Departme[|t of the Treasury Internal Revenue Service

294933140051 **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.

Go to www.irs.gov/Form990 for instructions and the latest information.

20 1	7
Open to P	ublic _
Inspecti	on

	м г	OF THE 2	of realendar year, or tax year beginning	anu	enumy	_	
	B C	heck if	C Name of organization			D Employer identific	cation number
		Address change	Boll Weevil Protection	Fund. Inc			
	\vdash	Name change	Doing business as			46-43	290386
		Initial return	Number and street (or P.O. box if mail is not delive	ered to street address)	Room/suite	E Telephone number	
		Final return/	PO Box 2995	,			274-9030
		termin- ated	City or town, state or province, country, and ZI	P or foreign postal code		G Gross receipts \$	825262.
		Amended	Cordova, TN 38088			H(a) Is this a group re	turn
		Applica- tion	F Name and address of principal officer Davi	d M. Grant		for subordinates	Yes X No
		pending	same as C above		14	H(b) Are all subordinates in	cluded? Yes No
	ΙT	ax exem	pt status 501(c)(3) X 501(c) (5) ◀	(insert no.) 4947(a)(1)	or 527	If "No," attach a	list (see instructions)
	J M	/ebsite:	▶ N/A		,	H(c) Group exemption	
1				ociation Other	L Year	of formation: 2014 N	State of legal domicile TN
Į	<u>ra</u>		ummary efly describe the organization's mission or most si		ect er	adicated are	as of IIS
	e	1 Br	etly describe the organization's mission or most si otton production from re-	infectation of	the ho	oll weevil are	nd
	au		eck this box if the organization disconti				
	Activities & Governance		mber of voting members of the governing body (P		sea or more	3	25
	Ś		imber of voting members of the governing body (i			4	25
	∞ 5		tal number of individuals employed in calendar yea			5	0
	ţį		tal number of volunteers (estimate if necessary)	2, 2017 (1 4,1117, 1110 24)		6	0
	Ę		,	mrt(C), line 12		7a	0.
	Ĭ	b Ne	tal unrelated business revenue from Part VIII, colu t unrelated business taxable income from Form 99	OF line BECEIVED)	7b	0.
	T				၂ပ္က	Prior Year	Current Year
		8 Co	intributions and grants (Part VIII, line 1h)	OCT 3 1 2018	RS-OSC	2580526.	768283.
	ű	9 Pr	ogram service revenue (Part VIII, line 2g)		<u> </u>	0.	0.
	Revenue	10 In	restment income (Part VIII, column (A), lines 3, 4, a	nd 7d) OCDEN IT		90912.	56979.
	۳	11 Ot	her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9	OCTOO, OGDEN, UT		0.	0.
		12 To	tal revenue - add lines 8 through 11 (must equal P	art VIII, column (A), line 12)		2671438.	825262.
		13 Gr	ants and similar amounts paid (Part IX, column (A)	, lines 1-3)		0.	0.
		14 Be	nefits paid to or for members (Part IX, column (A),	line 4)	-	0.	0.
	es		laries, other compensation, employee benefits (Pa		<u> </u>	0.	0.
	Expenses		ofessional fundraising fees (Part IX, column (A), line		<u>,</u> ⊢	0.	0.
	ž		tal fundraising expenses (Part IX, column (D), line 2	•	0.	9124.	8135.
	ш		her expenses (Part IX, column (A), lines 11a-11d, 1		-	9124.	8135.
			tal expenses Add lines 13-17 (must equal Part IX,		_	2662314.	817127.
	_ v	19 Re	venue less expenses. Subtract line 18 from line 12	<u>: </u>	Bo	ginning of Current Year	End of Year
	Assets or d Balances	20 To	tal assets (Bart V. line 16)		В	9500725.	10317852.
	Asse Bals		tal assets (Part X, line 16) tal liabilities (Part X, line 26)			0.	0.
2 7	Eet/		t assets or fund balances Subtract line 21 from lir	ne 20		9500725.	10317852.
ا دُ	Pa		Signature Block	16 20	<u> </u>	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
'	Unde	r penaltie	s of perjury, I declare that I have examined this return, in	cluding accompanying schedules	s and stateme	ents, and to the best of my	knowledge and belief, it is
•		•	nd compl <u>ote</u> . Declaration of <u>pre</u> parer (other than officer)				•
) 			Diew Davis			10-19	1-18
1	Sign	, J	Signature of officer			Date	
	Here		·	reasurer	·		
<u>.</u> .]	Type or print name and title				
2		P	rint/Type preparer's name	Preparer's signature		Date Check	PTIN
	Paid					self-employe	ed
ń	Prep	arer F	rm's name			Firm's EIN ▶	
	Use (Only F	rm's address 🕨				
				· · · · · · · · · · · · · · · · · · ·		Phone no	
	Мау	the IRS	discuss this return with the preparer shown above	? (see instructions)			Yes No

Form	990 (2017) Boll Weevil Prot	ection Fund, I	1C 46	5-4290386 P	age 2
ĻРа	rt III Statement of Program Service Accomp				
	Check if Schedule O contains a response or note to	any line in this Part III			
1	Briefly describe the organization's mission Protect eradicated areas of U	S cotton produc	stion from re-in	afestation	
-	of the boll weevil and ultima				
	weevil within the US.	cciy compicec_c	Hadicacion of t	<u> </u>	
2	Did the organization undertake any significant program se	rvices during the year which	were not listed on the		
	prior Form 990 or 990-EZ?	,		Yes X	No
	If "Yes," describe these new services on Schedule O				
3	Did the organization cease conducting, or make significant	t changes in how it conducts	, any program services?	Yes X	No
	If "Yes," describe these changes on Schedule O				
4	Describe the organization's program service accomplishm		-		
	Section 501(c)(3) and 501(c)(4) organizations are required	to report the amount of grant	s and allocations to others, th	e total expenses, and	
	revenue, if any, for each program service reported			 –	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$ _)
	· · · · · · · · · · · · · · · · · · ·				
				•	
					
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
					
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$		
70	(Собе) (Сарызев Ф	including grains of w	/ (Nevendo # _	· · · ·	
			· · · · · · · · · · · · · · · · · · ·		
		· · · · · · · · · · · · · · · · · · ·			
			· <u> </u>		
		 			
4d	Other program services (Describe in Schedule O)				
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses	-		- 000	(0017)
				Form 990	(2017)

Part IV | Checklist of Required Schedules

			100	110
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	if "Yes," complete Schedule A	1	-	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5	Х	
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_ -		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	6		х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			
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	<u> </u>		
0	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			
Ŭ	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		X
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			٠,,
	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	ا ا		
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	405		x
40	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 14a		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	· · · •		
	foreign organization? If "Yes." complete Schedule F. Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		<u>X</u>
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
			000	(0017)

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Form 990 (2017)

X

35a

35b

36

37

Part V. line 1

If "Yes," complete Schedule R, Part V, line 2

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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

	990 (2017) Boll Weevil Protection Fund, Inc 46-4290	386	Pa	age 5
Pai				_
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0	4		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	<u> </u>		
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	1		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u> </u>		37
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>3a</u>		X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	_3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١.		v
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)	-		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
oa	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		Х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ca		
٥	were not tax deductible?	6b		
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?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did 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 cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
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		
9'	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12	1		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them) [11b] Section 4047(-V4) man averant aboritable trusts. In the expension flore Form 900 in liquid Form 10412	120		
	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	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a		
а	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	isa.		
h	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	,		
J	organization is licensed to issue qualified health plans			
_	Enter the amount of reserves on hand	1		

Form **990** (2017)

14b

Х

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

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						X
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		25			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		25			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	anv other				
_	officer, director, trustee, or key employee?		,	İ	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the	direc	supervision	1			
	of officers, directors, or trustees, or key employees to a management company or other person?			ł	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 99	an wa	s filed?	Ì	4	-	Х
5	Did the organization become aware during the year of a significant diversion of the organization's asset		3 11100	Ì	5		X
6	Did the organization have members or stockholders?	,,,,		ŀ	6		X
	Did the organization have members, stockholders, or other persons who had the power to elect or app	ooint (one or	Ì			
7a	-	politi (one or	l	7a		х
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockho	dore or	ŀ	1 a		
D		JUKITO	iders, or		76		Х
_	persons other than the governing body?			ŀ	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	by the	tollowing:	ļ		v	
	The governing body?			ł	8a	<u>X</u>	37
b	Each committee with authority to act on behalf of the governing body?			ł	8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached in Part VII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII, Section A, who cannot be reached in Part VIII.	hed a	t the				
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O				9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	enue	Code.)				
				Г		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 characteristics.	apters	, 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	befor	e filing the form	?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			Ĺ			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13				12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	licts?		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye	es," d	escribe				
	in Schedule O how this was done				12c		
13	Did the organization have a written whistleblower policy?				13		X
14	Did the organization have a written document retention and destruction policy?				14		X
15	Did the process for determining compensation of the following persons include a review and approval	by inc	dependent	Ī			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	-		ļ			
а	The organization's CEO, Executive Director, or top management official			Ì	15a		X
	Other officers or key employees of the organization				15b		Х
~	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			ŀ			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent w	th a				
	taxable entity during the year?		<u>-</u>	ľ	16a		_X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	a its n	articipation	<u> </u>			
J	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization						
		Zation	3	ŀ	16b		
Sec	exempt status with respect to such arrangements? tion C. Disclosure				100		
17		·	F01/a\/2\a	I. A			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	on sur(c)(s)s on	iy) ava	allable)	
	for public inspection. Indicate how you made these available. Check all that apply	_					
	Own website Another's website X Upon request Other (explain		•				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, confi	nict of	interest policy,	and f	inanci	ai	
	statements available to the public during the tax year						
20	State the name, address, and telephone number of the person who possesses the organization's book	ks and	records -	-			
	Drew Davis - 901-274-9030						
	7193 Goodlett Farms Parkway, Cordova, TN 38016					000	
732006	11-28-17				Form	990	(2017)

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 reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$190,000 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

X Check this box if neither the organi	(B)	_		(0	2)			(D)	(E)	(F)
Name and Title	Average	(40		Pos		than e	200	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson i	s both	an	compensation	compensation	amount of
	week	<u> </u>	Cer an	aaa	recio	ภาชนร	teej	from	from related	other
	(list any hours for	Individual trustee or director				L		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	9 0.0	stee			sated		(W-2/1099-MISC)	(44-27 1033-141130)	organization
	organizations	truste	al trus		ıyee	mper		(17 27 1000 111100)		and related
	below	ngnal	Institutional trustee	 =	Key employee	esi co	<u>ت</u>			organizations
	line)	ģ	Insti	Officer	Key	Highest compensated employee	Former			
(1) Charles H. Parker	0.00]								
Chairman		X	L_	X		<u> </u>		0.	0.	0.
(2) Craig D. Shook	0.00							_	_	_
Vice-President		X	_	X	ļ	ļ	_	0.	0.	0.
(3) David Grant	0.00								_	_
Secretary/Treasurer		Х		X			ļ	0.	0.	0.
(4) Drew Davis	0.00									
Assistant Treasurer		X		X		_	_	0.	0.	0.
(5) Robert C. Brown	0.00					•				_
Assistant Secretary	0.00	X		X		-	<u> </u>	0.	0.	0.
(6) Woody Anderson	0.00							1	,	_
(5)		X	_			ļ	ļ	0.	0.	0.
(7) David L. Burns	0.00	1,,	i					0.	0.	0.
(0) 7-1- D-11-	0.00	X	_		_	 		0.	0.	0.
(8) Jack Daily	0.00	x				ĺ		0.	0.	0.
(9) Keith Deputy	0.00	^					┝	0.	- 0.	<u> </u>
(3) Kelth Deputy	0.00	X						0.	0.	0.
(10) Willie German	0.00									
		Х						0.	0.	0.
(11) Thomas S. Hayes III	0.00									
		X						0.	0.	0.
(12) Kenneth B. Hood	0.00								- "	
		X				ļ		0.	0.	0.
(13) Allen G. King	0.00									
		X						0.	0.	0.
(14) Brad McKinley	0.00									
		X						0.	0.	0.
(15) Weldon J. Melton	0.00									
		Х	$oxed{oxed}$		_	L	L	0.	0.	0.
(16) Joe Mencer	0.00									
		Х						0.	0.	0.
(17) Paul Ollerton	0.00								_	_
		Х					<u>L</u> .	0.	0.	0.

	990 (2017) BOIL Weet									46-42	<u>903</u>	<u> 86</u>	<u> </u>	age o
Par	t VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	Hig	ghes	st C	Compensated Employees	(continued)				
-	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average			Pos				Reportable	Reportable		Esf	timate	ed
	Name and the	hours per		not c					compensation	compensation			ount	
-		week		cer ar						from related			other	
		(list any	-				П		the	organizations		comp		
		hours for	trustee or director	ľ		l	_		organization	(W-2/1099-MISC	ч I		om th	
		related	1 5	83			ated		1 "	(***271099-141130	"丨			
		organizations	uste	trus		يو	lag.		(W-2/1099-MISC)			_	anızat	
		below	=	oua		l ge	5 8						l relat	
		line)	Individual	institutional trustee	Officer	Key employee	Highest compensated employee	Former				orga	nızatı	10115
/18\	Drake Perrow	0.00	┢	┝▀	٥	×	Ξ 0	-			\dashv			
(10)	Diake reliew	0.00	X						0.	(0.			0.
(00)		0.00	<u> </u>	 	-	├—	\vdash				' ' 			
(19)	Herbert T. Price	0.00	ł			ŀ				,	,			_
			X	1			<u> </u>		0.		0.			0.
(20)	Randy Reynolds	0.00	j											
			X						0.	(0.			0.
(21)	John Saylor	0.00												
			X						0.	(0.			0.
(22)	Clyde Sharp	0.00		\vdash						`	\vdash			
\ 22 /	Clyde Shalp	0.00	X						0.	(0.			0.
(00)		0 00	Λ	┢		├	┼─	\vdash	U•		' ' 			٠.
(23)	Robert M. Sloan	0.00]		,	,			^
		L <u>-</u>	Х	├	ļ,		<u> </u>	_	0.		0.			0.
(24)	Lewie Joe Smith	0.00							1					
			X					١.	0.	(0.			0.
(25)	Sam R. Spruell	0.00]										
			Х				İ		0.	(0.			0.
(26)	Robert P. Taylor III	0.00	-	 		-	t	\vdash						
(20,	Nobele 1, laylor 111		x						0.	(ا. ه			0.
			Λ	<u> </u>		<u> </u>	<u> </u>	Ļ	0.		0.			
1b	Sub-total													0.
С	Total from continuation sheets to Part VII	, Section A							0.		0.			0.
d	Total (add lines 1b and 1c)							ightharpoons	0.	(0.			0.
2	Total number of individuals (including but no	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,0	00 of reportable				
	compensation from the organization													0
													Yes	No
3	Did the organization list any former officer,	director, or tri	iste	e ke	v en	olan	vee	or	highest compensated em	plovee on	Γ	\neg		
•	,			٠,	,	٠.٢٠	,,	•		p.0,00 o		3		Х
	line 1a? If "Yes," complete Schedule J for so							- 41			-	- 		
4	For any individual listed on line 1a, is the su	· · · · · · · · · · · · · · · · · · ·							· · · · · · · · · · · · · · · · · · ·	e organization	F	-+		177
	and related organizations greater than \$150										 	4		X
5	Did any person listed on line 1a receive or a	ccrue comper	ısatı	on fr	om a	any	unre	elate	ed organization or individi	ual for services	L			
	rendered to the organization? If "Yes," com	plete Schedule	e <i>J f</i>	or su	ıch c	oers	on					5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest cor	npensated ind	lepe	nder	nt co	ntra	acto	rs th	hat received more than \$1	00,000 of comper	nsatı	on fro	m	
	the organization Report compensation for t	he calendar ve	ear e	endir	na w	ıth c	or wi	thin	n the organization's tax ve	ar				
	(A)								(B)			(C	١	
	Name and business	address	NIC	ONE	7				Description of se	rvices	Cc	mpen		n
			14/	JIVI				-	# 000.p.io 0. 00					
										ľ				
	· · ·							_						_

\$100,000 of compensation from the organization See Part VII, Section A Continuation sheets

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 Boll Weev	vil Prot	ec	ti	on	F	'un	d,	Inc	46-429	0386
Part VII Section A. Officers, Directors, Tru	est	Compensated Employ	rees (continued)							
(A) Name and title	(B) Average hours per)) Pos	C) ition)		(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Ойісег	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(27) Tim White	0.00	х						0.	0.	0
									<u>.</u>	
							_			
	_									
Total to Part VII, Section A, line 1c	. :							· ·		

-		Check if Schedule O contain	ns a response or	note to any lin	e in this Part VIII			
		Officer if defledule O contain	ns a response or	note to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
L	1 2	Federated campaigns	1a			70101100		312 - 314
, Grants	ı a	Membership dues		768283.				
ည်း ၌		•		7002031				
Ţţ	C	Fundraising events	1c					
يَّةِ قَ	a	Related organizations						
Sir	е	Government grants (contributio						
utio	T	All other contributions, gifts, grants						
<u>ē</u> \$		similar amounts not included above						
Contributions, Gifts, and Other Similar Ar	9	Noncash contributions included in lines 1a	-1/ \$		768283.			
0.0	- "	Total. Add lines 1a-1f	R	usiness Code	700203.			
a)	2 a			33111033 0000				-
Š	b				, <u></u>			
Ser	c							
E	d							·
gra	e							
Program Service Revenue	f	All other program service reveni						
	1	Total. Add lines 2a 2f	_					
	3	Investment income (including d	ıvıdends, ınterest,	and				
		other similar amounts)		▶	56979.			56979.
	4	Income from investment of tax-	exempt bond prod	ceeds 🕨				
	5	Royalties		>	•			
			(ı) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory					1	
	b	Less cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)						
ne	8 a	Gross income from fundraising	events (not					
enu		including \$	of					
Other Reven		contributions reported on line 1	c) See					
P.		Part IV, line 18	a					
ŧ		Less direct expenses	b_					
•		Net income or (loss) from fundra					<u> </u>	ļ
	9 a	Gross income from garning acti	vities See		ļ			
		Part IV, line 19	a			•		
		Less direct expenses	b [
		Net income or (loss) from gamin		▶				
	10 a	Gross sales of inventory, less re	turns					
		and allowances	a					
		Less cost of goods sold	b_					
	С	Net income or (loss) from sales						
	44 -	Miscellaneous Revenue		ısıness Code				
	11 a		1		·			
	b				· · · · · · · · · · · · · · · · · · ·			
	ч С	All other revenue						
		Total. Add lines 11a-11d	<u> </u>					•
ł	12	Total revenue See instructions.			825262.	0.	0.	56979.

Form 990 (2017) Boll Weevil P
Part IX | Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			mplete column (A).	
		(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals 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,			Ì	
	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits		····	 	
10	Payroll taxes			-	
11	Fees for services (non-employees)				
a	Management				
b	Legal	4800.			
c	Accounting Lobbying	4000.			
d	Professional fundraising services. See Part IV, line 17				
e •	Investment management fees				
f	Other (If line 11g amount exceeds 10% of line 25,				-
g	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion				
13	Office expenses	575.			
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	675.			
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				
23	Insurance	2085.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а					
b					
С					
d					
е	All other expenses	0100			
25	Total functional expenses Add lines 1 through 24e	8135.			<u> </u>
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 rf following SOP 98-2 (ASC 958-720)				

-		Check if Schedule O contains a response or not	e to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		17920.	1	812617.
	2	Savings and temporary cash investments		9482805.	2	9505235.
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		4		
	5	Loans and other receivables from current and fo	rmer officers, directors,			-
		trustees, key employees, and highest compensa	ted employees Complete			
	}	Part II of Schedule L	, ,		5	
	6	Loans and other receivables from other disqualif	ied persons (as defined under			
		section 4958(f)(1)), persons described in section	4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sections	on 501(c)(9) voluntary			
S		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
¥	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities			11	
	12	Investments - other securities See Part IV, line 1	ľ		12	
	13	Investments · program-related See Part IV, line	1		13	
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	0500505	15	10015050	
	16	Total assets. Add lines 1 through 15 (must equa	al line 34)	9500725.	16	10317852.
	17	Accounts payable and accrued expenses	•	•	17	
	18	Grants payable		18		
	19	Deferred revenue	ł		19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete F	1		21	
es	22	Loans and other payables to current and former				
ţ		key employees, highest compensated employee	s, and disqualified persons		-00	
Liabilities		Complete Part II of Schedule L	had though a set of		22	
	23	Secured mortgages and notes payable to unrela			23 24	
	24 25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay	· ·		24	
	23	parties, and other liabilities not included on lines				
		Schedule D	17 24) Complete Fait X of		25	
	26	Total liabilities. Add lines 17 through 25	ţ	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958)	. check here X and	<u> </u>		
10		complete lines 27 through 29, and lines 33 and				
ĕ	27	Unrestricted net assets		9500725.	27	10317852.
alar	28	Temporarily restricted net assets			28	
Ä	29	Permanently restricted net assets			29	
Fund Balances		Organizations that do not follow SFAS 117 (AS	SC 958), check here 🕨 🔲			
F.		and complete lines 30 through 34.				
Net Assets or	30	Capital stock or trust principal, or current funds	ĺ		30	
SSe	31	Paid-in or capital surplus, or land, building, or eq	uipment fund		31	
λA	32	Retained earnings, endowment, accumulated inc	ome, or other funds		32	
ž	33	Total net assets or fund balances		9500725.	33	10317852.
	34	Total liabilities and net assets/fund balances		9500725.	34	10317852.

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No 1545-0047

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III			
Nar	me of organization			Empl	oyer identification number
	Boll We	evil Protection	Fund, Inc		46-4290386
Pi	art I-A Complete if the org	ganization is exempt und	der section 501(c)	or is a section 527 or	ganization.
1	Provide a description of the organiz	zation's direct and indirect politic	cal campaign activities	ın Part IV	
2	Political campaign activity expendit	tures		▶ \$	
3	Volunteer hours for political campa	ign activities			
P	art I-B Complete if the org	ganization is exempt und	ler section 501(c)((3)	
	Enter the amount of any excise tax	-		· · · · · · · · · · · · · · · · · · ·	
	Enter the amount of any excise tax	, ,			
	If the organization incurred a section				Yes No
4:	a Was a correction made?	·	•		Yes No
1	b If "Yes," describe in Part IV				
Pa	art I-C Complete if the org	janization is exempt und	ler section 501(c),	except section 501(c)(3).
1	Enter the amount directly expended	d by the filing organization for se	ection 527 exempt func	tion activities > \$	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for se	ection 527	
	exempt function activities			▶ \$	
3	Total exempt function expenditures	Add lines 1 and 2 Enter here a	and on Form 1120-POL		
	line 17b			▶ \$	
	Did the filing organization file Form	· · · · · · · · · · · · · · · · · · ·			Yes No
5	Enter the names, addresses and en	• •	•	ū	• •
	made payments. For each organiza contributions received that were pro-	•			•
	political action committee (PAC) If	• •	, ,	· · · · · · · · · · · · · · · · · · ·	s segregated idild or a
	<u> </u>	T	1		(a) Amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization
					If none, enter -0-
				-	
					·
		i	ı	i	I

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

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017	Boll V	veevil	Protection	Fund, Inc	46-4	1290386 Page 2
Part II-A Complete if the org	anizatio	n is exer	npt under sectior	n 501(c)(3) and file	d Form 5768 (el	ection under
section 501(h)).						
A Check ► I if the filing organizat	tion belong	gs to an affi	liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share	e of excess	s lobbying e	expenditures)			
B Check ▶ if the filing organizat	tion check	ed box A ar	nd "limited control" pro	ovisions apply		r
		yıng Exper eans amou	nditures ints paid or incurred.))	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ence publi	c opinion (arass roots lobbying)			
b Total lobbying expenditures to influence a legislative					-	
c Total lobbying expenditures (add lir	_		, , , , ,			
d Other exempt purpose expenditure		-,				
e Total exempt purpose expenditures		s 1c and 1d)			
f Lobbying nontaxable amount Ente				h columns		-
If the amount on line 1e, column (a) or			bying nontaxable am			-
Not over \$500,000	(5) 15.		the amount on line 1e	ount io.		
Over \$500,000 but not over \$1,000	000		00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,500			00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,000,000						
Over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000				
<u> </u>		Ψ1,000,	000			
g Grassroots nontaxable amount (ent	er 25% of	line 1f)				
h Subtract line 1g from line 1a If zero		•				
Subtract line 1f from line 1c If zero						
	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form					1
reporting section 4911 tax for this y		inic in or	inte 11, did the organiza	311011 III 6 1 01111 4720	İ	Yes No
		4-Year Ave	eraging Period Under	section 501(h)	,	
(Some organizations th			• •		f the five columns b	elow.
	See	the separa	ate instructions for lir	nes 2a through 2f.)		
	Lobb	ying Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2	2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount					······	<u> </u>
(150% of line 2a, column(e))						
					····	
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))	_					
ł						
f Grassroots lobbying expenditures			L			

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017 Boll Weevil Protection Fund, Inc 46-42903 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did if the Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section	It the filing organization attempt to influence foreign, national, state or studing any attempt to influence public opinion on a legislative matter right the use of gement (include compensation in expenses reported on lines 1c through 1i)? Ints? Ints? Ints (include compensation in expenses reported on lines 1c through 1i)? Ints (include compensation in expenses reported on lines 1c through 1i)? Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1i Inter (include or broadcast statements? Intrough 1i Inter (include compensation in expenses reported on lines 1c through 1i Inter (include compensation in expenses reported on lines 1c through 1i Inter (include compensation in expenses reported on lines 1c through 1i Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1i) Inter (include compensation in expenses reported on lines 1c through 1ii) Inter (include compensation in expension for section 501(c)(4), section 501(c)(5), or section 1) Inter (include a section 4912 tax, did it file Form 4720 for this year? Inter (include a section 4912 tax, did it file Form 4720 for this year? In through 1i Inter (include a section 4912 tax, did it file Form 4720 for this year? Inter (include a section 501(c)(5), or section 501(c)(5), or section 1) Inter (include a section 4912 tax, did it file Form 4720 for this year? In through 1i Inter (include a section 4912 tax, did it file Form 4720 for this year? Inter (include 1i) Inter (include 1i) Inter (include 1ii) Int	1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? 1 Other activities? J Total Add lines 1c through 1: 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? bif "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? 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		Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see	2 Did in Part III- 1 Due: 2 Section expension in Carrological Agging 4 If no does expension in Taxanian in Taxani	the organization make only in-house lobbying expenditures of \$2,000 or less? the organization agree to carry over lobbying and political campaign activity expenditures from to the organization agree to carry over lobbying and political campaign activity expenditures from the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." s, assessments and similar amounts from members tion 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expert year reported in section 527(f) tax was paid). The regate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues before were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exist the organization agree to carryover to the reasonable estimate of nondeductible lobbying and penditure next year? The label amount of lobbying and political expenditures (see instructions)	on 501(c)("No," OF	5), or	2 3 secont 1 2a 2b 2c 3	tion	
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization Boll Weevil Protection Fund, Inc	Employer identification number 46-4290386
Form 990, Part I, Line 1, Description of Organization Miss	ion:
ultimately complete eradication of the boll weevil within	the US.
Form 990, Part VI, Section A, line 8b:	
No committees with authority to act on behalf of the gover	ning board.
Form 990, Part VI, Section B, line 11b:	
Return was reviewed by the President, Vice President, and	
Secretary-Treasurer	
Form 990, Part VI, Section B, Line 15:	
Not applicable - there are no employees.	
Form 990, Part VI, Section C, Line 19:	
Documents are available upon request by U.S. mail.	