DLN: 93493041007090 OMB No 1545-0047 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 Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 10-01-2018 , and ending 09-30-2019 D Employer identification number B Check if applicable TEXAS CATTLE FEEDERS ASSOCIATION □ Address change 75-1244584 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (806) 457-2300 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 4,768,666 Name and address of principal officer H(a) Is this a group return for ROSS WILSON ☐Yes **☑**No subordinates? H(b) Are all subordinates ☐Yes ☐No ıncluded? 501(c)(3) ✓ 4947(a)(1) or 501(c) ( 6 ) ◀ (insert no ) If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW TCFA ORG L Year of formation 1967 M State of legal domicile Summary 1 Briefly describe the organization's mission or most significant activities PROMOTION OF THE CATTLE FEEDING INDUSTRY Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 20 20 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) . . . . 6 200 Total unrelated business revenue from Part VIII, column (C), line 12 7a 712,200 **b** Net unrelated business taxable income from Form 990-T, line 34 48,466 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 3,267,104 3,408,106 Ravenua 1,375,143 9 Program service revenue (Part VIII, line 2g) . 1,316,021 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 27,726 44,539 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,669,973 4,768,666 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 1.759.990 1,970,400 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 2,350,942 2,461,400 <del>4,110</del>,932 4,431,800 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 559,041 336,866 Net Assets or Fund Balances Beginning of Current Year **End of Year** 4,174,543 4,712,420 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 988,399 1,189,412 22 Net assets or fund balances Subtract line 21 from line 20 . 3,186,144 3,523,008 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-02-03 Signature of officer Sign Here ROSS WILSON PRESIDENT & CEO Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2020-02-03 P01233232 Paid self-employed Firm's name WILSON HAAG & CO PC Firm's EIN > 75-2333913 Preparer Use Only Firm's address ▶ 418 S POLK ST STE 200 Phone no (806) 372-3331 AMARILLO, TX 791011430 ☐ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page <b>2</b>
Pa	nt III Statem	ent of Program Servic	e Accomplis	hments		
	Check if S	Schedule O contains a respo	nse or note to a	any line in this Part III .		🗹
1	Briefly describe t	the organization's mission				
PRO	MOTION OF THE CA	ATTLE FEEDING INDUSTRY				
2	Did the organiza	tion undertake any significa	nt program serv	vices during the year whi	ch were not listed on	
	the prior Form 9	🗌 Yes 🗹 No				
	If "Yes," describe	e these new services on Sch	edule O			
3	Did the organiza					
	services?	. 🗌 Yes 🗹 No				
	If "Yes," describe	e these changes on Schedule	e O			
4	Section 501(c)(3		ns are required	to report the amount of	argest program services, as m grants and allocations to othe	
4a	(Code	) (Expenses \$	282,535	including grants of \$	) (Revenue \$	397,040 )
	See Additional Data	a 				
4b	(Code	) (Expenses \$	311,170	ıncludıng grants of \$	) (Revenue \$	134,023 )
	See Additional Data	a				
4c	(Code	) (Expenses \$	83,043	including grants of \$	) (Revenue \$	113,516 )
	See Additional Data	a				
	(Code	) (Expenses \$	3,755,052	including grants of \$	) (Revenue \$	671,442 )
		ING AUTOMATED MARKET SERVI			BERS CONDUCTING SEMINARS OF A TATIONS TO MEMBERS PROVIDING	
4d	Other program s	services (Describe in Schedu	le O )			
		2.755.052	uding grants of	<b>+</b>	\	674 440 \
	(Expenses \$	3,755,052 inclu	ding grants of	<del>*</del>	) (Revenue \$	671,442 )

18

19

20a

20b

21

Nο

Nο

No

Nο

No

Form **990** (2018)

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Nο 1 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . 2 Nο No Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 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? 4 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? Yes 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? No 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, No 7 the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 🕏 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets? No R 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 No 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Nο permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 . . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? Yes 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Nο 11h assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏 . . . . . . . . Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its Nο 11c total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏 . . . . . . . . . . Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported Nο 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🔧 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f No the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🥦 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes b Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏 Is the organization a school described in section 170(b)(1)(A)(u)? If "Yes," complete Schedule E 13 Nο 14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . 14a No **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 14h No valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . . 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Nο 16 or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) 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

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . . . . . . . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . .

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

	990 (2018)			Page <b>4</b>
Par	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
Pa	tV Statements Regarding Other IRS Filings and Tax Compliance			

Yes

25

0

**1**c

1a

1b

No

Form **990** (2018)

Check if Schedule O contains a response or note to any line in this Part V .

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

**b** Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

Form **990** (2018)

10a

10b

11a

11b

12b

13b

13c

If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

Sponsoring organizations maintaining donor advised funds.

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

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

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.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

orm	990 (2018)			Page <b>6</b>					
Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 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	o" respo	onse to	lines 🗸					
Se	ction A. Governing Body and Management								
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   20		Yes	No					
	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 20								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Did the organization have members or stockholders?	6	Yes						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following								
а	The governing body?	8a	Yes						
Ь	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No					
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
		$\square$	Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		No					
	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							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a	Yes						
b	Other officers or key employees of the organization	15b	Yes						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No					
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?								
_		16b							
	Let the States with which a copy of this Form 900 is required to be filed.								
17 18	List the States with which a copy of this Form 990 is required to be filed.  Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply								
	☐ Own website ☑ Another's website ☑ Upon request ☐ Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year								
20	State the name, address, and telephone number of the person who possesses the organization's books and records CHRISTIE CULP 5501 I-40 WEST AMARILLO, TX 79106 (806) 457-2300								

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, or 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

$\square$ Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	ny d	current officer, dire	ctor, or trustee	
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	pers	an on on is	e bo both	t che x, u n an or/tr	k less ce k less ce k less cempensated enployee	er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) SCOTT ANDERSON VICE CHAIRMA	2 00	×						0	0	0
(2) CEE ARNETT DIRECTOR	2 00	×						0	0	0
(3) STEVE OLSON DIRECTOR	2 00	X						0	0	0
(4) JASON PEELER DIRECTOR	2 00	×						0	0	0
(5) JOE RICHARDS DIRECTOR	2 00	X						0	0	0
(6) ROBBY KIRKLAND DIRECTOR	2 00	x						0	0	0
(7) LEVI BERRY CHAIRMAN	3 00	X						0	0	0
(8) JIM LOVELL DIRECTOR	2 00	X						0	0	0
(9) GENE LOWREY DIRECTOR	2 00	X						0	0	0
(10) MICHAEL BEZNER DIRECTOR	2 00	×						0	0	0
(11) JIM SIMPSON DIRECTOR	2 00	×						0	0	0
(12) BRAD STOUT DIRECTOR	2 00	Х						0	0	0
(13) PAUL J DEFOOR	2 00	>							0	0

0 0 CHAIRMAN FLE 2 00 (14) DWAYNE THOMPSON 0 0 0 2 00 (15) CHARLES E DONNELL DIRECTOR Х 0 0 0 2 00 (16) HARPER HESSE 0 DIRECTOR 2 00 (17) CADE MORRIS 0 Х DIRECTOR Form 990 (2018)

Part VII	Section A. Officers, Directors	, irustees, K	ey Em	pioy	ees	<u>., an</u>	ia Hiệ	<u>jne</u> s	st Compensated	Lilipioyees (co	Humaet	<i>1)</i>	
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related organizations	than o	one bo both a direct	ox, u an of tor/t	ot che unles officer trust		rson a	compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	amo con f orga	(F) Estimated amount of o compensati from the organization related	
		below dotted line)	Individual trustee or director	Institutional Trustee	Officer	y employee	Highest compensated emptovee	Former		,	org	ganızat	ions
(18) CHAR	RLES RISINGER MD	2 00	×						0	,	0		0
DIRECTOR	\	<u></u> '	<u> </u>	<u> </u> '	$\perp$	⊥'	<u> </u>	⊥_'			<u> </u>		
(19) CRAIC	G SCARMARDO	2 00	) x	'			'		0	,	0		0
DIRECTOR	\	<u></u> ,	<u> </u>	<u> </u>	$\perp$	⊥_'	<u> </u>	⊥_'		<u> </u>	<u> </u>		
(20) SAM S	STEVENSON	2 00	) x	'		'	'		0	,	0		0
DIRECTOR	1	<u></u>	ļ <sup>^</sup>	<u> </u>	$\perp$	<u> </u>	<u> </u>	∟'	-1	1	<u> </u>		
(21) ROSS	S WILSON	70 00	1	'	l <sub>x</sub>		'		254,117	,	0		40,734
PRESIDEN	πα	······································	<del> </del>	<u> </u> '	$\perp$	╨'	<u> </u>	⊥_'	<u> </u>	<b></b>	1		, :
(22) BENJA	AMIN WEINHEIMER	70 00	1	'	×		'		223,754	.]	0		44,756
VICE PRES	IDE				ļ			H			<u> </u>		
											$\perp$		
c Total	-Total	•				 	 	<u></u>	477,871		<u></u>		85,490
<b>2</b> Tot	otal number of individuals (including but reportable compensation from the orga	t not limited to t				ve) v	vho re	ceiv	ed more than \$100	,000			
	d the organization list any <b>former</b> office e 1a? <i>If "Yes," complete Schedule J for</i>							-	est compensated en		3 Y	es	No No
org	r any individual listed on line 1a, is the ganization and related organizations gre dividual										4 Y	es	
	d any person listed on line 1a receive or rvices rendered to the organization $^2 \! I \! f$	•				•		_	-		5		No
	on B. Independent Contractors				_								
	emplete this table for your five highest community in the organization. Report compensation										≥nsatior	า	
		(A) pusiness address	,		<u></u>	<del>, .</del>		10.		(B)	$T_{cc}$	(C) Compensation	
		<u>USITICOS GGG. 1</u>			_	_		_		1011 01 301 11033	+	Прс	
						_							
					—	—		—			+		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

compensation from the organization >

**Business Code** 

541800

541800

541800

1,316,021

(II) Personal

(II) Other

Business Code

•

4.768.666

3,408,106

499,633

397,040

129,523

113,516

99,051

77,258

44,539

499,633

113,516

99,051

397,040

129,523

77,258

44,539

1f

g Noncash contributions included

h Total. Add lines 1a-1f . . .

f All other program service revenue

3 Investment income (including dividends, interest, and other

(ı) Real

(ı) Securities

of

b

b

4 Income from investment of tax-exempt bond proceeds

**gTotal.** Add lines 2a-2f . .

in lines 1a - 1f \$ \_

**b** CONVENTION

d RESOURCE GUIDE

e INSURANCES SERVICE

sımılar amounts) .

**b** Less rental expenses

Rental income or (loss)

d Net rental income or (loss) .

d Net gain or (loss) . . . . . 8a Gross income from fundraising events

contributions reported on line 1c)

9a Gross income from gaming activities See Part IV, line 19 . .

c Net income or (loss) from fundraising events .

 $\boldsymbol{c}$  Net income or (loss) from gaming activities

 ${f c}$  Net income or (loss) from sales of inventory . Miscellaneous Revenue

**5** Royalties .

6a Gross rents

7a Gross amount from sales of assets other than inventory

**b** Less cost or other basis and sales expenses C Gain or (loss)

(not including \$

See Part IV, line 18 . **b** Less direct expenses . . .

**b** Less direct expenses .

**10a**Gross sales of inventory, less returns and allowances

 ${f b}$  Less cost of goods sold . .

d All other revenue . e Total. Add lines 11a-11d .

**12 Total revenue.** See Instructions . .

Other Revenue

11a

c SEMINARS

2a ENVIRONMENTAL & SAFETY SVCS

Program Service Revenue

Part IX	Statement of Functional Expenses
	( )(2)

orm 990 (2018)				Page <b>10</b>
Part IX Statement of Functional Expenses ection 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	ınızatıons must comp	lete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .			🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
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, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	477,871	477,871		
<b>6</b> 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	990,674	990,674		
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	151,745	151,745		
9 Other employee benefits	255,934	255,934		
<b>10</b> Payroll taxes	94,176	94,176		
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal				
c Accounting	22,514	22,514		
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion				
13 Office expenses	283,072	283,072		
14 Information technology				
15 Royalties				
	89,438	89,438		
<b>17</b> Travel	110,440	110,440		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	,	,		
19 Conferences, conventions, and meetings	416,694	416,694		
20 Interest		, , , , , , , , , , , , , , , , , , ,		
21 Payments to affiliates	908,430	908,430		
22 Depreciation, depletion, and amortization	114,267	114,267		
23 Insurance	11,400	11,400		
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	25,13			
a GOVERNMENT	185,731	185,731		
<b>b</b> READERSHIP COSTS	80,069	80,069		
c MISC-ENVIRONMENTAL	79,028	79,028		
d LOBBYING TAXES	43,200	43,200		
e All other expenses	117,117	117,117		
25 Total functional expenses. Add lines 1 through 24e	4,431,800	4,431,800	0	0
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)				

Form 990 (2018)

11

12

13

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16

17

18

19

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23

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31

32

33

34

Liabilities 22

**Fund Balances** 

Assets or 30

Net

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Intangible assets . . . . .

Investments—other securities See Part IV, line 11 .

**Total assets.**Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and

Investments—program-related See Part IV, line 11

		Beginning or year		Life of year
1	Cash-non-interest-bearing	108,641	1	212,053
2	Savings and temporary cash investments	3,215,441	2	3,370,214
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	233,094	4	458,287

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9)

6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Notes and loans receivable, net .

Assets 8 Inventories for sale or use . 45,913 Prepaid expenses and deferred charges 9 33.675 10a Land, buildings, and equipment cost or other 10a 1,621,481 basis Complete Part VI of Schedule D

10b

1,164,940

430,593

140.861

103.357

483.216

401.826

988.399

3,186,144

3,186,144

4,174,543

4.174.543

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27 28

29

30

31

32

33

34

456,541

181.650

207,066

577.674

404.672

1.189.412

3,523,008

3,523,008

4,712,420

Form **990** (2018)

4.712.420

3b

Form 990 (2018)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

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

## **Additional Data**

Software ID: Software Version:

**EIN:** 75-1244584

Name: TEXAS CATTLE FEEDERS ASSOCIATION

Form 990 (2018)

Form 990, Part III, Line 4a:

FORM 990, PART 111, LINE 4a:
ANNUAL CONVENTION OF CATTLE FEEDERS INCLUDING SPEAKERS OF INTEREST TO MEMBERS

Form 990, Part III, Line 4b: PUBLIC RELATIONS AND EDUCATIONAL ACTIVITIES DESIGNED TO PROMOTE BEEF PRODUCTION AND CONSUMPTION AND TO PUBLICIZE LEGISLATION AFFECTING CATTLE

FFFDFR MFMBFRS

Form 990, Part III, Line 4c: PUBLICATION AND DISTRIBUTION OF THE CATTLE FEEDERS RESOURCE GUIDE PROMOTING THE CATTLE FEEDING INDUSTRY, AS WELL AS ADVERTISING VARIOUS AGRICULTURAL PRODUCTS AND SERVICES

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

## Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493041007090

Department of the Treasury Internal Revenue Service

(Form 990 or 990-

EZ)

▶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.

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

Open to Public Inspection

• 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) organizations Complete Part III Name of the organization **Employer identification number** TEXAS CATTLE FEEDERS ASSOCIATION 75-1244584 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) 3 Volunteer hours for political campaign activities (see instructions) Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? ☐ Yes □ No If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-2 5

ь	Total lobbying expenditures to influence a legislative	body (direct lobbying)	
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and	i 1d)	
f	Lobbying nontaxable amount Enter the amount fron columns		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	
	Not over \$500,000	20% of the amount on line 1e	
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000	\$1,000,000	
			 •
g	Grassroots nontaxable amount (enter 25% of line 1f		
h	Subtract line 1g from line 1a If zero or less, enter -(		

i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year? 4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) 2a

Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e))

Total lobbying expenditures Grassroots nontaxable amount

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

Grassroots lobbying expenditures

activity

3

Part IV

Schedule C (Form 990 or 990-EZ) 2018

(b)

Amount

Yes

1

2

No

No

No

Nο

3,408,106

203,171

203.171

203,171

(a)

No

Yes

#### During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? b Media advertisements?

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Other activities?

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)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file 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). Were substantially all (90% or more) dues received nondeductible by members? 1

2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

expenses for which the section 527(f) tax was paid).

Current year

expenditure next year?

Return Reference

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

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Carryover from last year

Supplemental Information

C Total

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

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

Explanation

1

2a

2b

2c

3

4 5

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

Revenue included on Form 990, Part VIII, line 1

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

Assets included in Form 990, Part X

**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.

DLN: 93493041007090 OMB No 1545-0047

> Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

▶ Go to www.irs.gov/Form990 for the latest information. Name of the organization **Employer identification number** TEXAS CATTLE FEEDERS ASSOCIATION 75-1244584 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Cat No 52283D

Schedule D (Form 990) 2018

Par	1111	Organizations Ma	aintaining Coll	ections of	of Art, H	istori	cal Ti	reası	ıres, or	Other	Similar A	ssets (d	ontinued	1)	
3		the organization's acq (check all that apply)	uisition, accession	, and other	records,	check a	any of	the fo	llowing t	hat are a	significant	use of its	collectio	on	_
а		Public exhibition				d		Loan	or excha	inge prog	ırams				
b		Scholarly research				е		Othe	r						
С		Preservation for future	e generations												
4	Provid Part X	e a description of the	organızatıon's coll	ections and	l explain h	now the	y furth	ner the	e organız	ation's ex	kempt purpo	ose in			
5		the year, did the orga to be sold to raise fur									ılar	☐ <b>Y</b> e	s 🗆	No	
Pai	t IV	Escrow and Cust Complete if the ord X, line 21.			" on Forr	m 990	, Part	IV, lı	ne 9, or	reporte	ed an amou	unt on F	orm 99	0, Part	
1a		organization an agent ed on Form 990, Part )		n or other	ıntermedi	ary for	contril	bution	s or othe	r assets	not	☐ Ye	s 🗆	No	
b	If "Yes	s," explain the arrange	ement in Part XIII	and comple	ete the fol	lowing	table		ſ		Δ	mount			
С	Beginn	ning balance		·		_			Ī	1c					
d	Addıtı	ons during the year							[	1d					
e	Distrib	outions during the year	r							1e					
f	Ending	g balance							L	1f					
2a	Did the	e organization include	an amount on Fo	rm 990, Pai	t X, line 2	21, for	escrow	or cu	istodial a	ccount lia	ability?	☐ Ye	s 🗆	No	
b	If "Yes	s," explain the arrange	ement in Part XIII	Check here	e if the ex	planati	on has	been	provided	l in Part )	KIII				
Pa	rt V	Endowment Fund													_
				(a)Currer	nt year	<b>(b)</b> Pi	rior yea	r	(c)Two ye	ars back	(d)Three ye	ars back	(e)Four y	ears back	_
	-	ng of year balance .													_
		utions													_
		estment earnings, gair	·												_
		or scholarships													_
е		xpenditures for facilitie	es												
f		strative expenses .													-
		ear balance													-
2		e the estimated percei	ntage of the curre	nt vear end	l halance	(line 1	ı colu	mn (a	1) held as			i_			_
- а		designated or quasi-e	-	ne year ene	. Baiance	(	g, colu.	····· (a	)) Held u.	•					
h	Perma	nent endowment >													
c	Tempo	orarily restricted endov	wment ▶												
·		ercentages on lines 2a		d equal 100	0%										
3a	Are th	ere endowment funds	not in the possess	sion of the	organızatı	on that	are h	eld an	id admini	stered fo	r the				_
	-	zation by										_	Ye	s No	_
	• •	related organizations					•						(i)		-
b		lated organizations .s" on 3a(ii), are the rel			eguired o	n Sche	 dule P	?	•				(ii) Bb		-
4		be in Part XIII the inte	-		•			•					-		-
Pai	rt VI	Land, Buildings, Complete if the org	and Equipmen	it.				TV lı	ne 11a	See For	m 990 Pa	art X lin	e 10		_
	Descrip	otion of property	(a) Cost or oth (investme	er basıs	<b>(b)</b> Cost (						lepreciation		<b>d)</b> Book v	alue	_
1a	Land .						14	<b>1</b> 8,990						148,9	90
	Building							18,504			718,288			130,	
	_	old improvements													_
		ent					62	23,987			446,652			177,3	35

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) )

art VII	<b>Investments—Other Securities.</b> Complete if th See Form 990, Part X, line 12.	ie organizat	ion answe	ered "Yes" on Form 9	990, Part IV, line 11b.
	(a) Description of security or category (including name of security)		(b) Book value	(c) Met Cost or end-	hod of valuation of-year market value
-	I derivatives				
Other					
ı					
al. (Colum rt VIII	n (b) must equal Form 990, Part X, col (B) line 12 )  Investments—Program Related.  Complete if the organization answered 'Yes' on F	orm 990 P	art IV lini	e 11c See Form 990	) Part X line 13
	(a) Description of investment		ook value	(c) Met	hod of valuation of-year market value
i					
1					
•					
art IX	n (b) must equal Form 990, Part X, col (B) line 13 )  Other Assets. Complete if the organization answered	'Yes' on For	m 990, Part	: IV, line 11d See Form	n 990, Part X, line 15
	(a) Description	ı			(b) Book value
tal. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15 )				. •
art X	Other Liabilities. Complete if the organization a				
	See Form 990, Part X, line 25.  (a) Description of liability		<b>(b)</b> Boo	ok value	
	ncome taxes			222.222	
SEARCH C	GRANTS PAYABLE			278,555 70,190	
	N OK DUES SHARE			34,093	
	ROPERTY TAXES			18,750	
	N NM DUES SHARE FOUNDATION PAYABLE			3,003 81	
	n (b) must equal Form 990, Part X, col (B) line 25 )			404,672	
	or uncertain tax positions In Part XIII, provide the text of 's liability for uncertain tax positions under FIN 48 (ASC 7				-

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Page 4

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

Part XI

а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a									
b	Other (Describe in Part XIII ) 4b 364,223									
С	Add lines <b>4a</b> and <b>4b</b>	4c	364,223							
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12 )	5	4,768,666							
Par	Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.									
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.									

1 1 4,067,579 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a 2b 2c

2d 2e 3 4,067,579 3

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . 4a 4b 364.221

4c 364,221 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . 5 4.431.800 Part XIII **Supplemental Information** 

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Return Reference Explanation

See Additional Data Table

Schedule D (Forn	n 990) 2018	Page <b>5</b>
Part XIII	Supplemental Info	ormation (continued)
Retur	n Reference	Explanation

Schedule D (Form 990) 2018

#### **Additional Data**

Software ID:

Software Version:

**EIN:** 75-1244584

Name: TEXAS CATTLE FEEDERS ASSOCIATION

### **Supplemental Information**

Return Reference Explanation

SCHEDULE D, PAGE 4, PART XI, PROGRAM REVENUE NETTED AGAINST RELATED EXPENSES 364,223 LINE 4B

upplemental Information	
Return Reference	Explanation
SCHEDULE D, PAGE 4, PART XII, INE 4B	PROGRAM EXPENSES NETTED AGAINST RELATED REVENUE 364,221

Sι

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19304	1007	090
Sch	edule J	Co	ompensati	ion Information	00	1B No	1545-0	0047
(For	n 990)	For certain Office		rustees, Key Employees, and Hig	hest			
		Complete if the ord	Compensa anization answ	ated Employees vered "Yes" on Form 990, Part IV	, line 23.	20	18	ζ .
Б	e.i . <del></del>		▶ Attach	to Form 990. instructions and the latest inform			to Pul	
•	tment of the Treasury al Revenue Service	<b>9 40 to </b> <u>www.ns.qc</u>	7 <u>077 011119 90</u> 101	mistractions and the latest miori		Insp	ectio	n
	ne of the organiza AS CATTLE FEEDERS				Employer identificat	ion nu	ımber	
	NO CATTLE TELBERS	371330CI/1101V			75-1244584			
Pa	rt I Questi	ons Regarding Compensa	ition					
							Yes	No
1a				the following to or for a person liste y relevant information regarding the				
		s or charter travel		Housing allowance or residence for	•			
	_	companions		Payments for business use of perso				
		nification and gross-up payment	is $\square$	Health or social club dues or initiati Personal services (e.g., maid, chau				
	Discretion	nary spending account		rersonal services (e.g., maid, chad	neur, cher)			
b		xes in line 1a are checked, did t all of the expenses described ab		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b	Yes	
2				or allowing expenses incurred by all r, regarding the items checked in line	. 1.2	2	Yes	
	directors, truste	es, officers, including the CEO/1	executive Director	r, regarding the items checked in line	e Ia'			
3				ed to establish the compensation of the check any boxes for methods	he			
	_	•	11.	CEO/Executive Director, but explain	ın Part III			
	<b>✓</b> Compens	ation committee		Written employment contract				
	_ '	ent compensation consultant	$\overline{\mathbf{Z}}$	Compensation survey or study				
		of other organizations	$\checkmark$	Approval by the board or compensa	ition committee			
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	iling organization or a			
а	_	ance payment or change-of-con	itrol payment?			4a		No
b		r receive payment from, a supp		ified retirement plan?		4b		No
С	Participate in, o	r receive payment from, an equ	ity-based comper	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	olicable amounts for each item in Par	t III			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29	) organizations	must complete lines 5-0				
5			-	the organization pay or accrue any				
		ontingent on the revenues of		<b>g</b> , a,				
а	The organization	n?				5a		
b	Any related orga					5b		
	·	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings o		the organization pay or accrue any				
а	The organization					6a		
b	Any related orga					<b>6</b> b		
-	•	6a or 6b, describe in Part III	A l 4 - 4 - 4 - 1	hha annananan na annanan a	ن			
7	payments not d	escribed in lines 5 and 6? If "Ye	s," describe in Pa		u	7		
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8		
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	ow the rebuttable	presumption procedure described in	Regulations section	9		
For F	Panerwork Redu	uction Act Notice, see the Ins	structions for Fo	orm 990. Cat No. 5	50053T Schedule J	(Form	990)	2018

Dire	ctors, Trustees, Ke	y Employees, and Hi	ghest Compensated	Employees. Use dup	licate copies if addition	nal space is needed.	
Do no	ot list any individuals that	at are not listed on Form 99	90, Part VII		-	·	at Individual
	(B) Breakdown (i) Base compensation	n of W-2 and/or 1099-MISC (ii) Bonus & Incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
(i) (ii)				22,500	18,234	294,851	
(i) (ii)	223,754			19,000	25,756	268,510	
$\vdash$	<u> </u>						
$\sqcup$							
H		-					
	<u> </u>		-				
H							
e D	(i)	compensation must be report to not list any individuals that its (B)(i)-(iii) for each listed indicate (B) Breakdown  (i) Base compensation  (i) 254,117  (ii) 223,754	compensation must be reported on Schedule J, report Do not list any individuals that are not listed on Form 95 (B)(i)-(iii) for each listed individual must equal the to  (B) Breakdown of W-2 and/or 1099-MISC  (i) Base (ii) Bonus & incentive compensation  (i) 254,117  (ii) 223,754	compensation must be reported on Schedule J, report compensation from the componental properties (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, (B) Breakdown of W-2 and/or 1099-MISC compensation  (i) Base (ii) Bonus & incentive compensation  (i) 254,117  (ii) 223,754	compensation must be reported on Schedule J, report compensation from the organization on row (i) and no not list any individuals that are not listed on Form 990, Part VII in (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1  (B) Breakdown of W-2 and/or 1099-MISC compensation  (i) Base compensation  (ii) Bonus & incentive compensation  (iii) 254,117  (iii) 223,754  (ii) 19,000	compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organization on the list any individuals that are not listed on Form 990, Part VII (B) (B) (i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D)  (B) Breakdown of W-2 and/or 1099-MISC compensation  (i) Base compensation  (ii) Bonus & incentive compensation  (iii) Compensation  (iiii) Compensation  (iiiii) Compensation  (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	(B) Breakdown of W-2 and/or 1099-MISC compensation (i) Base compensation (ii) Base compensation (iii) 254,117 (iii) 223,754 (ii) 223,754 (iii) 67 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 (C) Retirement and other deferred compensation (C) Retirement and other deferred compensation (B) Nontaxable benefits (B)(1)-(D) (B) Nontaxable benefits (B)(1)-(D) (B) Total of columns (B)(1)-(D) (C) Retirement and other deferred compensation (B) Nontaxable benefits (B)(1)-(D) (B) Total of columns (B)(1)-(D) (B) Total

Schedule J (Form 990) 2018 Part III Supplemental Information 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

Schedule J (Form 990) 2018

efile GRAPH	IC print - DO NOT PROCESS	As Filed Data -		DLN:	93493041007090
SCHEDUL (Form 990 or	one   Cappicinen		on to Form 990 or 9		OMB No 1545-0047
EZ)  Form 990 or 990-EZ or to provide any additional information.  ► Attach to Form 990 or 990-EZ.  Department of the Treasury  Form 990 or 990-EZ or to provide any additional information.  ► Attach to Form 990 or 990-EZ.  ► Go to <u>www.trs.qov/Form990</u> for the latest information.					Open to Public Inspection
	역세호ation EDERS ASSOCIATION e O, Supplemental Informatio	on		Employer identi 75-1244584	fication number
Return Reference			Explanation		
FORM 990, PAGE 2, PART III, LINE 4D	PROGRAM SERVICE CONTRACT G SEMINARS OF INTEREST TO C BERS PROVIDING SAFETY CONS TO MEMBERS	ATTLE FEEDERS ME	MBERS PROVIDING AUTOMA	TED MARKET SE	RVICE TO MEM

Return Explanation

LINE 6

FORM 990, THE ORGANIZATION IS COMPOSED OF DUES PAYING MEMBERS
PAGE 6,
PART VI.

Return Explanation
Reference

FORM 990, NEW MEMBERS FOR THE BOARD OF DIRECTORS ARE PROPOSED BY A NOMINATING COMMITTEE THEY ARE VOUNT FOR THE DONAT THE ANNUAL CONVENTION NOMINATIONS FROM THE FLOOR ARE ALLOWED OFFICERS ARE ELECTORS

LINE 7A

Return Explanation
Reference

FORM 990, PAGE 6, OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS, AND MEMBERS ARE ABLE TO PARTICIPATE IN THE MEETINGS OPEN TO THE MEMBERS OPEN

Return Explanation
Reference

FORM 990,	REVIEWED BY BUDGET AND AUDIT COMMITTEE WITH PREPARER PRIOR TO FILING THE BUDGET AND AUDIT
PAGE 6,	COMMITTEE REPORTS RESULTS TO FULL BOARD WHO VOTES ON APPROVAL PRIOR TO FILING
PART VI,	
LINE 11B	

Return Explanation
Reference

FORM 990,	THE EXECUTIVE COMMITTEE REVIEWS AND DISCUSSES ANY PROBLEMS WOULD BE DISCUSSED AND A SOLUT
PAGE 6,	ION FORMED THIS SOLUTION COULD INCLUDE ABSTAINING FROM VOTING ON IMPAIRED ISSUES OR RESIG
PART VI,	NATION FROM THE BOARD
LINE 12C	

Return Explanation
Reference

FORM 990,	COMPENSATION IS SET BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS COMPARABILITY DA
PAGE 6,	TA FROM OTHER FORM 990S AND BUSINESS ASSOCIATION EXECUTIVE SALARY REVIEW WAS CONSULTED
PART VI,	
LINE 15A	

Return Explanation

FORM 990, COMPENSATION SET BY THE CEO WITH APPROVAL FROM THE EXECUTIVE COMMITTEE
PAGE 6,
PART VI,
LINE 15B

990 Schedule O, Supplemental Information Return Explanation Reference DOCUMENTS ARE MADE AVAILABLE ON REQUEST

FORM 990. PAGE 6,

PART VI. LINE 19

Return Explanation Reference

FORM 990. PROGRAM REVENUE NETTED AGAINST RELATED EXPENSES -364.223 PROGRAM EXPENSES NETTED AGAINST PART XI. RELATED REVENUE 364.221 TOTAL -2

LINE 9

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

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

OMB No 1545-0047 2018

DLN: 93493041007090

Open to Public Inspection

Name of the organization TEXAS CATTLE FEEDERS ASSOCIATION								<mark>loyer identif</mark> 244584	icatio	n number		
Part I Identification of Disregarded Entities Complete of	the organ	ızatıon answe	ered "Yes	" on Form !	990, Part	IV, line 33		277307				
(a)  Name, address, and EIN (if applicable) of disregarded entity		(b) Primary ac	tivity	(c) Legal domic or foreign	ale (state	(d) Total inco	ime	<b>(e)</b> End-of-year as	ssets		f) ontrolling tity	
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	<b>ns</b> Comple	te if the orga	nızatıon	answered "	'Yes" on F	orm 990,	Part I\	/, line 34 be	cause	it had one or	more	
(a)  Name, address, and EIN of related organization	Prim	<b>(b)</b> ary activity	Legal do	(c) micile (state gn country)	(d Exempt Co	) de section		(e) harity status on 501(c)(3))	D	<b>(f)</b> irect controlling entity	Section (13) co ent	( <b>g)</b> n 512(b ontrolled itity?
(1)TCFA EDUCATION FOUNDATION 5501 I-40 WEST	EDUCATIO	N		TX	501C3		12A		N/A		Yes	No No
AMARILLO, TX 79106 75-2440704												
											+	$\perp$
											#	_
For Paperwork Reduction Act Notice, see the Instructions for Form 9	990.		Ca	t No 50135					Sch	edule R (Form	990) 2	018

(a) Name, address, and EIN of related organization		Primary Legal Direct Predom income(r controlling or foreign country)  Primary Legal Direct Predom income(r controlling or excludes tax ur country)		(e) Predominant income(related unrelated, excluded from tax under sections 512- 514)	total income				(i) Code V-UBI amount in bo 20 of Schedule K-1 (Form 1065)	Gene mana part	j) ral or aging ner?	(k) Percen owner	
					314)			Yes	No		Yes	No	
					1		1	1	1			1 1	
Identification of Related Organi because it had one or more related	zations Taxable as a ( organizations treated as	Corporation s a corporation	or Trus	<b>t</b> Complete st during th	ıf the organ ie tax year.	ızatıon ansv	wered "Yes	" on Fo	orm 9!	90, Part IV	, lıne	34	
Identification of Related Organi because it had one or more related  (a)  Name, address, and EIN of related organization	zations Taxable as a (organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e)	vered "Yes  (f) Share of total income	Share	(g) of end- year assets	of- Perce	h)	Se (1	(1) ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 L3) cont
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity
because it had one or more related  (a)  Name, address, and EIN of	organizations treated as	L do (state	on or tru: (c) egal micile or foreign	st during th	(d) controlling Tyentity	(e) pe of entity corp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	h) intage	Se (1	ection 5 13) cont entity

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36	<b>5.</b>			
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?		П		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity		1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)		<b>1</b> b		No
c Gift, grant, or capital contribution from related organization(s)		1c		No
d Loans or loan guarantees to or for related organization(s)		<b>1</b> d		No
e Loans or loan guarantees by related organization(s)		1e		No
f Dividends from related organization(s)		1f		No
g Sale of assets to related organization(s)		<b>1</b> g		No
h Purchase of assets from related organization(s)		1h		No
i Exchange of assets with related organization(s)		<b>1</b> i		No
j Lease of facilities, equipment, or other assets to related organization(s)		1j		No
				$\overline{}$

Page **3** 

Schedule R (Form 990) 2018

		1 1	, '	i
f Dividends from related organization(s)		1f		No
g Sale of assets to related organization(s)		<b>1</b> g		No
h Purchase of assets from related organization(s)	i •	1h		No
i Exchange of assets with related organization(s)	i	<b>1</b> i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)		1j		No
k Lease of facilities, equipment, or other assets from related organization(s)		1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)		11		No
m Performance of services or membership or fundraising solicitations by related organization(s)		1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		1n	Yes	
o Sharing of paid employees with related organization(s)		10	Yes	
p Reimbursement paid to related organization(s) for expenses		10		No
p remindratement paid to related diganization(3) for expenses		*P		, .10

k Lease of facilities, equipment, or other assets from related organization(s)				1k	+	No
l Performance of services or membership or fundraising solicitations for related organization(s) $\ldots$ . $\ldots$				11		No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m	1	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n Y	Yes	
o Sharing of paid employees with related organization(s)				10 Y	Yes	
p Reimbursement paid to related organization(s) for expenses				<b>1</b> p	T I	No
<b>q</b> Reimbursement paid by related organization(s) for expenses				<b>1</b> q		No
${f r}$ Other transfer of cash or property to related organization(s)				1r		No
f s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	, including covered r	elationships and trai	nsaction thresholds			
(a) Name of related organization	<b>(b)</b> Transaction	(c) Amount involved	(d) Method of determining am	nount inv	olved	
Ststated St.gdiffzddoff	type (a-s)	, sanc voived				
		1				

n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes		
О	Sharing of paid employees with related organization(s)	10	Yes		
Р	Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No	
q	Reimbursement paid by related organization(s) for expenses	<b>1</b> q		No	
r	Other transfer of cash or property to related organization(s)	1r		No	
s	Other transfer of cash or property from related organization(s)	1s		No	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds				
	(a) (b) (c) (d)  Name of related organization Transaction type (a-s)	(d) Method of determining amount involved			

${f r}$ Other transfer of cash or property to related organization(s)				1r	No		
f s Other transfer of cash or property from related organization(s)				1s	No		
2 If the answer to any of the above is "Yes," see the instructions for information on who must comple	te this line, including covered	relationships and trans	saction thresholds				
(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount involved			

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

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>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	section total end-of-yea 501(c)(3) income assets organizations?		total end-of-year allocations?			Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?		<b>(k)</b> Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No	
Schedule R (Form 990) 2018													

