·... 990. 1

(Rev January 2020)

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

 \blacktriangleright 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.

Open to Public

Δ	For the 2	019 calend	dar year, or tax year beginning January 1 , 2019, and endir	na Dece	mber 31	, 20 19									
_	Check if ap		C Name of organization American Dexter Cattle Association	ig Dec		oyer identification ni	umber 🔿								
-	Address ch	•	Doing business as	*1	─ ~````	4 % 1093707									
믬		•		Room/suite	E Tolonk										
님	Name char Initial return	-	10583 W Castlegate Lane	Noom/suite	E Telepi	E Telephone number 417-689-3574									
	Final return		City or town, state or province, country, and ZIP or foreign postal code			417-007-3374									
			Bois D Arc MO 65612		G Gross	receipts \$ 1	64,992								
님	Amended r	'	F Name and address of principal officer	LL(=) le thus		or subordinates? Yes									
Ч	Application	pending	P Name and address of principal officer	1 '		es included? Tyes	_								
_	Tax-exemp	ot etatue		st (see instructions)											
<u>'</u>					p exemption										
J							DE								
			Corporation ☐ Trust ✓ Association ☐ Other ►	ation	M State	of legal domicile	DE								
L	art I	Summa	<u> </u>	 											
4			cribe the organization's mission or most significant activities:												
& Governance		Activity to register, transfer, test and maintain the registry of Irish Dexter Cattle in the United States													
Ē	1														
Š	1		s box > if the organization discontinued its operations or disposed	a of more th		its net assets.	10								
Ğ	1		f voting members of the governing body (Part VI, line 1a)		. 3		12								
S	1		f independent voting members of the governing body (Part VI, line 1b)			12								
ìŧi			ber of individuals employed in calendar year 2019 (Part V, line 2a)		. 5		0								
Activities	L		ber of volunteers (estimate if necessary)		. 6		50								
⋖			lated business revenue from Part VIII, column (C), line 12		. <u>7a</u>		0								
_	b N	let unrela	ted business taxable income from Form 990-T, line 39	· · · · ·	. 7b		0								
~ -		A 4.	ons and grants (Part VIII, line 1h)	Prior		Current Yea									
Revenue) (8 9		ons and grants (Part VIII, line 1h)		37075		38859								
	9 F	-	service revenue (Part VIII, line 2g) m		171481		125195								
Re	10 1	nvestmen	It income (Part VIII, column (A), lines B, 4 MAR 7 (1) 3. 2020.		990	938									
	11 0	Other reve	enue (Part VIII, column (A), lines 5, 66, 8c, 9c, 10c, and 40e)	-	0		0								
- 2	12 T		nue—add lines 8 through 11 (must equal part VIII, column (A) the 12)	 	209546		164992								
7	L .		d similar amounts paid (Part IX, column (A), lines V-3UT		1500		1500								
<u></u>	14 E	•	aid to or for members (Part IX, column (A), line 4)		0		0								
es.	15 5		ther compensation, employee benefits (Part IX, column (A), lines 5–10)		0		0								
CExpenses ()	16a F		nal fundraising fees (Part IX, column (A), line 11e)		0		0								
ă	Б		raising expenses (Part IX, column (D), line 25) ▶		<u></u>										
U.			enses (Part IX, column (A), lines 11a-11d, 11f-24e)		211953	207047									
	1	•	enses. Add lines 13-17 (must equal Part IX, column (A), line 25) .		213453		208547								
		Revenue l	ess expenses. Subtract line 18 from line 12		-3907		-43555								
Net Assets or	<u>§</u>			Beginning of		 									
set	g 20 1		ets (Part X, line 16)		356498		312943								
¥.	g 21		lities (Part X, line 26)		0		0								
			s or fund balances. Subtract line 21 from line 20		356498	<u> </u>	312943								
Ŀ	art II	Signatu	ure Block												
			y, I declare that I have examined this return, including accompanying schedules and sta te. Declaration of preparer (other than officer) is based on all information of which prepa			my knowledge and b	elief, it is								
	-	and comple	ne. Declaration of preparer (other than officer) is based on an information of which preparer	er rias arry kind											
<u> </u>															
Sign		Signa	ture of officer		Date 💆	Plala									
H	ere		fune wxonym			12/2020									
_	l	'	or print name and title JAME WSMITH TREASURER												
P	aid	Print/Typ	e preparer's name Preparer's signature	Date	Check										
	reparer	·			self-em	ployed									
	se Only	F	me ►	F	irm's EIN ▶										
		Firm's ad	·	F	Phone no										
M	ay the IRS	3 discuss	this return with the preparer shown above? (see instructions)	· · · ·	<u> </u>	🗌 Yes	□ No								
Fo	r Paperwe	ork Reduc	ction Act Notice, see the separate instructions.	t. No 11282Y		Form 9 9	90 (2019)								

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orm.	990	(201	19)

D:	200	2

art			a response or note to any line in the	nis Part III								
1		e organization's m		norallin	· · · · · <u>L</u>							
•	To perserve, protect, test and maintain a registry of Irish Dexter Cattle in the United States, a heritage breed of cattle.											
		al breed of pure bre	ad cattle									
					•••••							
	5.11											
2			significant program services during the									
		these new services			_ Tes MINO							
3			cting, or make significant changes	in how it conducts, any program	m							
•												
	If "Yes," describe	these changes on	Schedule O.									
4			service accomplishments for each									
			(c)(4) organizations are required to		locations to others,							
	the total expenses	s, and revenue, ii a	ny, for each program service reported	a.								
4a	(Code:) (Expenses \$	208,547 including grants of \$	1,500) (Revenue \$	164,992)							
		·/ \= · ··		Ŧ								
					·							
4b	(Code:) (Expenses \$	including grants of \$) (Revenue \$)							
	<u> </u>	\ /F		\ (D								
4c	(Code:	_) (Expenses \$	including grants of \$) (Revenue \$)							
4d	Other program se	ervices (Describe o	n Schedule ().)									
	(Expenses \$			renue \$)								
4e		rvice expenses	7 (1.10)									



Form 990 (2019) Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
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		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	~	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		~
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		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, 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		٧
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		>
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		~
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		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		V
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		V
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		V
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		V
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		~
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		,
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
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		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		~

Part I	Checklist of Required Schedules (continued)			
	•		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		V
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	00	ł	
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	23 24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		~
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		~
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		~
25a	Section 501(c)(3), 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		V
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		V
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		V
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		~
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):			Pres France
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		V
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	30		~
31 32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	31		
33	complete Schedule N, Part II	32		•
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	,	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			. 🗆
			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	10		

Form 99	o (2019)			age 5
Part				ugo O
			Yes	No
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 0			
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) .			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		i
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~
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).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		7
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Ť-
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	-	,
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
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:			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	`		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	,		
С	Enter the amount of reserves on hand		<u>L</u>	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	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?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.	<u> </u>		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes." complete Form 4720. Schedule O.	<u> </u>		

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See in									
	Check if Schedule O contains a response or note to any line in this Part VI									
Section	on A. Governing Body and Management									
4 .	Establica anni la material de la companione	r	Yes	No						
па	Enter the number of voting members of the governing body at the end of the tax year 12	(.	Į Į	. [
	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		ا ا	. 1						
	committee, explain on Schedule O.			.						
b	Enter the number of voting members included on line 1a, above, who are independent . 1b 12			,]						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	ا ر. ا	, 1	1						
	any other officer, director, trustee, or key employee?	2		7						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		•						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		۷						
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~						
6	Did the organization have members or stockholders?	6		~						
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		,						
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		~						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	,		7						
•	the year by the following: The governing body?	8a	-							
a b	Each committee with authority to act on behalf of the governing body?	8b	7	- -						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	05	H	 -						
•	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		·						
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)							
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		~						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		~						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			ا - ا						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		~						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b								
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								
13	Did the organization have a written whistleblower policy?	13		1						
14	Did the organization have a written document retention and destruction policy?	14		~						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		-							
а	The organization's CEO, Executive Director, or top management official	15a								
b	Other officers or key employees of the organization	15b	—							
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		-						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its		 	Ė						
	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								
Sect	ion C. Disclosure	T 100	Ь							
17	List the states with which a copy of this Form 990 is required to be filed.									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-									
,,,	(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 on Schedule O)	. 1060	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	JO 1 (O)						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	of into	roet r	olicy						
	and financial statements available to the public during the tax year.		·	, oney,						
20	State the name, address, and telephone number of the person who possesses the organization's books and re	corde								

Form	990	(2019)	

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor	any related	d orga	aniz	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
	-			-	C)				-	
(A)	(B)				more	e than o		(D)	(E)	(F)
Name and title	Average hours					is both or/trust		Reportable compensation	Reportable compensation	Estimated amount of other
	per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	 	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Lesa Reid			ĺ							
President	8		ļ	~	<u> </u>		<u>.</u>	0	0	
(2) David Jones Vice President	5			~				0	0	0
(3) Carole Nirosky										
Secretary	10		_	~		<u></u> .	<u> </u>	0	0	
(4) James W Smith										
Treasurer	15		<u> </u>	~	<u> </u>	<u> </u>	<u> </u>	0	0	
(5) Jill Delaney Registrar	30			,				0	0	c
(6)										
(7) See attached for Directors and all Addresses	5	~						0	0	
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										,
(14)		-								نوز سدو

, art	Section A. Officers, Directors, 1	143,003,	109.) C)	3, an	<u> </u>	lighest compe	iisated E	inpio)	ees jeenin	ided)
	(A)	(B)			Pos	ition			(D)	(E)	ļ	(F)	
	Name and title Average						than o		Reportable	Reportable	ole	Estimated am	ount
		hours per week					or/trust		compensation	compensa from relat		of other	00
		(list any	악전	ins	Officer	Kej	em Hig	For	from the organization	organizati		compensati from the	on
		hours for	Individual trustee or director	Institutional trustee	icer	Key employee	hest	Former	(W-2/1099-MISC)	(W-2/1099-I	MISC)	organization	
		related organizations	or all	ona		βg	e cg	ľ				related organiza	ations
		below	<u>s</u>	ŧ		è	npe	Į					
		dotted line)	e	stee			Highest compensated employee						
(4 E)			ļ. —	_		-	ä						
(15)								_					
(16)		<u> </u>											
(17)						<u> </u>							
(18)				-	-			-					
(19)						<u> </u>		-					
										<u>-</u>			
(20)		 	1										
(21)													
(22)		 	-			-							
(23)								H			_		
(24)			-		 	┢		┝	-	<u> </u>			
			1	<u> </u>	<u> </u>								
(25)											_		
	Subtotal			•		•		▶					
	Total from continuation sheets to Part Total (add lines 1b and 1c)							>					
2	Total number of individuals (including bu	t not limited						e) w	ho received mor	e than \$10	0,000	of	
	reportable compensation from the organ	ization ►									- . <u>-</u>	Yes	No
3	Did the organization list any former employee on line 1a? If "Yes," complete								loyee, or highe		nsated		-
4	For any individual listed on line 1a, is the										m the		1
	organization and related organizations individual	greater th	an \$	150	,000	0? <i>I</i>	lf "Ye 	es,"	complete Sche	dule J for	such	4	· ·
5	Did any person listed on line 1a receive of for services rendered to the organization									tion or ind		5	
Section	on B. Independent Contractors		<u> </u>						<u> </u>	· · · · ·	· · · ·		1
1	Complete this table for your five hig	hest comp	ensat	ed	ind	epe	ndent	t co	ontractors that	received n	nore 1	than \$100,0	00 o
	compensation from the organization. Rep	ort comper	nsatio	n fo	r th	e ca	lenda	ar ye	ear ending with o	r within the	organ		year.
	(A) Name and business add	dress					_		(B) Description of ser	vices		(C) Compensation	
								+					
								#					
	<u> </u>							_					
2	Total number of independent contract received more than \$100,000 of compensations.							o tl	hose listed abov	/e) who	-	7	

Part		Statement of Revenue Check if Schedule O contains a response or no	nte to an	v line in	this Pa	rt VIII		\sqcap
		Officer if ochequie o contains a response of the	ote to an	(A Total re	A)	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
र छ	1a	Federated campaigns 1a	0					1
ra Ta	b	Membership dues 1b	38859					•
ا ق ق		Fundralsing events 1c	Ú					i
ar a		Related organizations 1d	0					
S, E		Government grants (contributions) 1e	0					
io io		All other contributions, gifts, grants, and similar amounts not included above	0					
a a b d		Noncash contributions included in	<u>_</u>					
들임	9	lines 1a–1f 1g \$	اه					
Contributions, Gifts. Grants and Other Similar Amounts	h	Total. Add lines 1a–1f	. ▶		38859			
			ss Cude	,				
ice	2a	Registrery Activity		1	125195			
e ez	b							
n S	C							
Program Service Revenue	a							
jo l	f	All other program service revenue			-			
<u>-</u>	g	Total. Add lines 2a–2f	. •		/			1
	3	Investment income (including dividends, interes						
		other similar amounts)			938			
į	4	Income from investment of tax-exempt bond prod	eeds►					
	5	Royalties	. ▶					
	•	`` -`	rsunal					1
Ì	6a	Gross rents 6a Less: rental expenses 6b						
	b	Rental income or (loss) 6c						,
ĺ	d	Net rental income or (loss)	. •					
	7a		Othel					
		sales of assets				:		
		other than inventory 7a						
ne	þ	Less: cost or other basis						
venue	_	and sales expenses . 7b						ļ
Be	d	Gain or (loss)	•					-
Other Re		Net gain or (loss)						
ਰ∣	- Ca	events (not including \$						
		of contributions reported on line					1	
		1c). See Part IV, line 18 8a						
	b	Less: direct expenses 8b						
	С	Net income or (loss) from fundraising events .	. •	<u> </u>		_		
	9a	Gross income from gaming activities. See Part IV, line 19 . 9a						
	b	Less: direct expenses 9b		1				
	c	Net income or (loss) from gaming activities	. •	_				·
		Gross sales of inventory, less		-				
		returns and allowances 10a						
	b	Less: cost of goods sold 10b		ļ <u>-</u>				
	С	Net income or (loss) from sales of inventory				ļ	ļ	ļ
Sno	44-	Busine	ess Code			-	 	-
Miscellaneous Revenue	11a b					 	 	
ella Ver	C			-				
Sce	d	All other revenue		 		 	 	
Ξ		Total. Add lines 11a–11d	. •					
	12	Total revenue. See instructions			164992			

Part	IX Statement of Functional Expenses			·	_
	501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All d	other organizations	must complete colu	mn (A).
	Check if Schedule O contains a response	or note to any line	in this Part IX .		🗆
	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .				
2	Grants and other assistance to domestic individuals. See Part IV, line 22	1500			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members				
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 8	Other salaries and wages				
9 10 11	Other employee benefits				
a b	Management	72187 2457			
c d	Accounting	8500			
e f	Professional fundraising services. See Part IV, line 17 Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1299			
12 13	Advertising and promotion	31121 31590			
14 15	Information technology				
16 17	Occupancy				-
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings . Interest	55765			
21 22	Payments to affiliates				
23	Insurance	4128			
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b					
c d					
е	All other expenses				
<u>25</u> <u>26</u>	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	208547			

Part X	Balance	Sheet

		Check if Schedule O contains a response or note to any line in this Par	tX		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	25990	1	16497
	2	Savings and temporary cash investments	330509	2	296446
	3	Pledges and grants receivable, net		3	
}	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
1		trustee, key employee, creator or founder, substantial contributor, or 35%		.	
- {		controlled entity or family member of any of these persons		5	
Ì	6	Loans and other receivables from other disqualified persons (as defined [
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .		6	
\$	7	Notes and loans receivable, net		7	
Assets	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		1	
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	356499	16	312943
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
<u> </u>		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	_
<u>ا</u> ر	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		-	
		Organizations that follow FASB ASC 958, check here ▶ □		20	
ë		and complete lines 27, 28, 32, and 33.	,		
<u>a</u>	27	Net assets without donor restrictions		27	
Ва	28	Net assets with donor restrictions	· · · · · · · · · · · · · · · · · · ·	28	
pu		Organizations that do not follow FASB ASC 958, check here ▶ □			
Net Assets or Fund Balances		and complete lines 29 through 33.		_	<u> </u>
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
lss	31	Retained earnings, endowment, accumulated income, or other funds	356499	31	312943
et /	32	Total net assets or fund balances	356499	32	312943
ž	33	Total liabilities and net assets/fund balances	356499	33	312943
					Form 990 (2019)

Form **990** (2019)

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			16	54992
2	Total expenses (must equal Part IX, column (A), line 25)	2			20	08547
3	Revenue less expenses. Subtract line 2 from line 1	3			-4	13555
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			35	56498
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
_	32, column (B))	10_			31	12943
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u></u>			_ 🗓
			F		Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplaır	חוח			
	Schodulo O.		_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		· ·	2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	i or			
	reviewed on a separate basis, consolidated basis, or both:					ĺ
_	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis					<u>-</u> -
b	Were the organization's financial statements audited by an independent accountant?		· -	2b		V
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ted c	n a	- '}		,
	separate basis, consolidated basis, or both:		- 1			
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov			<u>,</u>		,
	the audit, review, or compilation of its financial statements and selection of an independent account		⊢	2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	xpıaır	on			
0.		: مالحت				
за	As a result of a federal award, was the organization required to undergo an audit or audits as set for Single Audit Act and OMB Circular A-133?	oran i n		3a		ر ا
.	If "Yes," did the organization undergo the required audit or audits? If the organization did not un	· ·	· -	Ja		 •
D	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such			зь		
	required dudit or addites, explain why on coneddie o and describe any steps taken to dideigo such	addits	·			1/0040

Form **990** (2019)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► 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

- 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

• Se	ection 501(c)(4), (5), or (6) orga	nızatıons: Complete Part III.					
Name	of organization			Employer ider	ntification number		
Ameri	can Dexter Cattle Associatio	<u> </u>			47-1093707		
Part	I-A Complete if the	organization is exempt und	er section 501(d	c) or is a section 527 o	organization.		
1	Provide a description of definition of "political carr	the organization's direct and in paign activities")	direct political ca	mpaign activities in Part	IV. (see instructions for		
2		y expenditures (see instructions)			}		
3	Volunteer hours for politic	al campaign activities (see instru	ctions)				
Part		organization is exempt und					
1	Enter the amount of any e	excise tax incurred by the organiz	ation under section	n 4955 ▶ \$			
2		excise tax incurred by organization		section 4955 ▶ \$	·		
3	If the organization incurre	d a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?	Yes No		
4a	Was a correction made?				🗌 Yes 📗 No		
b	If "Yes," describe in Part						
Part		organization is exempt und			(c)(3)		
1		y expended by the filing organi					
2		filing organization's funds contril					
	527 exempt function activ	vities					
3	Total exempt function e	expenditures. Add lines 1 and 2	. Enter here and	on Form 1120-POL,			
4	Did the filing organization file Form 1120-POL for this year?						
5	organization made payme the amount of political co	ses and employer identification nuents. For each organization listed, intributions received that were profund or a political action committed.	enter the amount emptly and directly	paid from the filing organ delivered to a separate p	ization's funds. Also enter political organization, such		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-		
(1)							
(2)							
(3)							
(4)							
(5)							
(6)			-				

Schedule (^ /F	000	000 57	2010
schedule	C (FOIII)	990 01	99U-EZ	12019

Page 2

3011600	1110 17 0 0111	330 01 330-62/2013					Page
	II-A	Complete if the organization section 501(h)).			,	_	
A C	heck >	if the filing organization belor address, EIN, expenses, and	gs to an affiliat share of exces	ed group (and list is lobbying expend	n Part IV each affi itures).	liated group membe	er's name,
вС	heck ►	I if the filing organization chec	ked box A and	"limited control" pi	ovisions apply.		
		Limits on Lobi	ying Expendit	tures		(a) Filing	(b) Affiliated
		(The term "expenditures" m	eans amounts	paid or incurred.)	organization's totals	group totals
1a	Total lo	obbying expenditures to influence	public opinion	(grassroots lobby	ing)		
b	Total le	obbying expenditures to influence	a legislative be	ody (direct lobbyin	g)		 -
С	Total le	obbying expenditures (add lines 1	a and 1b) .				
d		exempt purpose expenditures .					
е		xempt purpose expenditures (ad					
f	Lobby colum	ing nontaxable amount. Enter	the amount f	rom the following	g table in both		
	If the a	mount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:		
	Not ove	r \$500,000	20% of the ai	mount on line 1e.			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess	over \$1,000,000.		
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess o	ver \$1,500,000.		
	Over \$1	7,000,000	\$1,000,000.				
9	Grassi	oots nontaxable amount (enter 2	5% of line 1f)				
h	Subtra	ct line 1g from line 1a. If zero or l	ess, enter -0-				
Î	Subtra	ct line 1f from line 1c. If zero or le	ess, enter -0-				
j	If ther	e is an amount other than zero	on either line	1h or line 1i, did	the organization	file Form 4720	
	report	ng section 4911 tax for this year	?			<u> L</u>	_ Yes N
	(Som	ne organizations that made a se	ction 501(h) el	Period Under Sec lection do not hav tructions for lines	e to complete all	l of the five column	s below.
		Lobbyin	g Expenditure:	s During 4-Year A	veraging Period		
	Cal	endar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a	Lobby	ing nontaxable amount					
b		ing ceiling amount of line 2a, column (e))	٠.		,		
С	Total I	obbying expenditures					
d	Grass	roots nontaxable amount					
е		roots ceiling amount of line 2d, column (e))		,	-		
f	Grass	roots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2019

	(election under section 501(h)).	(2	1)	<u> </u>	(b)	
	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed iption of the lobbying activity.	Yes	No	Aı	mount	t .
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:		-			•
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	ļ		1		
С	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
е	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?	<u> </u>		<u> </u>		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			ļ <u> </u>		
i	Other activities?			<u> </u>		
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			<u> </u>		
c d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			 		
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	:)(5)	or se	ction		-
	501(c)(6).	,,, - ,,	J. J.			
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		V
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		~
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the					'
	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."				line 3	3, is
1	Dues, assessments and similar amounts from members		1	<u> </u>		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of		-		
а	Current year	•	2a	 		
b	Carryover from last year		2b	 		
C	Total		2c	 		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			 		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion or excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4	-		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	 		
Par				1		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro	oup lis	t); Pa	ırt II-A,	ines 1	1 and
2 (see	instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
						
		·				

Schedule C (Form	n 990 or 990-EZ) 2019	Page 4
Part IV	Supplemental Information (continued)	
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SCHEDÙLE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

2019

Open to Public Inspection

Employer identification number

American dexter Cattle Association	47-1093707
Part 1x 11g	
Part 1x 11g	
Genetic tsting of cattle by members Testing conducted by Texas A & M Vet School or University of Califo	ornia - Davis Vet School
	 -
	·
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•	
·	

Name of the organization	Employer identification number
•	
·	
,	
	
·····	