EXTENDED TO JUNE 15, 2018

Return of Organization Exempt From Income Tax • Under section 501(c). 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

Open to Public Inspection

Form **990** (2016)

Den	triment of th	or of the Treasury ► Do not enter social security numbers on this form as it may be made public							
<u>Interi</u>	ral Fevenus	e Service	► Information about	t Form 990 and its instructions	is at www	ırs gov/form990		Inspection	
, A I	or the 2	2016 calend	ar year, or tax year beginning	AUG 1, 2016 and	d ending	<u>JUL 31,</u>	2017		
éře (Cneck it	C Name of	forganization			D Employe	er identificat	ion number	
·	abblicaple	CATT	LE MARKETING INFO	ORMATION SERVICE					
3 4	daress chunge	INC			•				
₹ 💳	Name		usiness as CATTLEFAX			-	84-058	22005	
~ ;⊢	_lcrange ∏Initial			A delivered to etreet address.	10			13093	
EB:	irelum 		and street (or P 0 box if mail is no	i denvered to street adoress)	Room/suit	E Telephor		CO4 0222	
ا .	/ieturn:		E NICHOLS AVE				(330)	694-0323	
G Ø₽-	termin- aled Amended	.1	own, state or province, country, a	0 ,		G Gloss recoi	pts \$	<u>8,122,751.</u>	
	Tieturn	CENT	ENNIAL, CO 8011			H(a) is this	a group retu		
<u> </u>	Applica-	F Name a	nd address of principal officer ${f R}_{i}$	ANDY BLACH	MIC		ordinates?	Yes X No	
<u>~</u>	pending	9110	E. NICHOLS AVE.,	CENTENNIAL, CO	8011/2	H(b) Are all SL	ubordinates inclu	ded? Yes No	
Ŀ.	Tax-exen	npt status	501(c)(3) X 501(c) (6) ◀ (insert no) 4947(a)(1	1) 8/ [52	27 If "No,"	" attach a list	t (see instructions)	
J 1	Website ²	▶ WWW.	CATTLE-FAX.COM				exemption n		
			X Corporation Trust	Association Other	L Yea			tate of legal domicile CO	
_		Summary					<u> </u>		
_			e the organization s mission or m	nost significant activities COT.	T.Ε/Cጥ / Δ	NALVZE I	דא מיזע דו	TCARDING	
če			TLE INDUSTRY	lost significant activities COM	nrci/v	TANDI TO I	DRIB M	JOHNDING	
∮ ∠IJIIS Activities & Governance	1 -				1 (
/eri		heck this bo	,	scontinued its operations or disp	osea ot ma	ire than 25% o	!!!	TS O	
é ဗိ	ł		ting members of the governing bo	1			3	<u> </u>	
<u>م</u>			lependent voting members of the		}		4	9	
es es es	5 To	otal number	of individuals employed in calend	lar year 2016 (Part V, line 2a)	1		5	<u> 17</u>	
21178 ivities	6 To	otal number	of volunteers (estimate if necessa	ary)			6	9	
Åcti	7 a To	otal unrelated	d business revenue from Part VIII	, column (C), line 12			7a	216,066.	
EX	b Ne	et unrelated	business taxable income from Fo	orm 990 T, line 34			7b	<12,732.>	
						Prior Ye	ar	Current Year	
APK ue	8 C	ontributions	and grants (Part VIII, line 1h)		Γ	1,724	.974.	1,702,922.	
Revenue	1		ce revenue (Part VIII line 2g)			2,930		2,534,444.	
~ ĕ	i	•	come (Part Vill column (A), lines	3 4 and 7d)	<u> </u>		,901.	181,974.	
. بي چي			e (Part VIII, column (A), lines 5, 6d		-		,796.	210,066.	
. , ,	1			,	. H	4,970		4,629,406.	
			add lines 8 through 11 (must ed						
C)	1		milar amounts paid (Part IX colur	149	,893.	66,700.			
	1	,	to or for members (Part IX, colum	• •	-	2 100	0.	0.	
es			r compensation, employee benefi	D)	3,126	2,718,267.			
Expenses	16a Pr	rofessional fi	undraising fees (Part IX, column (A), line 11e)			0.	<u> </u>	
ă	b To	otal fundraisi	ing expenses (Part IX, column (D)	, line-25)	0.				
ш	17 O	ther expense	es (Part IX, column (A), lines 11a	11d 11f 24é)		1,295	,570.	<u> 1,178,201.</u>	
	18 To	otal expense	s Add lines 13 17 (must equal Pa	art IX, column (A), line 25)	ad L	4,571	,541.	3,963,168.	
	19 R	evenue less	expenses Subtract line 18 from	line 12 FED & G COAR		398	,479.	666,238.	
or ces				FEB 1 3 2018	S-C	Beginning of Cur	rent Year	End of Year	
Net Assets or Find Balances	20 To	otal assets (F	Part X, line 16)			6,524		7,152,780.	
Ass	21 To	,	(Part X, line 26)	CCO IN, UT	'	1,358		1,166,926.	
Set	22 N		fund balances Subtract line 21 f		i	5,166		5,985,854.	
		Signature		10117 mile 20		3,100	,030.	3,303,031.	
			I declare that I have examined this ret	una includina accompanyina cebadi	ulae and etate	mente and to th	a bact of my k	nowledge and helief it is	
				· · · · ·			-	nowieuge and belief, it is	
true	, correct	and continue	Declaration of preparer (other than o	inicer) is based on an information of	Willett prepar	rei has any know	leage		
_	İ	Sign 2	e of officer	Will -		Date	17//8		
Sıg	1	•				Dati	3		
Hei	e i		Y BLACH, CEO					,	
	5	Type or p	orint name and title						
	þ	Print/Type prep	parer's name	Preparer's signature		Date	Check	PTIN	
Paid	<u>7</u>	AMEY L	CAMP			1/29/18	self employed	P01382513	
Pre	parer F	ıım's name	CAUSEY DEMGEN	& MOORE PC		Firn	n's EIN	84-1158905	
Use	Only F	irm's address	1125 17TH ST.						
	1		DENVER, CO 802			Pho	one no 303	-296-2229	
May	v the IRS	S discuss the	s return with the preparer shown					X Yes No	

LHA For Paperwork Reduction Act Notice, see the separate instructions.

	990√2016) · INC 84+0583'095 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission TO COLLECT AND ANALYZE DATA REGARDING THE CATTLE INDUSTRY.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990 EZ? We will be a did to the control of
_	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
40	revenue, if any, for each program service reported
4a	MARKET RESEARCH AND ANALYSIS: COLLECT, RESEARCH, AND ANALYZE DATA WITH RESPECT TO RAISING AND/OR FEEDING OF CATTLE IN ORDER TO PROMOTE COMMON BUSINESS INTERESTS AND ECONOMIC STABILITY OF THE CATTLE INDUSTRY; CONDUCT EDUCATIONAL SEMINARS AND RESEARCH PROJECTS RELATED TO THE CATTLE INDUSTRY. ATTENDANCE AT VARIOUS PROGRAMS IS ESTIMATED AT 5,000 PEOPLE; DATA PUBLISHED IN VARIOUS REPORTS WERE SENT TO APPROXIMATELY
	4,500 PEOPLE.
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$) CONSULTING FEES: PROVIDE EXPERTISE AND ASSISTANCE TO SUBSIDIARY FOR COLLECTING AND ANALYZING DATA IN CONNECTION WITH THE CATTLE INDUSTRY.
4c	(Code) (Expenses \$) (Revenue \$)
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)
 4е	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶
	Form 990 (2016

CATTLE MARKETING INFORMATION SERVICE, Form 990 (2016) · INC Part IV | Checklist of Required Schedules

Page 3

632003 11-11-16

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		165	NO
r	If "Yes," complete Schedule A	1	Ì	Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
Ŭ	public office? If "Yes," complete Schedule C, Part I	3	1	Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	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			
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
•	Schedule D, Part III	8		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			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	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	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	1		
	If "Yes," and if 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
-	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		[v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? 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 other assistance to	40		Х
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	 	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		X
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	127
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
	Complete ochedule d, Falt III		990	(2016

84 + 0583095

Form **990** (2016)

Pai	t IV Checklist of Required Schedules (continued)		· · · ·	
		<u></u>	Yes	
	Did the organization operate one or more hospital facilities? If "Yes " complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX column (A), line 1? If "Yes " complete Schedule I, Parts I and II	21	X	 -
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		[
	Part IX, column (A), line 27 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		1	Ì
	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		1	
	Schedule K. If "No", go to line 25a	24a	<u> </u>	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		1]
	any tax exempt bonds?	24c	ļ	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in an excess benefit		1	
	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			ì
	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		1	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 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, substantial			İ
	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	1	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			T
	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		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an office	ər,		
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L. Part IV	28c	1	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		Х
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, Part II, III, or IV, and			1
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	350	1 -	
~	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization		1	1
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	00	†	+
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
	I the second of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the second contract of the se	,		

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

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

Part V Statements Regarding Other IRS Filings and Tax Compliance Check Ischedulo O contains a response or note to any line in the Fart V Statements (Schedulo O contains a response or note to any line in the Fart V Statement of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charles of the Charl	Form	990 (2016) INC 84 - 0583	095	P	<u>age 5</u>
a Eafer the number reported in Box 3 of Form 1096 Enter 0 if not applicable b Enter the number of Forms W 2G included in land 12 Enter 0 if not applicable c Del the organization constraints with No. 12 Enter 0 if not applicable b Enter the number of employees reported on land 12 Enter 0 if not applicable c Del the organization constraints with No. 12 Enter 0 if not applicable c Del the organization constraints with No. 12 Enter 0 if not applicable c Del the organization constraints with No. 12 Enter 0 if not applicable c Del the organization organization organization for in the value of the organization organization for interest in the color of the color organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organization organ	Par				
tale Enter the number reported in Box 3 of Form 1006. Enter 0 if not applicable in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 10 in 1		Check if Schedule O contains a response or note to any line in this Part V			
b Effect the number of Forms W.26 included in line 12. Enter 0 if not applicable on the following any application comply with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with backup with				Yes	No
Description of the organization comply with backup withholding rules for reportable payments to vendors and reportable gamming (gambling) writings to prize witness? 2 Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, life for the catendar year ending with or within the year covered by this return. 3 If I all least one is reported on the 28, did the organization file all required federal employment tax returns? Note. If the sum of lines 14 and 24 is greater than 250, you may be required to e-fee (see instructions) 3 Did the organization have unrised bit bursies gross incorne of \$1.000 or more dumpt the vear? 3 B V Yes. That is the did Form 980 Tor this year? If No. 1 of line 30, provide an explanation in Schedule O 5 If Yes. This is the did Form 980 Tor this year? If No. 1 of line 30, provide an explanation in Schedule O 6 If Yes. This is the did Form 980 Tor this year? If No. 1 of line 30, provide an explanation in Schedule O 8 If Yes. This is the organization that foreign country. See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5 Was the organization a party to a prohibited tax shelter transaction at any time dump the tax year? 5 B Ves. To line 5a or 5b, did the organization file form 8868 T? 6 If Yes. To line 5a or 5b, did the organization file form 8868 T? 6 If Yes. To line 5a or 5b, did the organization file form 8868 T? 8 If Yes. To line 5a or 5b, did the organization file form 8868 T? 9 If Yes. To line 6a or 5b, did the organization manual gious receipts that are normally gleater than \$100,000, and did the organization solicit any contributions that may receive deductible as charitable contributions under section 170(e). a Did the organization that may receive deductible contributions under section 170(e). a Did the organization self, exchange, or otherwise dispose of tanglile personal property for which it was required to the point of the form 8893 as required? 7 D If Wes. This di	1a	Enter the number reported in Box 3 of Form 1096 Enter -0 if not applicable 1a 6	1		ĺ
Spambling) winnings to prize winness? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return 5 If all least one is reported on line 25, did the organization file all required federal employment tax returns? 7 Note. If the sum of lines is a land 2 a is greater than 250, your may be required to e-life (see instructions) 8 Did the organization have unrelated business gross income of \$1,000 or more during the year? 8 A X If all least one to report of the size of 17 Note; to line 30, power of an explanation on Schedule O 8 A If 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 accounts)? 8 A If Yes, "enter the name of the foreign country Implication is a bank account, securities account, or other financial accounts (FBAR) 8 Was the organization party to a prohibited tax sheller fransaction at any time during the tax year? 9 A Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductibles of the organization than \$100,000, and did the organization solicit any contributions that were not tax deductibles contributions under section 170(c). 9 A Organizations that may receive deductible contributions under section 170(c). 9 B If Yes, "did the organization noticy the donor of the value of the goods or services provided? 7 A Organizations that may receive deductible contributions under section 170(c). 9 B If Yes, "indicate the number of Forms 8822 feed during the year. 10 Did the organization received a contribution of qualified intellectual property, did the organization file for message and the section of the value of the goods or services provided? 9 B Did the organization received a contribution of underty, to p	b	Enter the number of Forms W 2G included in line 1a. Enter 0- if not applicable.	Ì		1
2a Setter the number of employees reported on Form W.3. Transmittal of Wage and Tax Statements. 2a	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
teed for the calendar year ending with or within the year covered by this return 2a		(gambling) winnings to prize winners?	1c	X	<u></u>
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, If the sum of lines 1 a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 5a If "Yes," has it liefd a Form 990.T for this year? If "No," to line 3b, provide an explanation in Schedule 0 5a At any time during the catendary year, did the organization have an inferest 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)? 5b If "Yes," the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5a Was the organization have the foreign country (such as a bank account, securities account, or other financial accounts (FBAR) 5a Was the organization and party to a prohibited tax sheller transaction? 5b If "Yes," to line 5a of 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c If "Yes," to line 5a of 5b, did the organization that it was or is a party to a prohibited tax sheller transaction? 5c If Yes, "In the 5a of 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d bit if yes," did the organization include with every solicitations under section 170(c). 8d bit if yes, and the section of the value of the goods or services provided? 9b If "Yes," did the organization notify the donor of the value of the goods or services provided? 1c In the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 1c In the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 1c In the organization receive any funds, directly or indirectly, to	2a	Enter the number of employees reported on Form W 3, Transmittal of Wage and Tax Statements,	_ {		
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-rite (see instructions) 3 Did the organization have unrietated business gross income of \$1,000 or more during the year? 5 If "Yes," has it filed a Form 990°T for this year? If "No," to line 30, provide an explanation in Schedule O 4 All At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account) as foreign country (such as a bank account, earner of the foreign country (such as a bank account, earner of the foreign country (such as a bank account, earner of the foreign country (such as a bank account, earner of the foreign country (such as a bank account, earner) 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 If "Yes," the line Sa of 50, bid the organization that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes," the line Sa of 50, bid 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? 6 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). 8 If "Yes," indicate the number of Forms 8828 filed during the year 9 If "Yes," indicate the number of Forms 8828 filed during the year 9 If "Yes," indicate the number of Forms 8828 filed during the year 9 If "Yes," indicate the number of Forms 8828 filed during the year 9 If "Yes," indicate the number of Forms 8828 filed during the year 9 If "Yes," indicate the number of Forms 8828 filed during the year pay premiums on a personal benefit contract? 7 If The organization received a contribution of ciny, business, or other vehicl		filed for the calendar year ending with or within the year covered by this return 2a17	- {		
3a Dd the organization have unrelated business gross income of \$1,000 or more during the year? 8 If Yes, "has it filed a Form 990" for this year? If "No," to fine 3b, provide an explanation in Schedule O 3b X 3d X 3d X 3d X 3d A Al any time during the catendar 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 accounts (FBAR) 8d einstructions for Ming requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 8d was the organization have it as wheter transaction at any time during the tax year? 9 Did any taxable party notify the organization that it was or is a party to a prohibited unusual entry of the organization that it was or is a party to a prohibited and shelter transaction? 8d Does the organization that an 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? 8d If "Yes," that were not tax deductible as charitable contributions? 9d If "Yes," that were not tax deductible as charitable contributions? 9d If "Yes," that were not tax deductible on the value of the goods of the organization include with every solicitation an express statement that such contributions or girls were not tax deductible? 9d Organization selective a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9d If "Yes," did the organization notify the donor of the value of the goods or services provided? 9d If "Yes," indicate the number of Forms 8282? Red during the year 9d If "Yes," indicate the number of Forms 8282? Red during the year 9d If "Yes," indicate the number of Forms 8282 Red during the year 9d If "Yes," indicate the number of Forms 8282 Red during the year 9d If "Yes," indicate the number of Forms 8282 Red during the year 9d If the organization received a contrib	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	1
3a Dd the organization have unrelated business gross income of \$1,000 or more during the year? 8 If Yes, "has it filed a Form 990" for this year? If "No," to fine 3b, provide an explanation in Schedule O 3b X 3d X 3d X 3d X 3d A Al any time during the catendar 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 accounts (FBAR) 8d einstructions for Ming requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 8d was the organization have it as wheter transaction at any time during the tax year? 9 Did any taxable party notify the organization that it was or is a party to a prohibited unusual entry of the organization that it was or is a party to a prohibited and shelter transaction? 8d Does the organization that an 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? 8d If "Yes," that were not tax deductible as charitable contributions? 9d If "Yes," that were not tax deductible as charitable contributions? 9d If "Yes," that were not tax deductible on the value of the goods of the organization include with every solicitation an express statement that such contributions or girls were not tax deductible? 9d Organization selective a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9d If "Yes," did the organization notify the donor of the value of the goods or services provided? 9d If "Yes," indicate the number of Forms 8282? Red during the year 9d If "Yes," indicate the number of Forms 8282? Red during the year 9d If "Yes," indicate the number of Forms 8282 Red during the year 9d If "Yes," indicate the number of Forms 8282 Red during the year 9d If "Yes," indicate the number of Forms 8282 Red during the year 9d If the organization received a contrib		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
b 1"Yes," has if lied a Form 990°T for this yea? If 1No," to line 30, provide an explanation in Schedule O 4 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 floreign country (such as a bank account, securities account, or other financial account?) 5 If "Yes," enter the name of the foreign country 5 See instructions for fining requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5 Was the organization a party to a prohibited tax shelter transaction or tany time during the tax year? 5 Did any taxable party notify the organization file Form 8886 1? 6 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 schariable contributions? 6 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as chariable contributions? 7 Organizations that may receive deductible contributions under section 170(c). 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 8 If "Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 10 Did the organization received a contribution of the value of the goods or services provided? 11 Did the organization during the year, pay premiums, directly, or pay premiums on a personal benefit contract? 12 Did the organization foreceive any funds, directly or indirectly, or pay premiums on a personal benefit contract? 13 If the organization received a contribution of case, boats, anjanese, or other vehicles, did the organization file Form 8899 as required? 14 If the organization received a contribution of case, boats, anjanese, or ot	За		3a	Х	l
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, ecounts, or other financial accounts; ≥ 1/1 Yes, and the financial accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions of thing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions of thing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) See instructions of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property of the property o					
If "Yes," enter the name of the foreign country (such as a bank account, securities account, or other financial accountly? If "Yes," enter the name of the foreign country by See instructions for fring requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Sae was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Dd any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b L "Yes." to line Sa or Sb. did the organization file Form 886 17 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 chanitable contributions? 6a X X ** 1 "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). 8 If "Yes." did the organization notify the donor of the value of the goods or services provided? 7 Do the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to life Form 8282? 8 If "Yes," indicate the number of Forms 8282 filled during the year 9 Dot the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7 To the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 To the organization may are accounted unton of qualified intellectual property, did the organization file Form 8899 as required? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make a distribution to a donor advisor of the maintain of a form 1098.07 8 Sponsoring organizations maintaining do					
b if "Yes," enter the name of the foreign country \$\instructions for tiling requirements for FindEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Dd any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line Sa or 5b, did the organization file Form 8886 f? 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? 6a X 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d bit the organization receive a payment in excess of \$75 made partly as a contribution and bartly for goods and services provided to the payor? 9b If "Yes," did the organization notity the donor of the value of the goods or services provided? 10b If the organization receive a payment in excess of \$75 made partly as a contribution and bartly for goods and services provided to the payor? 10b If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 10b If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 10c If the organization received a contribution of qualific entitlectual property, did the organization file Form 8899 as required? 10b If the organization received a contribution of qualific entitlectual property, did the organization file Form 8899 as required? 10c If the organization received a contribution of qualific entitlectual property, did the organization file Form 8899 as required? 11c If the organization have excess business holdings at any time during the year? 12c Sponsoring organization have excess bus		, , , , , , , , , , , , , , , , , , , ,	4a		Х
See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a. Was the organization a party to a prohibited tax sheter transaction at any time during the tax year? 5b. M.X. 5c. If "Yes," to line Sa or Sb, did the organization that it was or is a party to a prohibited tax shetter transaction? 5c. If "Yes," to line Sa or Sb, did the organization file Form 8886 17 5c. 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? 5c. J. The state of the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c. Organizations that may receive deductible contributions under section 170(c). 8d. If "Yes," did the organization notity the donor of the value of the goods or services provided? 7d. If "Yes," indicate the number of Forms 8282 filed during the year 9d. If "Yes," indicate the number of Forms 8282 filed during the year 10d. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 11d. If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 12d. If the organization have excess business holdings at any time during the year? 12d. Sponsoring organization have excess business holdings at any time during the year? 12d. Sponsoring organization have excess business holdings at any time during the year? 12d. Sponsoring organization make any taxable distributions under section 4966? 12d. Of the sponsoring organization make any taxable distributions under section 4966? 12d. Of the sponsoring organization make any taxable distributions under section 4966? 12d. Of the sponsoring organization make any taxable distributions under section 4966? 12d. Of the sponsoring organization have excess business holdin	b	·			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Dd any taxable party notify the organization file form 8886 f? 6c If "Yes," to line Sa or 5b, did the organization file form 8886 f?? 6d 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 chantable contributions? 6d If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 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? 9 Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 10 If "Yes," did the organization notify the donor of the value of the goods or services provided? 11 If "Yes," indicate the number of Forms 8282 filled during the year 12 If "Yes," indicate the number of Forms 8282 filled during the year 13 If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 14 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 15 If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 16 If the organization received a contribution of cars, boats, aprilanes, or other vehicles, did the organization file Form 8999 as required? 16 If the organization received a contribution of cars, boats, aprilanes, or other vehicles, did the organization file Form 1098-C? 17 If the organization received a contribution of payor the during the year? 18 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained b	-	·			}
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? b If "Yes," to line Sa or Sb, did the organization file Form 8886 T? Color to organization have annual gross recepts 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). b Did the organization is exposed to state a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? b If "Yes," indicate the number of Forms 8282 filed during the year Cold the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? Note the organization received a contribution of dars. botas, anyphanes, or other whickes, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? Sponsoring organization make any taxable distributions under section 4966? Section 501(c)(7) organization make any taxable distribution under section 4966? Section 501(c)(7) organizations. Either a Initiation fees and capital contributions included on Part VIII, line 12 Gross income from other sources (Bo not net amounts due or paid to other sources against amounts due or received in Form 990 in lieu of Form 1041? 10b Form 1041? Section 501(c)(29) qualified mon	5a	-	5a		х
c If "Yes." to line 5a or 5b, did the organization file Form 8886 T? 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 1 ax deductible as charactable contributions? b If "Yes." did the organization include with every solicitation an express statement that such contributions or gifts were not 1 ax deductible? 7b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$5^ made parity as a contribution and parity for goods and services provided to the payor? 7a If "Yes." did the organization notify the donor of the value of the goods or services provided? 6b If Yes." Indicate the number of Forms 8282 filed during the year 6c If If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8299 as required? 18 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. 19 Did the sponsoring organizations make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did 10 Did		• • • • • • • • • • • • • • • • • • • •	-	-	
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 charifable contributions? by it "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 include with every solicitation and parity for goods and services provided to the payor? 7 a Did the organization neceive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor? 7 b If "Yes," indicate the number of Forms 8282 field during the year of the form 8282? 7 c If "Yes," indicate the number of Forms 8282 field during the year of the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 d If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? 9 a Did the sponsoring organization make any taxable distributions under section 4966? 9 a Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 a Did the sponsoring organization make any taxable distributions under section 4966? 9 a Did the sponsoring organization make a distribution to a donor, donor advised fund maintained by the sponsoring organization make a distribution to a donor, donor advised fund maintained by th					 -
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 to goods and services provided to the payor? 7b 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? d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? f if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C? Sponsoring organization and any any any any any any any any any any			- 50		
b !! "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 !! "Yes." did the organization notify the donor of the value of the goods or services provided? c Did the organization get, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d !! "Yes." indicate the number of Forms 8282 filed during the year D dit he organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 the Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 the organization received a contribution of or substitution of cars, boats, amplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12 10a 11b 12c Section 501(c)(12) organizations. Enter a Gross income from other sources (00 not net amounts due or paid to other sources against amounts due or received from them) 12a Section 501(c)(29) qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O b Inter the amount of reserves on hand 13b 13c Life the amount of reserves on hand 14b 16d the organization is li	ou		62		x
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? 7 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 5 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6 d If "Yes," indicate the number of Forms 8282 filed during the year 9 e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 10 dit the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 11 fit the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 12 fit the organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 10 did the sponsoring organization make any taxable distributions under section 4966? 10 did the sponsoring organization make any taxable distributions under section 4966? 11 Section 501(c)(7) organization make a distribution to a donor, donor advisor, or related person? 12 Section 501(c)(2) organizations. Enter 13 Intitution fees and capital contributions included on Part VIII, line 12 14 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section 501(c)(2) organizations. Enter 13 Section 501(c)(2) organizations the atministrance issuers. 14 Intitude of the amount of texevers the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans in more than one state? Note See the instructions for additional informati	h	•	Ja		
7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made parity as a contribution and parity for goods and services provided to the payor? 7 To bit "Ves," did the organization notify the donor of the value of the goods or services provided? c Did the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 To did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 8 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C? 7 Th 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organization make any taxable distributions under section 4966? a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12 c Section 501(c)(7) 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) 11a 12a Section 601(c)(7) organization theatth insurance issuers. a is the organization licensed to issue qualifi	b		6h		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b C Did the organization notify the donor of the value of the goods or services provided? 7c In the organization self, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 8c If "Yes," indicate the number of Forms 8282 filed during the year 8c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 9c If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 9c If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098 C? 9c Sponsoring organizations maintaining donor advised funds. 9c Sponsoring organizations maintaining donor advised funds. 9c Sponsoring organizations maintaining donor advised funds. 9c Did the sponsoring organization make any taxable distributions under section 4966? 9c Did the sponsoring organization make any taxable distributions under section 4966? 9c Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9c Section 501(c)(7) organizations. Enter 10d Distribution from members or shareholders 11d Distribution from members or shareholders 11d Distribution from sources (50 not net amounts due or paid to other sources against amounts due or received from them) 12a Section 501(c)(2) qualified nonprofit health insurance issuers. 13 Section 501(c)(2) qualified nonprofit health insurance issuers. 13 Section 501(c)(2) qualified nonprofit health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O	7		OD		\vdash
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? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c			72		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c					
to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c g if the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h if the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? 9 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization intellectual propertities of contractions or related person? 10 Did the organization under sections for a diditional information the organi		· · · · · · · · · · · · · · · · · · ·	7.0		
d if "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 to the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 8 if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. 10 Did the sponsoring organization make any taxable distributions under section 4966? 9 a b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b Cection 501(c)(7) organizations Enter 10 Initiation fees and capital contributions included on Part VIII, line 12 10 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 10b 11 11 Section 501(c)(12) organizations. Enter 12 Gross income from either sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b 120 120 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 12b 11f "Yes," enter the amount of tax exempt interest received or accrued during the year 12b 12b 12a 13a 13a 13a 13b 13c 13b 13c 13c 13c 13c 13c 13c 13c 13c 13c 13c	C		70		1
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 but the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 but the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7 but the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. 9 Sponsoring organizations maintaining donor advised funds. 10 Did the sponsoring organization make any taxable distributions under section 4966? 9 but the sponsoring organization make any taxable distributions under section 4966? 9 but the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 but the sponsoring organizations Enter 10 alititation fees and capital contributions included on Part VIII, line 12 10 bif "oss receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter 12 a Gross income from embers or shareholders 13 a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 14 bif "Yes," enter the amount of tax exempt interest received or accrued during the year 15 a Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O be 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 in more than one state? Note See the instructions for additional information the organization must report on Schedule O be Enter the amount of reserves on hand 14 Did the orga	٦	1 1	76		
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? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make any taxable distributions under section 4966? Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c Liter Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		,	7.0		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Section 501(c)(12) organizations. Enter a Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12 Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 14 Did the organization receive any payments? If "No," provide an explanation in Schedule O 14 Uthe organization receive any payments for indoor tanning services during the tax year? 14	_				
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organizations Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIIII, line 12, for public use of club facilities 10 Did 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? 15 If "Yes," enter the amount of tax exempt interest received or accrued during the year 15 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explana					-
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b Center the amount of reserves on hand 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	_				
sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations Enter Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources 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? If "Yes," enter the amount of tax exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? Ital X Ital B Gross receipts, included on Form 990, Part VIII, line 12 B B Gross receipts, included on Form 990, Part VIII, line 12 B B B B B B B B B B B B B	_		/n		
9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation fees and capital contributions included on Part VIII, line 12 Initiation for section 501(c)(12) organizations. Enter Initiation forms from members or shareholders Initiation from sources (Do not net amounts due or paid to other sources against amounts due or received from them Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiation Initiati	0				
a Did the sponsoring organization make any taxable distributions under section 4966? b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 14a Did the organization receive any payments for indoor tanning services during the tax year? 14b 15c 16c 17c 17c 17c 17c 17c 17c 17	•		8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b 10 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		• • •	ο-		
10 Section 501(c)(7) organizations Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					
a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			96		\vdash
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 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? 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. a Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					
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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 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			}		ĺ
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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 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				1	ĺ
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? 12a If "Yes," enter the amount of tax exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b				İ	
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? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	b				
b If "Yes," enter the amount of tax exempt interest received or accrued during the year 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? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					İ
Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					1
Note See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b			 		-
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? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	а		13a		
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? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					
c Enter the amount of reserves on hand 13c 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	b		1		
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			{	}	
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			ļ		
· · · · · · · · · · · · · · · · · · ·		• • • • • • • • • • • • • • • • • • • •			X
	<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		000	<u> </u>

Form 990 (2016) INC 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 or note to any line in this Part VI Section 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 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 0 9 b Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X 2 officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors, or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Х Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or X more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or Х persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8 Х a The governing body? Х b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х organization's mailing address? If "Yes," provide the names and addresses in Schedule Q 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a Х b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy? 14 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? Х a The organization's CEO, Executive Director, or top management official 15a Х b Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section 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, and 990 T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Another's website X Upon request __ Own website → 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 State the name, address, and telephone number of the person who possesses the organization's books and records SAM BAILEY - (303) 694-0323

9110 E NICHOLS AVE #301. CENTENNIAL.

CO

80112

Form 990 (2016) · INC 84-0583095 Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line 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 report able compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099 MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)			(C				(D)	(E)	(F)
Name and Title	Average	(do		Posi		l than i	one	Reportable	Reportable	Estimated
	hours per	box	box unless person is both an officer and a director/trustee)			s bot	n an	compensation	compensation	amount of
	week	_	1		Tecto	7,003	(66)	from	from related	other
	(list any hours for	directi				-		the organization	organizations (W-2/1099 MISC)	compensation from the
	related	e 0	Stee			rsater		(W-2/1099-MISC)	(VV-2/1000 WIIOO)	organization
	organizations	individual trustee or director	Institutional trustee		yee	adus		(** = , ********************************		and related
	below	lana	TE PO	ia l	Key employee	est co	Je.			organizations
	line)	Indi	ılsı	Officer	Key	Highest compensated employee	Former			
(1) JEFF & WENDY SPARROWK	1.00									
IMMEDIATE PAST PRESIDENT	<u> </u>	X	<u></u>					0.	0.	0.
(2) TOM JENSEN	1.00									
FINANCE DIRECTOR	<u></u>	X			<u> </u>			0.	0.	0.
(3) MARK FRASIER	1.00									
INTERMOUNTAIN DIRECTOR		X	ļ					0.	0.	0.
(4) TODD ALLEN	1.00									_
FRESIDENT/CENTRAL DIRECTOR	<u> </u>	X	<u> </u>					0.	0.	0.
(5) NICK HUNT	1.00									_
MIDWEST DIRECTOR	<u> </u>	X					_	0.	0.	0.
(6) PONO VON HOLT	1.00		•					_	_	_
NORTHWEST DIRECTOR		X		_				0.	0.	0.
(7) DALE SMITH	1.00	ļ						_	_	_
PRESIDENT ELECT/SOUTHWEST DIRECTOR		Х	_					0.	0.	0.
(8) DON QUINCEY	1.00								_	_
SOUTHEAST DIRECTOR		X	<u> </u>					0.	0.	0.
(9) JERRY ADAMS	1.00			'					_	
NORTH PLAINS DIRECTOR		X	<u> </u>			_		0.	0.	0.
(10) RANDY BLACH	40.00	}						055 500		40 607
CHIEF EXECUTIVE OFFICER	1000		<u> </u>	X		_		377,500.	0.	48,687
(11) MICHAEL MURPHY	40.00	-						000 400		20 000
MARKET ANALYST/RISK MANAGE	40.00	ļ	-	_		X	_	289,400.	0.	38,890
(12) DUANE LENZ	40.00	-				7.7		220 217		40 546
GENERAL MANAGER	40.00	-	-	-	-	X		238,217.	0.	40,546
(13) ALAN SMITH	40.00	1				3,7		200 400		16 717
DIRECTOR OF PROTEIN RESEAR	40.00	├			-	X		289,400.	0.	46,717
(14) KEVIN GOOD	40.00	1				٠,		167 005		24 612
SENIOR ANALYST	40.00	-	-		-	X		167,825.	0.	34,613
(15) CHAD SPEARMAN	40.00	1				7.7		102 600	_	10 040
ANALYST	40.00	-		-	-	X	 	103,600.	0.	19,049
(16) LANCE ZIMMERMAN	40.00	1			ļ	\ v		120 102	^	32 920
ANALYST (12) TROY ARRIVANCE	40.00	+	-	-	-	X		139,183.	0.	32,829
(17) TROY APPLEHANS	40.00	1				Х		138,133.	0.	26,035
ANALYST			Ь	Щ_		Δ	<u> </u>	1 100,100.		Form 990 (2016

	990 (2016) INC									_84-058.	<u> 3095</u>		age o
Par	t VII Section A. Officers, Directors, Tru		ploy	ee <u>s</u>			ghe:	st C	ompensated Employe	es (continued)			
	(A) Name and title	(B) Average hours per week	(C) Position (do not check more than one box unless person is both an officer and a director/trustee)				than i	n an	(D) Reportable compensation from	(E) Reportable compensation from related	1	(F) stimati nount other	of
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	organizations (W 2/1099-MISC)	org an	npensi rom th janiza d rela anizat	ation ne tion ted
(18) ANAL	MARCUS BRIX YST	40.00		-			х		103,600.	0	. 2	1,8	30.
(19) <u>ANAL</u>	WILLIAM STUHLSATZ YST	1.00		_			х		132,329.	0			45.
								_				-	=
		-											
			_	-		_							
1b	Sub-total			<u>.</u>					1,979,187.		$\overline{}$	1,3	341.
d	Total from continuation sheets to Part Total (add lines 1b and 1c)							▶	1,979,187.			1,3	0. 341.
	Total number of individuals (including but compensation from the organization	not limited to th	nose	liste	ed ab	ove	e) wh	10 re	eceived more than \$100),000 of reportable		Yes	10
3	Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, ke	y em	plo	yee,	or	highest compensated e	mployee on	3	703	X
4	For any individual listed on line 1a, is the sand related organizations greater than \$1									the organization	4	х	
5	Did any person listed on line 1a receive or rendered to the organization? If "Yes," contion B Independent Contractors					-		elat	ed organization or indiv	idual for services	5_		Х
1	Complete this table for your five highest of the organization. Report compensation for										nsation	from	
	(A) Name and busines			INC			Oi vv		(B) Description of		(I Compe	C) ensati	on
							_						
		-						_					
	Total number of independent contractors \$100,000 of compensation from the organ		ot li	mite	d to t		se li: O	stec	above) who received r	nore than		000	(2016)

84-0583095

INC

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (B) (C) Related or Unrelated Total revenue business exempt function sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns b Membership dues 1b 1,702,922 c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 1 702 922 **Business Code** Program Service Revenue 2 a MARKET RESEARCH/ANALYSIS 541910 2,285,701 2,285,701 b COMMUNICATION SYSTEMS 541910 158,909 158,909 83,834 c SPONSORSHIPS 541910 83,834 6,000 d CONSULTING/MANAGEMENT FEES 541910 6,000 f All other program service revenue q Total. Add lines 2a 2f 2,534,444 Investment income (including dividends, interest, and other similar amounts) 160,855. 160,855 Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (II) Other 7 a Gross amount from sales of (i) Securities assets other than inventory 3,514,464 b Less cost or other basis and sales expenses 3,493,345 c Gain or (loss) 21,119 d Net gain or (loss) 21,119. 21,119 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a ADVERTISING INCOME 541800 210,066 210,066 d All other revenue e Total. Add lines 11a 11d 210,066 4 629 406 Total revenue See instructions 2,465,729 216 066 244 689 Form 990 (2016) INC

| Part IX | Statement of Functional Expenses

	· · · · · · · · · · · · · · · · · · ·				
Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns All oth	er organizations must c	omplete column (A)	
	Check if Schedule O contains a respor			7	
Do 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	66,700.			
2	Grants and other assistance to domestic				— -
	ındıvıduals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,979,187.	7.5.119		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	158,278.			
8	Pension plan accruals and contributions (include	224 254			
	section 401(k) and 403(b) employer contributions)	204,856.			***
9	Other employee benefits	239,795.			<u> </u>
10	Payroll taxes	136,151.			
11	Fees for services (non employees)				
a	Management	206			-
b	Legal	286. 92,271.			
C C	Ĭ	94,211.			
d e	Lobbying Professional fundraising services See Part IV, line 17				
•	Investment management fees		-		
a	Other (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion	193,704.			
13	Office expenses	133,704.			
14	Information technology				
15	Royalties				
16	Occupancy	129,800.			
17	Travel	34,323.			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	75,211.	·-··		
23	Insurance	41,228.			
24	Other expenses I 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 0)				
а	PRINTING/POSTAGE	164,689.			
b	MEETINGS	136,576.			
С	CONTRACTING/CONSULTING	104,100.			
d	TELEPHONE	56,309.			
е	All other expenses	149,704.			
25	Total functional expenses Add lines 1 through 24e	3,963,168.			
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Part X					<u>04 - (</u>	0583095 Page 11
- 4117	Check if Schedule O contains a response or not	to to one	line in this Part V			
<u> </u>	Officer in Ocheodie O Contains a response of Hol	ie to arry	ine in this Fall X	(A) Beginning of year		(B) End of year
1	Cash non-interest bearing			757,796.	1	824,826.
2	Savings and temporary cash investments		ŀ	, , , , , , , , , , , , , , ,	2	021/0200
3	Pledges and grants receivable, net		3			
4	Accounts receivable, net	232,136.	4	181,545.		
5	Loans and other receivables from current and fo	232,130.		101,313.		
	trustees, key employees, and highest compensations					
	Part II of Schedule L		5			
6	Loans and other receivables from other disquali	ons (as defined under				
	section 4958(f)(1)), persons described in section	•	·			
	employers and sponsoring organizations of section	· / · · ·				
s l	employees' beneficiary organizations (see instr)		6			
Assets	Notes and loans receivable, net		7			
8 \$	Inventories for sale or use		-		8	
9	Prepaid expenses and deferred charges		-	73,438.	9	71,818.
I -	Land, buildings, and equipment cost or other	1 1	-	73/130.		717010
	basis Complete Part VI of Schedule D	10a	665,732.			
h	Less accumulated depreciation	10b	116,271.	10c	203 114	
11	Investments publicly traded securities	188,245.	11	203,114 202,760		
12	Investments other securities See Part IV, line		5,139,182.	12	5,652,717	
13	Investments program-related See Part IV, line	0,200,200.	13	3,002,727		
14	Intangible assets		14			
15	Other assets See Part IV, line 11	-	17,661.	15	16,000	
16	Total assets. Add lines 1 through 15 (must equ	al line 34	,	6,524,729.	16	7,152,780
17	Accounts payable and accrued expenses		826,426.	17	693,541	
18	Grants payable		18	7 7		
19	Deferred revenue		531,653.	19	473,385	
20	Tax-exempt bond liabilities		20			
21	Escrow or custodial account liability Complete I	Part IV of	f Schedule D	•	21	· · · · · · · · · · · · · · · · · · ·
ຊ 22	Loans and other payables to current and former	officers,	, directors, trustees,			
	key employees, highest compensated employee	es, and d	isqualified persons			
Liabilities 8	Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrela	ated third	l parties	,	23	
24	Unsecured notes and loans payable to unrelated	d third pa	arties		24	
25	Other liabilities (including federal income tax, pa	yables to	related third			
İ	parties, and other liabilities not included on lines	17-24)	Complete Part X of			
+	Schedule D				25	
26	Total liabilities Add lines 17 through 25			<u>1,358,079.</u>	26	1,166,926
	Organizations that follow SFAS 117 (ASC 958), check	here ▶ X and			
27 28 29 30 31 32 31 32 32 32 33 32 33 32 33 32 33 32 33 33	complete lines 27 through 29, and lines 33 an	id 34.				
27	Unrestricted net assets			5,166,650.	27	5,985,854
28	Temporarily restricted net assets	 	28			
29	Permanently restricted net assets			29		
-	Organizations that do not follow SFAS 117 (A	SC 958)	, check here 🕨 📖			
5	and complete lines 30 through 34					
30	Capital stock or trust principal, or current funds		<u> </u>		30	
31	Paid-in or capital surplus, or land, building, or ed				31	
32	Retained earnings, endowment, accumulated in	come, or	other funds		32	<u> </u>
33	Total net assets or fund balances		_	<u>5,166,650.</u>	33	5,985,854
34	Total liabilities and net assets/fund balances			<u>6,524,729.</u>	34	7,152,780.

Form	990'(2016) INC	_84 <u>÷</u> 0	<u> </u>	<u>5 Pa</u>	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		29,4	
2	Total expenses (must equal Part IX column (A), line 25)	2		63,1	
3	Revenue less expenses Subtract line 2 from line 1	3	6	66,2	238.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,1	66,6	50.
5	Net unrealized gains (losses) on investments	5	2	09,C	77.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	<	83,5	<u>553.</u> :
9	Other changes in net assets or fund balances (explain in Schedule O)	9		27,4	142.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	5,9	85,8	<u>354.</u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				[X]
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	· O	j		
2a	Were the organization s financial statements compiled or reviewed by an independent accountant?		28	a	X
	If "Yes " check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a	ļ		
	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?		2t	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			1
	consolidated basis, or both		į		
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audīt,	Ì		1
	review, or compilation of its financial statements and selection of an independent accountant?		20	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audıt	t		
	Act and OMB Circular A-133?		38	3	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ııred audıt	:		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3k		
			For	m 990	(2016)

632012 11-11-16

SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs gov/torm990

ON B No 1545-0047 2016 Open to Public Inspection

Name of the organization

CATTLE MARKETING INFORMATION SERVICE,

Employer identification number

	1NC		1 84-0583095
Pa			s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	vriting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor as	J	
•	for charitable purposes and not for the benefit of the donor o	<i>3</i>	•
	impermissible private benefit?	a device devices, or tor drift exist purpose	Yes No
Pa	rt II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990	
1	Purpose(s) of conservation easements held by the organization		Tarry, are r
,	Preservation of land for public use (e.g., recreation or e	·	torically important land area
	Protection of natural habitat	· ——	tified historic structure
	Preservation of open space	Fleservation of a cer	tined filstoric structure
_	, .		of a name water an areament on the last
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form	F 1
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		
þ	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	` '	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struc	i i
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	e organization during the tax
	year ►		
4	Number of states where property subject to conservation eas	· ————	
5	Does the organization have a written policy regarding the per	• • • •	
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserve	ation easements during the year
	S		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	•	
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	s the organization's accounting for
	conservation easements	A LICE TO LET	
Pa	Organizations Maintaining Collections of		other Similar Assets.
	Complete if the organization answered "Yes" on Form	 	
1 a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue state	ement and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in further	ance of public service, provide, in Part XIII
	the text of the footnote to its financial statements that descri-	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statemen	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ducation or research in furtherance of pi	ublic service, provide the following amounts
	relating to these items		
	(i) Revenue included on 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 treatments	asures, or other similar assets for financi	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		S

	dule:D (Form 990) 2016 INC									Page 2
Par	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tre	easures, or O	ther S	Simila	ar Asse	ts(contin	ued)
3	Using the organization's acquisition, accessi	on and other record	ds, checl	any of the	following that are	a signi	ficant i	use of its	collection	items
	(check all that apply)									
а	Public exhibition	C	ı 🔲 ı	Loan or excl	nange programs					
b	Scholarly research	e	e []	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	ın how th	ey further ti	ne organization s	exemp	t purpo	ose in Par	XIII	
5	During the year, did the organization solicit of	receive donations	of art, hi	storical trea	sures, or other sir	nılar as	sets			
	to be sold to raise funds rather than to be ma								Yes	No_
Par	Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the	organizatio	n answered "Yes"	' on Fo	rm 990), Part IV,	line 9, oi	
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other assets	not inc	luded			
	on Form 990, Part X?		•						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able						
									Amount	
С	Beginning balance						1c			
	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21, for e	escrow or cu	ustodial account l	iability?	>		Yes	No
b	If "Yes," explain the arrangement in Part XIII									
Par										
		(a) Current year	(b) P	rior year	(c) Two years bad	k (d)	Three y	years back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance		-							
2	Provide the estimated percentage of the curl	rent year end baland	ce (line 1	g, column (a	i)) held as					
а	Board designated or quasi endowment		%	•	,,					
b	Permanent endowment	%	_							
	Temporarily restricted endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%								
За	Are there endowment funds not in the posse	•	ation tha	at are held a	nd administered f	or the	organi	zation		
	by	J					J			Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(II)	
b	If "Yes" on line 3a(ii), are the related organiza	itions listed as requi	ired on S	schedule R?					3b	
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm							_		
	Complete if the organization answere	d "Yes" on Form 99	0, Part I\	/, line 11a S	See Form 990, Pa	rt X, lın	e 10			
	Description of property	(a) Cost or o	other	(b) Cost	or other (e) Accı	ımulate	ed	(d) Bool	k value
		basis (invest		,	(other)	,	ciation		• •	
1a	Land									
b										
	Leasehold improvements			-						
	Equipment			66	5,732.	46	2,6	18.	20	3,114.
е	Other _									
Total	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Pan	t X, colur	nn (B), line	10c)				20.	3,114.

Schedule D (Form 990) 2016 INC			84-0583095 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cos	st or end-of year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) INVESTMENT IN SUBSIDIARY	700.	COST	
(B) INVESTMENT IN OBSONO	43,258.	COST	
(C) MONEY MARKET - NATHAN			
(D) LEWIS	141,190.	COST	
(E) BOND INVESTMENT - NATHAN	2.40		
(F) LEWIS	140.	COST	
(G) MUTUAL FUNDS - NATHAN	E 100 F46		
(H) LEWIS	5,190,546.	COST	
Total (Col (b) must equal Form 990, Part X, col (B) line 12)	5,652,717.		
Part VIII Investments - Program Related.	5 000 D-1 N/1 1	1 - 0 - 5 000 Bart V has 1	2
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value		st or end of year market value
	(b) Book value	(c) Wellied of Valdation Co.	st of the of year market value
(1)			
(2)			
(5)	-		
(6)			
(7)			
(8)			
(9)			
Total (Col (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11d See Form 990, Part X, line 1	
(a)	Description		(b) Book value
(1)			
(2)			
(3)	·		
(4)			
(5)			
(6)			
(7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)	45.\		
Total (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities.	e 15)		
Complete if the organization answered "Yes"	on Form 990 Part IV line 1	11e or 11f See Form 990 Part)	Cline 25
(a) Description of liability		b) Book value	V, III C 20
(1) Federal income taxes		2,233,1433	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			

2. Liability for uncertain tax positions. 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.

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

Schedule D (Form 990) 2016 INC Part XI Reconciliation of Revenue per Audited Financial Staten	nents With Payonue per l	84-0583095 Page 4
Complete if the organization answered "Yes" on Form 990 Part IV, line 12		neturn.
Total revenue, gains, and other support per audited financial statements	<u></u>	1 4,869,724.
2 Amounts included on line 1 but not on Form 990 Part VIII, line 12		1 1/005/7230
a Net unrealized gains (losses) on investments	2a 209,077	.
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c]
d Other (Describe in Part XIII)	2d 31,241	<u>.</u>
e Add lines 2a through 2d		2e 240,318.
3 Subtract line 2e from line 1		3 4,629,406.
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	. 4a	_
b Other (Describe in Part XIII)	4b	-
c Add lines 4a and 4b		4c 0.
Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Part XII Reconciliation of Expenses per Audited Financial State	ments With Expenses ne	5 4,629,406.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12		r neturn.
Total expenses and losses per audited financial statements	<u> </u>	1 3,952,745.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		1 3,952,145.
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	1
d Other (Describe in Part XIII)	2d 17,019	•
e Add lines 2a through 2d		2e 17,019.
3 Subtract line 2e from line 1		3 3,935,726.
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	4a	
b Other (Describe in Part XIII)	4b 27,442	
c Add lines 4a and 4b		4c 27,442.
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5 3,963,168.
Part XIII Supplemental Information.		
Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Palines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any accomplete this part to provi		e 4, Part X, line 2, Part XI,
PART X, LINE 2:		
THE MANAGEMENT OF THE ORGANIZATION HAS ANAL	YZED THE TAX POS	ITIONS TAKEN BY
THE ORGANIZATION AND HAS CONCLUDED THAT AS	OF JULY 31, 2017	, THERE ARE NO
UNCERTAIN POSITIONS TAKEN, OR EXPECTED TO B	BE TAKEN, THAT WO	ULD REQUIRE
RECOGNITION OF A LIABILITY OR DISCLOSURE IN	THE FINANCIAL S	TATEMENTS. THE
ORGANIZATION IS SUBJECT TO ROUTINE AUDITS B	BY TAXING JURISDI	CTIONS;
HOWEVER, THERE ARE CURRENTLY NO AUDITS FOR	ANY TAX PERIODS	IN PROGRESS.
THE ORGANIZATION MANAGEMENT BELIEVES IT IS	NO LONGER SUBJEC	T TO INCOME TAX
POSITIONS FOR THE YEARS PRIOR TO 2010.		
PART XI, LINE 2D - OTHER ADJUSTMENTS:		· · · · · · · · · · · · · · · · · · ·
INCOME/LOSS FROM SUBSIDIARY		31 241

Part XIII Supplemental Information (continued)	U363093 Page 5
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
INCOME/LOSS FROM SUBSIDIARY	17,019.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
ADJUSTMENT FOR TAX DEPRECIATION	27,442.
SCHEDULE D, FORM 990, LINE 2D	
THE AMOUNTS RECORDED AS OTHER ADJUSTMENTS ARE DUE TO THE FACT	THAT THE
EXEMPT ORGANIZATION'S AUDITED FINANCIAL STATEMENTS ARE COMBINE	D WITH A
RELATED ENTITY, C.F. RESOURCES, WHICH IS TAXED SEPARATELY AS A	
C-CORPORATION.	
G COM OMITION.	
	······································

Schedule D (Form 990) Part XIII | Supplemental Information (continued)

INC

84-0583095 Page 5

Part VII Investments - Other Securities. See Form 990, Part X, II (a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)	(2)	Cost or end-of-year market value
ADJUSTMENT - CHANGE IN FMV	276,883.	COST
	2.0/005	
	-	
·		
	· · · · · · · · · · · · · · · · · · ·	
		
		,
		•

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.	Information about Schedule I (Form 990) and its instructions is at www irs gov/form990
-----------------------	----------------------------------------------------------------------------------------

CATTLE MARKETING INFORMATION SERVICE,

		٠	
OMB No 1545-0047	9	Open to Public	e o
1545		P O	Inspection
8 No	2	en	nsp
ŏ	"	ဝိ	_

Employer identification number

84-0583095 Part I General Information on Grants and Assistance INC Name of the organization

-	L	Г
	criteria used to award the grants or assistance? $oxin{X}$ Yes $oxin{Y}$ Nes	å
8	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	
Par	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	
	recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	35,000 Part II can	be duplicated if additi	onal space is need	ed			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
COLORADO STATE UNIVERSITY FOUNDATION - PO BOX 1870 - FORT							
COLLINS, CO 80522	23-7090397	501(C)(3)	18,000.	0			
KANSAS STATE UNIVERSITY FOUNDATION 2323 ANDERSON AVE. STE 500							
MANHATTAN, KS 665002	48-0667209	501(C)(3)	40,000.	0.			
COLORADO FUTURE FARMERS OF AMERICA							
	1155035	70,70	000	C			
GREELET, CO 00032		151121	T.				
JDRF INTERNATIONAL			-				
26 BROADWAY, 15TH FL			,				
NEW YORK, NY 10004	23-1907729	501(C)(3)	.009	0			
NATIONAL MULTIPLE SCLEROSIS							
SOCIETY - 733 THIRD AVE 3RD FL -	1						
NEW YORK, NY 10017	13-5661935		400.	0			
VALOR CHRISTIAN HIGH SCHOOL							•
3775 GRACE BLVD							
HIGHLANDS RANCH CO 80126	20-3168449		1,600.	0.			
aldet t and and the production to the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract	of contract of co	tt ar betall agotterioes	e line 1 table				^

 ${f 2}$, Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table

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

19

Schedule I (Form 990) (2016)

SERVICE,	
INFORMATION	
MARKETING	
CATTLE	INC

3095 Page 1		(h) Purpose of grant or assistance					·	. !	Schedule I (Form 990)
84-0583095									
	art II)	(g) Description of non cash assistance							
	edule I (Form 990), P	(f) Method of valuation (book, FMV, appraisal, other)							
	nited States (Schi	(e) Amount of non cash assistance	0	0.					
CATTLE MARKETING INFORMATION SERVICE, INC	nizations in the U	(d) Amount of cash grant	5,000.	100.					
	vernments and Organ	(c) IRC section if applicable							
KKETING I	Assistance to Go	(b) EiN	47-0376583	84-1165175					
Schedule I (Form 990) INC	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)	(a) Name and address of organization or government	CREIGHTON UNIVERSITY 2500 CALIFORNIA PLZ OMAHA, NE 68154	DOUGLAS COUNTY EDUCATIONAL FOUNDATION - 620 WILCOX ST - CASTLE ROCK, CO 80104					

Page 2

(f) Description of noncash assistance 84-0583095 (e) Method of valuation (book, FMV, appraisal, other) Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Ø GRANT MONEYS ARE PROVIDED TO UNIVERSITIES THAT HAVE (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance THE MAJORITY OF Schedule I (Form 990) (2016) N , LINE PART I Part III Part IV

PRESENCE IN THE AGRICULTURAL FIELD IN ORDER TO INCREASE THE NUMBER OF

COLLEGE GRADUATES EXPERIENCED IN THE FIELD OF ANALYIS IN THE CATTLE MARKET

GRANTS ARE AWARDED TO UNIVERSITIES WHERE THE ORGANIZATION HAS AN ON-CAMPUS

THE CATTLE TO SPEAKING ENGAGEMENTS IN THE FIELD OF ANALYSIS OF PRESENCE DUE

MARKET

AS THESE ARE MOSTLY THE MINOR GRANT AMOUNTS NOT SIGNIFICANTLY MONITORED,

CHARITABLE DONATIONS TO VARIOUS ORGANIZATIONS THAT MAY OR MAY NOT BE 21

632102 11-01-16

Schedule I (Form 990) (2016)

Schedule : (Form 990) INC	84-0583095 Page 2
Schedule : (Form 990) INC Part IV Supplemental Information	
RELATED TO THE ORGANIZATION'S MISSION. THE ORGANIZATION	ALSO MATCHES
DONATIONS TO EXEMPT ORGANZATIONS MADE BY THEIR EMPLOYEES.	
POLITICATE TO BASIN T ORGANISMITTON BEIND DI TAMIN BALBOTBEO.	
	
	<u> </u>
	

Schedule I (Form 990)

SCHEDULE J' (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23 ► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs gov/form990

OME No 1545 0047

Open to Public Inspection

Name of the organization

CATTLE MARKETING INFORMATION SERVICE,

Employer identification number 84-0583095

Schedule J (Form 990) 2016

Pa	art I Questions Regarding Compensation			
			Yes	No
1 a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First class or charter travel Housing allowance or residence for personal use]
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
				<u> </u>
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	!	1
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
			_	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization s		İ	
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		_X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	۵b		_X_
С	Participate in, or receive payment from, an equity based compensation arrangement?	4c_	_	X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.	i		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ļ
	contingent on the revenues of		ļ	
а	The organization?	5a_	ļ	
b	, •	5b		
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of		ļ	
а	The organization?	6a_		
b	Any related organization?	6b		<u> </u>
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		ļ
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		<u> </u>
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6/c/2	ا م	1	1

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

583095

Sage 2

Schedule J (Form 990) 2016 INC

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(B) Breakdown of	(B) Breakdown of W 2 and/or 1099 MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(ı) Base		(III) Other	other deferred compensation	benefits	(B)(ı) (D)	ın column (B) reported as deferred
		compensation	compensation	reportable compensation				on prior Form 990
(1) RANDY BLACH	Ξ	377,500.	0	0.	29,775.	18,912.	426,187.	0
CHIEF EXECUTIVE OFFICER	(11)	0.		• 0	0	0.	0	0
(2) MICHAEL MURPHY	Ξ	289,400.		• 0	19,97	18,912.	328,290.	0
MARKET ANALYST/RISK MANAGE	Ξ	0.	0	• 0		0.	0	0
(3) DUANE LENZ	Ξ	238,21			21,63	18,911.	278,763.	0
GENERAL MANAGER	Ξ	0	0	0	0	0.	0	0
(4) ALAN SMITH	Ξ	289,400.		0	28,024.	18,693.	336,117.	0
DIRECTOR OF PROTEIN RESEAR	Ξ	0.	0	0	0	0	0	0
(5) KEVIN GOOD	Ξ	167,82	.0	0.	15,701.	18,912.	202,438.	0
SENIOR ANALYST	(II)		0.	0.	0	0	0	0
(6) LANCE ZIMMERMAN	Ξ	139,18	0	0.	13,918.	18,911.	172,012.	0
ANALYST	Ξ	0	0.	0.	0	0	0	0
(7) TROY APPLEHANS	Ξ	138		• 0	13,813.	12,222.	164,168.	0
ANALYST	(II)			0.	0.	0.	0	0
(8) WILLIAM STUHLSATZ	Ξ	132,329.	0	• 0	13,233.	18,912.	164,474.	0
ANALYST	Ξ			0.	0	0.	0	0
	Ξ							
	Œ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	3							
	Ξ							
•	Ξ							

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

Page 3

84-0583095

Schedule J (Form 990) 2016 Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information THE ORGANIZATION DOES NOT REIMBURSE EXPENSES AND THEREFORE, NO POLICY IS IN Part III Supplemental Information PART I, LINE 1B: EXISTENCE

SCHEDULE O'

Department of the Treasury

Internal Pevenue Service

(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

OME No 1545 0047 7U76 Open to Public

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www irs.gov/form990

Inspection

CATTLE MARKETING INFORMATION SERVICE, Name of the organization Employer identification number INC 84-0583095 FORM 990, PART VI, SECTION B, LINE 11B: THE BOARD REVIEWS FORM 990 PRIOR TO FILING THE RETURN FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION IS DETERMINED BY INDEPENDENT VOTING MEMBERS OF THE BOARD OF DIRECTORS AND THE EXECUTIVE COMMITTEE. FORM 990, PART VI, SECTION C, LINE 19: THE DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990 IS AVAILABLE VIA WWW.GUIDESTAR.ORG FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: DEPRECIATION 27,442. FORM 990, PART XII, LINE 2C: NO CHANGE FROM PRIOR YEARS.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

2016

OMB No 1545-0047

Open to Public . Inspection

Employer identification number 84-0583095 ► Information about Schedule R (Form 990) and its instructions is at www irs gov/form990 CATTLE MARKETING INFORMATION SERVICE, INC Name of the organization Department of the Treasury Internal Revenue Service

Identification of Disregarded Entities, Complete if the organization answered "Yes" on Form 990, Part IV, line 33

Part

(g) Section 512(b)(13) No controlled entity? Yes Direct controlling entity status (if section Public charity 501(c)(3)) Exempt Code section Legal domicile (state or foreign country) Primary activity Name, address, and EIN of related organization

27

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016 INC

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year Part III

Page 2

84-0583095

General or Percentage managing ownership Schedule R (Form 990) 2016 50,00% (r) Section 5 12(b)(13) controlled entity? Yes No Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990. Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year ₹ × Percentago ownership 800 Yes \bowtie Ê 100. Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) 184,667 N/AShare of end-of-year assets Ξ <u>6</u> **Disproportionate** Yes a Tocal ons? Ξ Share of total income 12,328 43,258 Share of end-of-year assets <u>6</u> Type of entity (C corp. S corp, or trust) <u>e</u> Share of total income 140,276 CORP Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) ਉ <u>@</u> Legal domicile (state or foreign country) 28 RELATED င္ပ <u>ပ</u> Direct controlling entity RESEARCH STUDIES ON **©** Primary activity CATTLE INDUSTRY (c)
Legal
domicile
(state or
foreign N MARKET ANALYSIS CATTLE INDUSTRY Primary activity 84-0961724 Name, address, and EIN of related organization Name, address, and EIN of related organization OBSONO LLC - 22-3771089 9110 E. NICHOLS AVENUE 80112 C.F. RESOURCES, INC. 08721 ខ S P.O. BOX 312 CENTENNIAL 632162 09-06-16 BAYVILLE Part IV

Page 3 84-0583095

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II IV?	s with one or more re	lated organizations listed	ın Parts II IV?	
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				ta X.
b Gift, grant, or capital contribution to related organization(s)				db X
c Gift, grant, or capital contribution from related organization(s)				1c ×
d Loans or loan guarantees to or for related organization(s)				1d X
e Loans or loan guarantees by related organization(s)				1e X
f Dividends from related organization(s)				1f X
g Sale of assets to related organization(s)				1d X
 Exchange of assets with related organization(s) 				Į.
 Lease of facilities, equipment, or other assets to related organization(s) 				1, X
k Lease of facilities, equipment, or other assets from related organization(s)				차 ×
I Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			=
$oldsymbol{m}$ Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			tn X
o Sharing of paid employees with related organization(s)				10 X
p Reimbursement paid to related organization(s) for expenses				dt X
q Reimbursement paid by related organization(s) for expenses				1q X
 Other transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 				1r X X
, ,	ho must complete th	iis line, including covered	relationships and transaction thresholds	
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	volved
(1) C.F. RESOURCES	N	6,000.	000.ANNUAL FEE	
(2)				
(3)				
(4)				
(5)				
10 <i>J</i> 632163 09-06-16	29		Schedul	Schedule R (Form 990) 2016

Schedule R (Form 990) 2016

INC

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Page 4

84-0583095

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	micile Predominant income (related, unrelated, oreign excluded from tax under ry)	(e) Are all partners sec 501(c)(3) orgs 2	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	bisproportion Code V-UBI General or Percentage isonale amount in box 20 managing ownership Code V-UBI (Form 1055) vec No. (Form 1055) vec No.	(J) General or managing partner?	(k) Percentage ownership
				2			2			
										•
										•
						} }		Schedule	R (Forn	Schedule R (Form 990) 2016