 'Yes,' enter the name of the foreign country: ►								
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		ļ	l					
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		a	X					
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u> </u>	b	X					
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		c	<u> </u>					
6 a 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?								
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?								
7 Organizations that may receive deductible contributions under section 170(c).								
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?								
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?								
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file								
Form 8282?	7	7 c	<u> </u>					
d If 'Yes,' indicate the number of Forms 8282 filed during the year		, e						
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?								
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?								
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7 g						
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<u></u>	7 h	ļ					
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess busines holdings at any time during the year?	nd the	3						
9 Sponsoring organizations maintaining donor advised funds.								
a Did the organization make any taxable distributions under section 4966?	_	a						
b Did the organization make a distribution to a donor, donor advisor, or related person?	;	Эb						
10 Section 501(c)(7) organizations. Enter.								
a Initiation fees and capital contributions included on Part VIII, line 12 10a								
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
11 Section 501(c)(12) organizations. Enter								
a Gross income from members or shareholders								
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)								
12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	2a						
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		1						
13 Section 501(c)(29) qualified nonprofit health insurance issuers.								
a Is the organization licensed to issue qualified health plans in more than one state?	. 1	3 a	 					
Note. See the instructions for additional information the organization must report on Schedule O		1	1					
b 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.								
c Enter the amount of reserves on hand 13c								
14a Did the organization receive any payments for indoor tanning services during the tax year?	1.	4 a	X					
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	⊢	4b	+					

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

X

Sec	tion A. Governing Body and Management						
			_		Yes	No	
1 a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad	1 a	16				
	authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent	1 ъ	16	}			
	•	LL					
	Did any officer, director, trustee, or key employee have a family relationship or a business relations officer, director, trustee or key employee? SEE SCHEDULE O		1	2	Х		
	Did the organization delegate control over management duties customarily performed by or under the of officers, directors or trustees, or key employees to a management company or other personal delegate.	ne direct sup on?	ervision	3		Х	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? SEE SCH 0			4	х		
5 6	Did the organization become aware during the year of a significant diversion of the organization have members or stockholders? SEE SCHEDULE O	tion's asset	s? .	5	Х	X	
-	Did the organization have members, stockholders, or other persons who had the power to elect or a members of the governing body? SEE SCHEDULE O	ippoint one o	r more	7 a	Х		
	Are any governance decisions of the organization reserved to (or subject to approval by) me stockholders, or other persons other than the governing body?			7 b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken the following. SEE SCHEDULE O	during the y	ear by				
а	The governing body?			8 a	Х		
b	Each committee with authority to act on behalf of the governing body?			8 b		X	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	e reached at	the	9		Х	
Sect	ion B. Policies (This Section B requests information about policies not required	by the Inte	ernal Revenue C	ode.)		
					Yes	No	
10 a	Did the organization have local chapters, branches, or affiliates?			10 a		X	
	If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, operations are consistent with the organization's exempt purposes? $. $		o ensure their	10 b			
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the			11 a	X		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 99	O SEE S	SCHEDULE O				
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13			12 a	X		
	Were officers, directors or trustees, and key employees required to disclose annually interests that to conflicts?			12 b	Х		
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Schedule O how this is done SEE SCHEDULE Q	Yes,' describ	e ın	12 c	Х		
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		
	Did the process for determining compensation of the following persons include a review and approximately persons, comparability data, and contemporaneous substantiation of the deliberation and	ecision?	ndent				
	The organization's CEO, Executive Director, or top management official SEE SCHEDULI	E O		15 a	X		
b	Other officers of key employees of the organization If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)			15 b	Х		
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similal taxable entity during the year?	r arrangeme	ent with a	16 a		_X	
b	olf 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate participation in joint venture arrangements under applicable federal tax law, and taken steps organization's exempt status with respect to such arrangements?	s to safegua	rd the	16 b			
Sec	tion C. Disclosure						
	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, a inspection. Indicate how you make these available. Check all that apply.			/aılabl	le for	public	
	Own website Another's website X Upon request Ott	ner <i>(explain</i>	ın Schedule O)				
Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O							
	State the name, physical address, and telephone number of the person who possesses the books a ANGIE BECK 2055 IRONWOOD CT. AMES IA 50014 (515) 296-230		of the organization				
ВАА		-	· 	Form	990 (2012)	

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

- 1 a 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 in	or any rela	ted or	ganız	zatio	n co	mpens	sated	d any current officer, di	rector, or trustee	
Level .				(C						
(A) Name and Title	(B) Average hours per week (list	one bo	ox, ùn	less p d a d	perso	more t n is both or/trustee	n an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	related organizations (W 2/1099-MISC)	from the organization and related organizations
(1) SCOTT NIESS	2	İ								
CHAIR	0	Х		X				0.	0.	0.
(2) DAN COOK	2									
DIRECTOR	0	Х						0.	0.	0.
(3) DARYL STROHBEHN	2									
TREASURER	0	Х		Х				0.	0.	0.
(4) ELAINE UTESCH	2									
DIRECTOR	7-0-	Х						0.	0.	0.
(5) PHIL REEMTSMA	2									
DIRECTOR	0	Х						0.	0.	0.
(6) HELEN WIESE	2									
DIRECTOR	7-0-	Х						0.	0.	0.
(7) SCOTT HEATER	2									
SECRETARY	7-0-	Х		Х				0.	0.	0.
(8) BILL NORTHEY	2									
DIRECTOR	0	Х						0.	0.	0.
(9) DR. WENDY WINTERSTEEN	2									
DIRECTOR	7 0	X						0.	0.	0.
(10) JOE WRIGHT	2									
DIRECTOR	0	X						0.	0.	0.
(11) ROGER BRUMMETT	2									
VICE CHAIR	7-0-	X		Х				0.	0.	0.
(12) DAN SCHMITT	2									
DIRECTOR	0	X	L		<u> </u>			0.	0.	0.
(13) TOM SHIPLEY	2									
DIRECTOR	7	X						0.	0.	0.
(14) SCOTT MCGREGOR	2					_				
DIRECTOR	0	X						0.	0.	0.

Part VII Section A. Officers, Directors, Tru	(B)			(C		<u>, .</u>	Ï	Triightest Con	pensacea Emp	loyous	(00/11)
(A) Name and title	Average hours per week (list any hours for related organiza	offi	, unles cer an	heck ss pe	erson direct	than one of the structure of the structu	an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amoi com fi org an	(F) stimated int of other pensation om the anization d related anizations
	- tions below dotted line)	trustee	Institutional trustee		oyee	Highest compensated employee					
15) STEVE REHDER ELECTED DIRECT.	$-\frac{2}{0}$	х		Х				0.	0.		0
16) TERRI CARSTENSEN DIRECTOR	$-\frac{2}{0}$	X						0.	0		0
NANCY DEGNER EXECUTIVE DIR.	<u>50</u> 0			Х				100,873.	0.		9,303
18)											
19)											
20)							-				
21)											
22)		1								:	
23)											
24)											
25)											•
1 b Sub-total		•					>	100,873.	0.		9,303
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	on A						-	0. 100,873.	0.	-	9,303
2 Total number of individuals (including but not limited from the organization 1	to those	listed	abov	/e) v	who	receiv	ved		•	pensation	
											Yes No
3 Did the organization list any former officer, direction line 1a? If 'Yes,' complete Schedule J for suc	h individi	ıal				٠				3	Х
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportab er than \$	le co 150,0	mpe 100?	nsa If ')	itior Yes'	and comp	oth olet	er compensation e Schedule J for	from	4	x
5 Did any person listed on line 1a receive or accru for services rendered to the organization? If 'Yes	e comper s,' <i>comple</i>	nsatio	on fro	om lule	any J fo	unre or suc	late :h p	ed organization or erson	ındıvıdual	5	Х
Section B. Independent Contractors 1 Complete this table for your five highest compen	sated ind	lepen	ndent	CO	ntra	ctors	tha	at received more t	han \$100,000 of		
compensation from the organization Report compen	sation for	the c	alen	dar	yea	endı	ng v	with or within the or	ganızatıon's tax yea		<u>~`</u>
(A) Name and business add	ress							Description		Compe	C) ensation
2 Total number of independent contractors (including t		nted t	to the	se l	liste	d abo	ve)	who received more	than		
\$100,000 in compensation from the organization	- 0	TEEA	0100	22.6	24/1					Form	990 (201

	Check if Schedule O contains a response to any ques	tion in this Part VIII			<u>Ll</u>
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
	1 a Federated campaigns 1 a				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	b Membership dues 1b	7			
S \	c Fundraising events 1c	1			
듬뜅	d Related organizations . 1 d	1			
ջ틠	e Government grants (contributions) 1 e				
올띫	• All other contributions cifts grants and	7			
뙲目	f All other contributions, gifts, grants, and similar amounts not included above 1 f				
동일	g Noncash contributions included in Ins 1a-1f \$	7			
۳.,	h Total. Add lines 1a-1f	<u> </u>			
₹	Business Code				
	2a NATIONAL BEEF CHECKOFF FEES 900099	1,697,934.	1,697,934.	· · · · · · · · · · · · · · · · · · ·	
Ä	b GOV CHARITY STEER SHOW 900099	186,339.	186,339.		
M	c BEEF CERTIFICATE EXPIRED 900099	49,030.	49,030.		
35	d CONTRACT INCOME 900099	42,057.	42,057.		
§	e RESALE ITEMS 900099	17,494.	17,494.		
ဒ္ဓု	f All other program service revenue				
_=	g Total. Add lines 2a-2f	1,992,854.			
	3 Investment income (including dividends, interest and	F 510	· !		r r12
	other similar amounts). 4 Income from investment of tax-exempt bond proceeds.	5,513.			5,513.
	5 Royalties (i) Real (ii) Personal	-			
	6 a Gross rents .	=			
	b Less: rental expenses	-			
	c Rental income or (loss)	┪			
	d Net rental income or (loss)	→			İ
	(A) Consistent (A) Other				
	7 a Gross amount from sales of assets other than inventory				
		7			
	b Less cost or other basis and sales expenses.				-
	c Gain or (loss)	7			
	d Net gain or (loss)	F			
ш	8 a Gross income from fundraising events				
_	(not including \$				
泛	of contributions reported on line 1c)				
EE .	See Part IV, line 18 a	_			
OTHER REVEN	b Less direct expenses b	-			
	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities See Part IV, line 19 a				
	b Less direct expenses b	=			
	c Net income or (loss) from gaming activities .	=			
	· · · · · · · · · · · · · · · · · · ·				-
	10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory	<u>•</u>			
	Miscellaneous Revenue Business Code				
	11a				
	b				
	c				<u> </u>
	d All other revenue.		<u> </u>		
	e Total. Add lines 11a-11d	•			
	12 Total revenue. See instructions	1,998,367.	1,992,854.	0	
BAA	A TÉ	EA0109L 12/17/12			Form 990 (2012)

Part IX | Statement of Functional Expenses

Sect	Check if Schedule O contains a r			ompiete column (A)	
Do r 7b, 8	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
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	886,008.	•		
_	Grants and other assistance to individuals in the United States See Part IV, line 22				
	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	113,120.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	220,219.			
8	Pension plan accruals and contributions (include section 401(k) and section 403(b)	220,223.			
	employer contributions)	5,717.			
9	Other employee benefits	9,264.			
10	Payroli taxes	25,244.			
11	Fees for services (non-employees):				
а	Management				
b	Legal .	3,234.			
c	: Accounting .	8,900.			
d	Lobbying .				
е	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	Other (If line 11g amt exceeds 10% of line 25, col-	2 222			
	umn (A) amt, list line 11g expenses on Sch O)	9,092.			
	Advertising and promotion	284,842.			
	Office expenses	4,535.			
14	Information technology				
15	Royalties .				
16	Occupancy	61,625.			
17	Travel .	35,077.			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
	Conferences, conventions, and meetings	46.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,307.			
23	Insurance	9,636.			
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).				
	PRODUCER_COMMUNICATION	93,260.			
Ŀ	CONSUMER INFORMATION	47,552.			
c	BEEF QUALITY ASSURANCE	16,072.			
	CONTRACT EXPENSE	15,017.			
	All other expenses	47,188.			
25	Total functional expenses Add lines 1 through 24e	1,905,955.			
26	the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here		_		
	SOP 98-2 (ASC 958-720)	l l		1	

Part X

Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) End of year (A) Beginning of year 692,956. 581,940 1 Cash - non-interest-bearing 2 2 Savings and temporary cash investments 815, 193 815,051 Pledges and grants receivable, net 3 3 4 Accounts receivable, net 26,939 36,616. 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 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 9 Prepaid expenses and deferred charges 7,924 7,819. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 122,069 10b 10 c b Less accumulated depreciation 86,121 29,639 35,948. Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets Other assets See Part IV, line 11 15 1,735. 15 2,182 Total assets, Add lines 1 through 15 (must equal line 34) 16 16 463,817 590,125. Accounts payable and accrued expenses 190,702 17 17 223,364. 18 Grants payable 18 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, 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 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 34,164 35,398. 26 Total liabilities. Add lines 17 through 25 224,866 258,762. 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 1,238,951 1,331,363. 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 R Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. PZD Capital stock or trust principal, or current funds . 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 . . 33 33 Total net assets or fund balances 1,238,951 1,331,363 Total liabilities and net assets/fund balances 1,463,817 34 1,590,125 Form 990 (2012) BAA

Forn	1990 (2012) IOWA BEEF CATTLE PRODUCERS ASSOCIATION 4	2-093	1//3		Pa	age IZ
Pa	t XI Reconciliation of Net Assets				-	
	Check if Schedule O contains a response to any question in this Part XI		_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,9	98,3	367.
2	Total expenses (must equal Part IX, column (A), line 25)	2	l	1,9	05,9	955 <u>.</u>
3	Revenue less expenses Subtract line 2 from line 1 .	3			92,4	112.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,2	38,9	951.
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	<u> </u>			
9	Other changes in net assets or fund balances (explain in Schedule O).	9	J			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,3	31,3	363.
Pa	t XII Financial Statements and Reporting		,			
	Check if Schedule O contains a response to any question in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990.					
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O					
2	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviseparate basis, consolidated basis, or both	ewed on	а			
	Separate basis Consolidated basis Both consolidated and separate basis					
1	Were the organization's financial statements audited by an independent accountant?		1	2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepbasis, consolidated basis, or both	arate				
	X Separate basis Consolidated basis Both consolidated and separate basis			ĺ		
•	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the aureview, or compilation of its financial statements and selection of an independent accountant?	dıt,		2 c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O					
3	a 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?	е		3 a		Х
1	o If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit		3 Ь		
BAA				Form	990	(2012)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. See separate instructions.

OMB No 1545-0047

Open to Public Inspection Employer identification number

IOWA BEEF CATTLE PRODUCERS ASSOCIATION DBA IOWA BEEF INDUSTRY COUNCIL 42-0931773 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the 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) 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? No 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 Nο 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 a Total number of conservation easements 2 a **b** Total acreage restricted by conservation easements 2 b c Number of conservation easements on a certified historic structure included in (a) 2 c 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 year ► 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 violations, No and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part 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 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a 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 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items a Revenues included in Form 990, Part VIII, line 1 ▶\$ ÞŚ b Assets included in Form 990, Part X

Schedule D (Form 990) 2012 IOWA Part III Organizations Mainta							2-09317		Page 2
3 Using the organization's acquisition	· · ·	-							
ıtems (check all that apply)	, accession, a			211 y Q1 G1	s lonowing that a	o a significant a	50 01 N5 00IN	2011011	
a Public exhibition					ange programs				
b Scholarly research			e Other	, 					
c Preservation for future gener									
4 Provide a description of the organiz Part XIII				-	•				
5 During the year, did the organiza to be sold to raise funds rather th	tion solicit or nan to be ma	receive intained	donations of air	rt, histor organiza	ical treasures, c ition's collection	or other similar i ?	assets	Yes	No
Part IV Escrow and Custodial Arm reported an amount or	angements.	Complet	e if the organiz				rt IV, line 9	, or	<u></u>
1 a is the organization an agent, trus on Form 990, Part X?						ner assets not in	ncluded	Yes	No
b If 'Yes,' explain the arrangement	ın Part XIII a	and com	plete the follow	ing table	9	<u> </u>			
							Am	ount	
c Beginning balance						1 c		-	
d Additions during the year						1 d			
e Distributions during the year						1 e			
f Ending balance				_		1 f			
2a Did the organization include an a					- 1	L D4 VIII		Yes	∐ No
b If 'Yes,' explain the arrangement	in Part XIII.	Спеск п	ere if the explai	ntion na	s been provided	in Part XIII	•		\sqcup
Part V Endowment Funds. C	omplete if	the or	nanization ar	nswere	d 'Yes' to Fo	rm 990 Part	IV line 1	<u>n</u>	
Lindownient i dinus.	(a) Currer		(b) Prior yea		(c) Two years	(d) Three ye		(e) Four ye	ars
1 a Beginning of year balance			(2) /5.	-				(-77-	
b Contributions				- 			-		
						 			
c Net investment earnings, gains, and losses									
d Grants or scholarships									
e Other expenditures for facilities and programs		-			· · · · · · · · · · · · · · · · · · ·				
f Administrative expenses				-					
g End of year balance						- 			
2 Provide the estimated percentage	e of the curre	nt vear	end balance (lu		olumn (a)) held	26			
a Board designated or quasi-endowm		in year	end balance (iii	ne ig, c	olaitiii (a)) ileia	as			
b Permanent endowment ►		:							
c Temporarily restricted endowmer		•	%						
The percentages in lines 2a, 2b,		d equal	100%						
3a Are there endowment funds not in t		-		are held	and administered	for the		Yes	No
organization by: (i) unrelated organizations							3:	a(i)	+ 100
(ii) related organizations								(ii)	+
b If 'Yes' to 3a(ii), are the related of	organizations	listed a	s required on S	chedule	R?			ВЬ	
4 Describe in Part XIII the intended	_		-				L.:		_1
Part VI Land, Buildings, and		_							
Description of property		(a) Cos	t or other basis	(b) (Cost or other asis (other)	(c) Accumula		(d) Book v	/alue
1 a Land		ļ ("			(5(1)(1)	acpi coldti			
b Buildings .						·			·
c Leasehold improvements	•	-		<u> </u>					
d Equipment		 			54,315.	21	509.	3.7	2,806.
e Other					67,754.		612.		3,142.
Total. Add lines 1a through 1e. (Colum	nn (d) must e	gual For	m 990 Part X	L column		04,	<u>↓12.</u>		5, 948.
BAA	(2)	,, 01	eee, area,	J. W. (11)	(=),		Schedule I) (Form 99	
## W 1								- (1 0/111 22	U) 2012

(a) Description of liability (b) Book value

(1) Federal income taxes

(2) COMPENSATED ABSENCES 35,398.

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

(11)

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

(b) Book value

(5) (6) (7) (35,398.)

^{2.} FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Sentence - V same project - 10Mil Dilli Cilling - 1 Republic libertalini	2-0931773	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R		
1 Total revenue, gains, and other support per audited financial statements .	1	1,998,367.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a Net unrealized gains on investments . 2a	4 1	
b Donated services and use of facilities . 2b	_	
c Recoveries of prior year grants	_	
d Other (Describe in Part XIII)	<u> </u>	
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	1,998,367.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1	
a Investment expenses not included on Form 990, Part VIII, line 7b	_	
b Other (Describe in Part XIII) . 4b	_	
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,998,367.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
1 Total expenses and losses per audited financial statements		1,905,955.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		<u> </u>
a Donated services and use of facilities.	1 1	
b Prior year adjustments	7	
c Other losses 2c	7	
d Other (Describe in Part XIII)	1	
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	1,905,955.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	1	
b Other (Describe in Part XIII)	1	
c Add lines 4a and 4b.	4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,905,955.
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 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 an	/, lines 1b and y additional in	d 2b, Part V, iformation
PART X - FIN 48 FOOTNOTE		
THE ASSOCIATION ANNUALLY EVALUATES THE IMPACT OF UNCERTAIN TAX POSIT	'IONS TAKE	EN_OR
EXPECTED TO BE TAKEN IN A TAX RETURN, WHICH MAY REQUIRE RECOGNITION	OF A T.TAI	3TI.TTY
RELATED TO THOSE TAX POSITIONS. AT SEPTEMBER 30, 2013 AND 2012, THE	ASSOCIAT	TION HAD
NO UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION IN THE FINANCIAL ST	'ATEMENTS	THE
ASSOCIATION IS NO LONGER SUBJECT TO FEDERAL AND STATE INCOME TAX EXA	MINATION:	S BY TAX
AUTHORITIES FOR YEARS ENDING BEFORE SEPTEMBER 30, 2010.		
BAA	Schedule D (Form 990) 2012

BAA

CHEDULE I	orm 990)
S	۳

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

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service	Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ➤ Attach to Form 990.	Open to Public Inspection	Public ction
Name of the organization	Emplo	Employer identification number	
IOWA BEEF CATT	IOWA BEEF CATTLE PRODUCERS ASSOCIATION	42-0931773	
Part i General In	Part I General Information on Grants and Assistance		
1 Does the organizate the selection crite	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	X Yes	ů

X Yes Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to SEE PART IV 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance?

1 (a) Name and address of organization	(b) FIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non-cash	(f) Method of valuation	(a) Description of	(h) Purpose of grant
or government		if applicable		assistance	(book, FMV, appraisal, other)	non-cash assistance	or assistance
(I) IOWA STATE UNIVERSITY							
	42-6004224	42-6004224 GOVERNMENT	37,069.	.0			RESEARCH
(2) NATIONAL CATTLEMEN'S BEEF ASS							
9110_ENICHOLS_AVENUE							PROMOTION OF
	84-0738973 501 (C)	501 (C) (6)	670,100.	0.			BEEF
(3) RONALD MCDONALD HOUSE CHAR. O				-			
1411_PLEASANT_ST							SUPPORT FOR
	42-1117423 501 (C)	501 (C) (3)	59,613.	.0			PROGRAMS
(4) RONALD MCDONALD HOUSE CHAR. O							
730 HAWKINS DRIVE							SUPPORT FOR
IOWA CITY, IA 52246	42-1189783 501 (C)	501 (C) (3)	59,613	0.			PROGRAMS
(5) RONALD MCDONALD HOUSE CHAR. 0							
							SUPPORT FOR
	42-1369988 501 (C)	501 (C) (3)	59,613.	0			PROGRAMS
9							
(8)							
	3) and government o	organizations listed	ın the line 1 table			•	4
3 Enter total number of other organizations listed in the line 1 table	ions listed in the line	1 table		:		•	
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	, see the Instruction	is for Form 990.		TEEA3901L 11/30/12	11/30/12	Schedul	Schedule I (Form 990) (2012)

Page 2 Schedule I (Form 990) (2012) IOWA BEEF CATTLE PRODUCERS ASSOCIATION

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.

Part III can be duplicated if additional space is needed.

2012

SCHEDULE I, PART IV - SUPPLEMENTAL INFORMATION

PAGE 3

CLIENT 144020

IOWA BEEF CATTLE PRODUCERS ASSOCIATION DBA IOWA BEEF INDUSTRY COUNCIL

42-0931773

2/12/14

03·35PM

PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANTS FUNDS IN U.S. (CONTINUED)

THE ORGANIZATION SPONSORS THE GOVERNOR'S CHARITY STEER SHOW. THE NET PROCEEDS FROM THIS EVENT ARE DISTRIBUTED TO THE THREE RONALD MCDONALD HOUSE CHARITIES IN IOWA AS GENERAL SUPPORT FOR THOSE PUBLIC CHARITIES' PROGRAMS.

THE ORGANIZATION PROVIDES FUNDING TO IOWA STATE UNIVERSITY FOR RESEARCH PROJECTS.

THE ORGANIZATION RECEIVES REGULAR REPORTS FROM THE RESEARCHER. FINAL PAYMENT IS

WITHHELD UNTIL A COMPLETE REPORT IS GIVEN.

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ.

IOWA BEEF CATTLE PRODUCERS ASSOCIATION 42-0931773 IOWA BEEF INDUSTRY COUNCIL FORM 990, PART VIII, LINE 2A NATIONAL BEEF CHECKOFF FEES THE ASSOCIATION IS A QUALIFIED STATE BEEF COUNCIL. THE ASSOCIATION COLLECTS NATIONAL BEEF CHECKOFF FEES UNDER THE BEEF CHECKOFF PROGRAM, WHICH WAS ESTABLISHED NATIONAL BEEF CHECKOFF FEES ARE ASSESSED AT \$1 PER AS PART OF THE 1985 FARM BILL. HEAD ON THE SALE OF CATTLE, WITH HALF THE PROCEEDS RETAINED BY THE STATE COUNCILS. CHECKOFF FEES ARE PAID BY THE PRODUCERS. THE CHECKOFF ASSESSMENT IS MANDATORY. FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC DAN COOK, DIRECTOR AND DARYL STROHBEHN, DIRECTOR HAVE A BUSINESS RELATIONSHIP. ARE ASSOCIATES IN THE ANGUS SEEDSTOCK BUSINESS, WHICH MEANS THEY MANAGE AND MARKET THEIR BREEDING STOCK UNDER ONE BANNER. EACH OWNS THEIR OWN COWS INDIVIDUALLY WHILE SHARING HERD BULLS UNDER JOINT OWNERSHIP. FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS A COMPLETE RE-WRITE WAS DONE TO THE ORGANIZATION'S BY-LAWS. A LIST OF THE SIGNIFICANT CHANGES ARE AS FOLLOWS: ARTICLE 2 - DEFINITIONS - SECTION 2.4 AND 2.5 - DEFINES OFFICER TEAM VS. EXECUTIVE COMMITTEE ARTICLE 3 - MEMBERS; DUES; VOTING -ALL NEW; DEFINES IBCPA MEMBERS AND THEIR ROLE ARTICLE 4 - MEMBERSHIP MEETINGS - SECTION 4.1.3 - NOMINATIONS - CHANGED TO 90 DAYS PRIOR TO ANNUAL MEETING FOR APPOINTMENT OF NOMINATING COMMITTEE ARTICLE 4 - MEMBERSHIP MEETINGS - SECTION 4.1.3 - NOMINATIONS - LINES 8-10 - NOMINATING COMMITTEE SUBMITS NAMES TO EXEC. COMMITTEE RATHER THAN NOMINATES ARTICLE 4 - MEMBERSHIP MEETINGS - SECTION 4.2 - SPECIAL MEMBERSHIP MEETINGS - ADDED A 10-DAY NOTICE BEFORE HOLDING A SPECIAL MEETING. ARTICLE 4 - MEMBERSHIP MEETINGS - SECTION 4.3.3 - CONDUCT OF MEMBERSHIP MEETINGS QUORUM - WE DEFINED 20 PRODUCERS AS A QUORUM FOR THE ANNUAL IBCPA MEETING.

Name of the organization IOWA BEEF CATTLE PRODUCERS ASSOCIATION DBA IOWA BEEF INDUSTRY COUNCIL	Employer identification number 42-0931773
FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL D	OCUMENTS
ARTICLE 4 - MEMBERSHIP MEETINGS - SECTION 4.3.4 - TYPE OF MEETING	- SIMPLIFIED HOW THE
ANNUAL MEETING COULD BE HELD.	
ARTICLE 5 - BOARD OF DIRECTORS -SECTION 5.1 - POWERS AND DUTIES	- THE LIST OF DUTIES
WAS_REMOVED.	·
ARTICLE 5 - BOARD MEMBERSHIP - SECTION 5.2.3 - THE NATIONAL-LEVEL	DIRECTORS - WE DEFINED
THE USMEF AND FEDERATION DIRECTORS AS "NATIONAL-LEVEL DIRECTORS	}. <u>"</u>
ARTICLE 5 - BOARD OF DIRECTORS - SECTION 5.3.2 - TERMS AND LIMITS	- THE SEVEN APPOINTED
PRODUCER-DIRECTORS - LIMITS TO 3 ONE-YEAR TERMS.	
ARTICLE 5 - BOARD OF DIRECTORS - SECTION 5.3.3 - TERMS AND LIMI	TS - NATIONAL-LEVEL
DIRECTORS - LIMITS REVISED.	·
ARTICLE 5 - BOARD OF DIRECTORS - SECTION 5.5 - REMOVAL OF DIRECTOR	RS - THIS IS A SIMPLE
METHOD THAT ALLOWS EXCUSED ABSENCES.	
ARTICLE 5 - BOARD OF DIRECTORS - MEMBERSHIP MEETINGS - SECTION 5.0	6.5 - TYPE OF MEETING -
THIS ADDRESSES HOLDING A MEETING/CONDUCTING BUSINESS VIA EMAIL.	
ARTICLE 6 - OFFICERS - SECTION 6.1 - ELECTION; TERM; TERM LIMIT	<u>'S</u>
ARTICLE 6 - OFFICERS - SECTION 6.2 - REMOVAL OF AN OFFICER	·
ARTICLE 6 - OFFICERS - SECTION 6.4 - OFFICER TEAM. DEFINES OFF	CICER TEAM AND
RESPONSIBILITIES.	
THE BOARD APPROVED A BOARD CODE OF ETHICS WHICH OUTLINES THE OF	RGANIZATION'S BOARD
MEMBER EXPECTATIONS. EACH BOARD MEMBER SIGNS AN ANNUAL ACKNOWL	EDGEMENT STATING THAT
THEY HAVE READ AND UNDERSTAND THE BOARD CODE OF ETHICS, THAT TH	HEY DO NOT HAVE ANY
RELATIONSHIPS AS DEFINED IN THE BOARD CODE OF ETHICS THAT MAY C	CONFLICT WITH THE
MEMBER'S DUTIES AND RESPONSIBILITIES OTHER THAN THOSE THAT HAVE	BEEN DISCLOSED, THAT
THEY HAVE NOT VIOLATED THE BOARD CODE OF ETHICS, AND THAT THEY	ARE NOT AWARE OF ANY
VIOLATIONS OF THE BOARD CODE OF ETHICS.	

IOWA BEEF CATTLE PRODUCER DBA IOWA BEEF INDUSTRY CO		42-0931773
FORM 990, PART VI, LINE 6 - EXPLANATION	OF CLASSES OF MEMBERS OR SHAR	REHOLDER
ASSOCIATION MEMBERSHIP IS OPEN TO	ANY PERSON BREEDING, PRODUCIN	NG, OR FEEDING CATTLE
IN IOWA. MEMBERS MAY VOTE FOR ONE	NOMINEE FOR EACH POSITION ON	THE BOARD FOR WHICH
AN ELECTION IS HELD. FIVE MEMBERS	OF THE BOARD ARE ELECTED.	
FORM 990, PART VI, LINE 7A - HOW MEMBER	S OR SHAREHOLDERS ELECT GOVE	RNING BODY
ANY PERSON OWNING CATTLE IS ELIGIBE	LE TO VOTE AT THE IBCPA ANNUA	AL MEETING. THE VOTE
IS FOR AN ELECTED DIRECTOR ON THE	BOARD.	·
FORM 990, PART VI, LINE 8 - EXPLANATION	OF NO CONTEMPORANEOUSLY DOC	UMENTATION OF MEETINGS
THERE ARE NO COMMITTES WITH AUTHOR	TY TO ACT ON BEHALF OF THE G	GOVERNING BODY.
FORM 990, PART VI, LINE 11B - FORM 990 F	REVIEW PROCESS	·
A DRAFT COPY OF THE FORM 990 IS MA	DE AVAILABLE TO MANAGEMENT AN	ND THE BOARD FOR
REVIEW. THE FORM 990 WAS REVIEWED	AT THE MARCH 11, 2014 MEETIN	IG OF THE BOARD OF
DIRECTORS WHICH WAS HELD PRIOR TO	FILING THE FORM 990.	·
FORM 990, PART VI, LINE 12C - EXPLANATIO	N OF MONITORING AND ENFORCEMI	ENT OF CONFLICTS
OFFICERS, DIRECTORS AND STAFF ARE	REQUIRED TO DISCLOSE ANY CONF	LICTS OF INTEREST ON
AN ANNUAL BASIS. IF IT IS BROUGHT	TO THE ORGANIZATION'S ATTENT	TION THAT THERE IS A
CONFLICT, THE ORGANIZATION INVESTIG	GATES THE CONFLICT. BOARD ME	EMBERS ARE ASKED TO
REFRAIN FROM VOTING ON ANY MOTIONS	THAT COULD BE A PERSONAL COM	NFLICT OF INTEREST.
FORM 990, PART VI, LINE 15A - COMPENSAT	ION REVIEW & APPROVAL PROCESS	- CEO, TOP MANAGEMENT
PAY INCREASES ARE DISCRETIONARY AN	ARE NOT GUARANTEED. RECOMM	MENDATIONS FOR PAY
CHANGES WILL BE MADE BY THE EXECUT	IVE DIRECTOR AND MUST BE APPE	ROVED BY THE OFFICER
TEAM AND APPROVED BY THE OFFICER T	EAM AS PART OF THE BUDGETING	PROCESS. SALARY
ADJUSTMENTS FOR THE EXECUTIVE DIRE	CTOR WILL BE APPROVED BY THE	OFFICER TEAM;
COMPARATIVE SALARIES WILL BE USED.		·
THE ORGANIZATION DOES NOT COMPENSA	TE ANY OTHER OFFICERS AND HAS	NO EMPLOYEES THAT
MEET THE DEFINITION OF A KEY EMPLO	YEE.	

Schedule 0 (Form 990 or 990-EZ) 2012	Page 2
Name of the organization IOWA BEEF CATTLE PRODUCERS ASSOCIATION DBA IOWA BEEF INDUSTRY COUNCIL	Employer identification number 42-0931773
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBL	
GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS	ARE AVAILABLE UPON REQUEST.
	·
	·
	·

Form **8868**

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

OMB No 1545-1709

•	re filing for an Automatic 3-Month Extension, cor re filing for an Additional (Not Automatic) 3-Mont					
•	nplete Part II unless you have already been grante				•	
Electronic corporation request an e Associated	filing (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which multing of this form, visit www.irs.gov/efile and click of	If you need automatic) I or Part II w ust be sent	d a 3-month automatic extension of time 3-month extension of time. You can ele th the exception of Form 8870, Information to the IRS in paper format (see instructi	to file ctroni Retur	e (6 months cally file Fo n for Transf	orm 8868 to ers
Part I	Automatic 3-Month Extension of Time	Only sub	omit original (no copies needed).		-	
A corporati	on required to file Form 990-T and requesting an	automatic 6	month extension - check this box and	ompl	ete Part I c	only • 🗍
All other co income tax	orporations (including 1120-C filers), partnerships, returns.	REMICs, ar	nd trusts must use Form 7004 to request Enter filer's identif			
	Name of exempt organization or other filer, see instructions			Emplo	yer identificati	on number (EIN) or
Type or print	IOWA BEEF CATTLE PRODUCERS ASSEDBA IOWA BEEF INDUSTRY COUNCIL Number, street, and room or suite number if a P.O. box, see in	<u>L</u>	ON .		0931773	
File by the due date for	the last the				number (55N)	
filing your	P.O. BOX 1490 City, town or post office, state, and ZIP code. For a foreign add.					
return See instructions		ress, see msuu	CHOIS			
	AMES, IA 50014-1490					
Enter the F	teturn code for the return that this application is fo	or (file a sep	parate application for each return)			01
Application Is For	1	Return Code	Application Is For			Return Code
Form 990 or	Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-E	BL	02	Form 1041-A			08
Form 4720 (Form 4720 (individual) 03 Form 4720 09					09
Form 990-F	PF	04	Form 5227			10
Form 990-1	(section 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-1	(trust other than above)	06	Form 8870			12
Telepho If the o If this is check to the extra until The e 2 If the	ne No. (515) 296-2305 rganization does not have an office or place of but it is for a Group Return, enter the organization's four his box If it is for part of the group, organization is for. est an automatic 3-month (6 months for a corporation 5/15, 20 14 _, to file the exempt organization is for the organization's return for: calendar year 20 or xtax year beginning 10/01, 20 12 tax year entered in line 1 is for less than 12 month hange in accounting period	digit Group check this be required to the anization research	e United States, check this box Exemption Number (GEN) and attach a list with the naive life Form 990-T) extension of time turn for the organization named above			3 , ,
	application is for Form 990-BL, 990-PF, 990-T, 4 fundable credits. See instructions		, enter the tentative tax, less any	3 a	\$	0.
	application is for Form 990-PF, 990-T, 4720, or 6 ents made. Include any prior year overpayment al			3 6	\$	0.
c Balar EFTP	nce due. Subtract line 3b from line 3a Include you 'S (Electronic Federal Tax Payment System). See	r payment v instructions	with this form, if required, by using	3 c	\$	0.
Caution. If y	ou are going to make an electronic fund withdrawal wistructions.	rith this Form	8868, see Form 8453-EO and Form 8879-E	O for		