#### COMMITTEE ON NATURAL RESOURCES Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Oversight hearing on "Evaporating Prosperity: How Federal Actions Are Driving Up Water and Power

Costs, Threatening Jobs and Leaving Arizonans High and Dry"

For Individuals:

1. Name:

2. Address:

- 3. Email Address:
- 4. Phone Number:

\* \* \* \* \*

For Witnesses Representing Organizations:

- 1. Name: P. Andrew Groseta, President
- 2. Name of Organization(s) You are Representing at the Hearing:

#### Arizona Cattle Growers Association

3. Business Address:	1401 N. 24 <sup>th</sup> Street, Suite 4 Phoenix, Arizona 85008
4. Business Email Address:	www.azcattlemensassoc.org
5. Business Phone Number:	602.267.1129

Name/Organization\_\_\_P. Andrew Groseta, President, Arizona Cattle Growers Association Title/Date of Hearing <u>"Federal Actions/Inactions are Evaporating Arizona's Water—What's</u> needed to Return a Healthy Water Cycle to Federal Lands" / June 4, 2012

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

B.S. Animal Science and Agricultural Education, 1972, University of Arizona M.S. Agricultural Education, 1978, University of Arizona 3<sup>rd</sup> generation rancher in north central Arizona

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

Member, Arizona Cattle Growers Association
Member, Society for Range Management
Past President (2008), National Cattlemen's Beef Association
President, Cottonwood Ditch Association (local irrigation association providing irrigation water to farmers and ranchers and other shareholders)
Past Chairman, Yavapai County ASCS Committee (FSA)

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Owner of Groseta Ranches LLC

3<sup>rd</sup> generation rancher who owns ranches and has grazed cattle on both the Kaibab and Prescott National Forests

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of</u> <u>the Interior (and /or other agencies invited)</u> that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

#### NA

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

#### NA

f. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Name/Organization	
Title/Date of Hearing	_

In addition, for witnesses representing organizations:

g. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

h. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of</u> <u>the Interior (and /or other agencies invited)</u> that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

i. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

k. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

artment of th	0	Under section 501(c), 527, or 4947(a)(1) of the Internal Reven benefit trust or private foundation	nue Code	come Tax	2010
mal Revenue	ne Treasury Service	The organization may have to use a copy of this return to satis		oortina requirements	Open to Publ Inspection
	014 V 1/2 C			N 30, 2011	
Check if applicable:	C Name of c			D Employer identif	
Address	ARTZO	NA CATTLE GROWERS ASSOCIATION			
Name	Doing Bus			86-0	002290
initial return			om/suite	E Telephone numbe	
Termin-		N. 24TH ST.	on a date		267-1129
Amended	City or toy	vn, state or country, and ZIP + 4	(	Gross receipts \$	482,51
Applica-		IX, AZ 85008	1	(a) Is this a group r	eturn
pending	F Name and	address of principal officer:MR . DOC LANE		for affiliates?	Yes X
		ORTH 24TH STREET, PHOENIX, AZ 850	1 80 I	(b) Are all affiliates ind	cluded? Yes
Tax-exem	pt status:	_ 501(c)(3) 🛛 501(c) ( 5 )◀ (insert no.) 🗔 4947(a)(1) or [	527	lf "No," attach a	a list. (see instructions)
Website:	►N/A		1	(c) Group exemption	
	ganization:	Corporation Trust X Association Other >	L Year of	formation: 1924	VI State of legal domicile:
	ummary				
		the organization's mission or most significant activities: TO PRO	VIDE	EDUCATION	ABOUT THE
CI	ATTLE I	NDUSTRY.	-		
	eck this box				ssets.
3 Nu	mber of votin	g members of the governing body (Part VI, line 1a)			
4 Nu	mber of indep	pendent voting members of the governing body (Par Vhiline 1b) individuals employed in calendar year 2010 (Part V, ine 2a) volunteers (estimate if necessary) pusiness revenue from Part VIII, column (C), line 12		4	
5 Tot	tal number of	individuals employed in calendar year 2010 (Part V, Ine 2a)	MAN		
6 Tot	tal number of	volunteers (estimate if necessary)	2 10	6	
7 a Tot	tal unrelated b	business revenue from Part VIII, column (C), line 12			3
b Net	t unrelated bu	isiness taxable income from Form 990-T, line 34			
				Duine Veen	
		and an		Prior Year	Current Year
		d grants (Part VIII, line 1h)		215,119.	249,42
10 Inve		revenue (Part VIII, line 2g)		215,119. 200,210.	249,42 109,51
	estment incor	revenue (Part VIII, line 2g) ne (Part VIII, column (A), lines 3, 4, and 7d)		215,119. 200,210. 184.	249,42 109,51 3
11 Oth	estment incor ner revenue (P	revenue (Part VIII, line 2g) ne (Part VIII, column (A), lines 3, 4, and 7d) art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		215,119. 200,210. 184. 161,946.	249,42 109,51 3 115,31
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11 Oth 12 Tota 13 Gra	estment incor ner revenue (P al revenue - a ants and simila	revenue (Part VIII, line 2g) ne (Part VIII, column (A), lines 3, 4, and 7d) 'art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) dd lines 8 through 11 (must equal Part VIII, column (A), line 12) ar amounts paid (Part IX, column (A), lines 1-3)		215,119. 200,210. 184. 161,946. 577,459. 0.	249,42 109,51 3 115,31
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<ol> <li>Oth</li> <li>Tot.</li> <li>Tot.</li> <li>Gra</li> <li>Gra</li> <li>Gra</li> <li>Gra</li> <li>Gra</li> <li>Gra</li> <li>Gra</li> <li>Gra</li> <li>Tot.</li> <li>Tot.<td>estment incor ner revenue (P <u>al revenue - a</u> ants and simila nefits paid to o aries, other co fessional fund- al fundraising ter expenses ( al expenses. A venue less exp al assets (Part</td><td>revenue (Part VIII, line 2g) me (Part VIII, column (A), lines 3, 4, and 7d) Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) dd lines 8 through 11 (must equal Part VIII, column (A), line 12) ar amounts paid (Part IX, column (A), lines 1-3) for for members (Part IX, column (A), line 4) pompensation, employee benefits (Part IX, column (A), lines 5-10) draising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25) ▶0 Part IX, column (A), lines 11a-11d, 11f-24f) Add lines 13-17 (must equal Part IX, column (A), line 25) benses. Subtract line 18 from line 12 t X, line 16)</td><td>• Begin</td><td>215,119. 200,210. 184. 161,946. 577,459. 0. 0. 0. 0. 587,325. 587,325. 587,325. -9,866. ning of Current Year 249,442.</td><td>249,42 109,51 3 115,31 474,27 515,49 515,49 -41,21 End of Year 268,63</td></li></ol>	estment incor ner revenue (P <u>al revenue - a</u> ants and simila nefits paid to o aries, other co fessional fund- al fundraising ter expenses ( al expenses. A venue less exp al assets (Part	revenue (Part VIII, line 2g) me (Part VIII, column (A), lines 3, 4, and 7d) Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) dd lines 8 through 11 (must equal Part VIII, column (A), line 12) ar amounts paid (Part IX, column (A), lines 1-3) for for members (Part IX, column (A), line 4) pompensation, employee benefits (Part IX, column (A), lines 5-10) draising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25) ▶0 Part IX, column (A), lines 11a-11d, 11f-24f) Add lines 13-17 (must equal Part IX, column (A), line 25) benses. Subtract line 18 from line 12 t X, line 16)	• Begin	215,119. 200,210. 184. 161,946. 577,459. 0. 0. 0. 0. 587,325. 587,325. 587,325. -9,866. ning of Current Year 249,442.	249,42 109,51 3 115,31 474,27 515,49 515,49 -41,21 End of Year 268,63
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11         Oth           12         Tot.           13         Gra           14         Ber           15         Sala           16a         Pro           b         Tota           17         Oth           18         Tota           19         Rev           20         Tota           21         Tota           22         Net           rt II         S	estment incor ner revenue (P al revenue - a ants and simila hefits paid to o aries, other co fessional fund- al fundraising er expenses ( al expenses ( al expenses ( al assets (Part al liabilities (Part assets or fun <b>ignature B</b> of perjury, I de	revenue (Part VIII, line 2g) me (Part VIII, column (A), lines 3, 4, and 7d) Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) dd lines 8 through 11 (must equal Part VIII, column (A), line 12) ar amounts paid (Part IX, column (A), lines 1-3) for for members (Part IX, column (A), line 4) ompensation, employee benefits (Part IX, column (A), lines 5-10) draising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25) ▶ 0 Part IX, column (A), lines 11a-11d, 11f-24f) Add lines 13-17 (must equal Part IX, column (A), line 25) benses. Subtract line 18 from line 12 t X, line 16) art X, line 26) d balances. Subtract line 21 from line 20 ilock	Begin	215,119. 200,210. 184. 161,946. 577,459. 0. 0. 0. 0. 587,325. 587,325. 587,325. -9,866. ning of Current Year 249,442. 349. 249,093.	249,42 109,51 3 115,31 474,27 515,49 515,49 515,49 -41,21 End of Year 268,63 60,76 207,87
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11         Oth           12         Tot.           13         Gra           14         Ber           15         Sala           16a         Pro           b         Tota           17         Oth           18         Tota           19         Rev           20         Tota           21         Tota           22         Net           rt         II           S         correct, and	estment incor ner revenue (P al revenue - a ants and simila hefits paid to d aries, other co fessional fund al fundraising er expenses ( al expenses , venue less exp al assets (Part al liabilities (Part assets or fun <b>ignature B</b> of perjury, I der d complete. Der Signature of MR • DC	revenue (Part VIII, line 2g) me (Part VIII, column (A), lines 3, 4, and 7d) Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) dd lines 8 through 11 (must equal Part VIII, column (A), line 12) ar amounts paid (Part IX, column (A), lines 1-3) or for members (Part IX, column (A), line 4) ompensation, employee benefits (Part IX, column (A), lines 5-10) draising fees (Part IX, column (A), line 11e) expenses (Part IX, column (D), line 25) ▶ 0 Part IX, column (A), lines 11a-11d, 11f-24f) Add lines 13-17 (must equal Part IX, column (A), line 25) benses. Subtract line 18 from line 12 EX, line 16) art X, line 26) d balances. Subtract line 21 from line 20 Block Clare that I have examined this return, including accompanying schedules and claration of preparer (other than officer) is based on all information of which p	Begin	215,119. 200,210. 184. 161,946. 577,459. 0. 0. 0. 0. 0. 587,325. 587,325. 587,325. 587,325. -9,866. ning of Current Year 249,442. 349. 249,093.	249,42 109,51 3 115,31 474,27 515,49 515,49 515,49 -41,21 End of Year 268,63 60,76 207,87

Preparer	Firm's name WALLACE, PLESE + DREHER, LLP	Firm's EIN
Use Only	Firm's address 3933 S. MCCLINTOCK DR., STE 500 TEMPE, AZ 85282	Phone no. (480) 345-0500
May the I	RS discuss this return with the preparer shown above? (see instructions)	X Yes No
	I UA For Dependent Deduction Act Nation and the consects instructions	E 000 (00 (0)

032001 02-22-11 LHA For Paperwork Reduction Act Notice, see the separate instructions.

P	m 990 (2010) ARTZONA CATTLE GROWERS ASSOCIATION 86-0002290 Page 2 art III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO PROVIDE EDUCATION ABOUT THE CATTLE INDUSTRY.
-	
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ? Yes X No If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
-	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$
	PROVIDED EDUCATIONAL AND PROMOTIONAL INFORMATION TO CATTLE GROWERS AND
	THE GENERAL PUBLIC.
_	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4b	SPONSORED MEETINGS AND SEMINARS FOR CATTLE GROWERS AND THE GENERAL
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4c	SPONSORED MEETINGS AND SEMINARS FOR CATTLE GROWERS AND THE GENERAL PUBLIC.  CODE: (Expenses including grants of )(Revenue ) PROVIDED PUBLICATIONS TO CATTLE GROWERS AND THE GENERAL PUBLIC TO DISSEMINATE INFORMATION PERTINENT TO THE CATTLE INDUSTRY.
4c	SPONSORED MEETINGS AND SEMINARS FOR CATTLE GROWERS AND THE GENERAL PUBLIC.  (Code:)(Expenses \$

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đ	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	
2		2	2
3			
4	사람 수 없다. 사람 것 수 있는 것은 것은 것은 것을 하는 것을 수 있는 것을 하는 것을 위해 이야지 않는 것을 것을 수 있는 것을 하는 것은 것을 가지 않는 것을 하는 것을 것을 것을 것을 것을 수 있다. 것은 것을 하는 것을 수 있다. 것을 하는 것을 하는 것을 하는 것을 하는 것을 하는 것을 수 있다. 가지 않는 것을 하는 것을 하는 것을 하는 것을 수 있다. 것을 하는 것을 수 있다. 것을 하는 것을 수 있다. 것을 수 있다. 것을 하는 것을 수 있다. 것을 수 있다. 것을 하는 것을 수 있다. 것을 것을 것을 수 있다. 것을 수 있다. 것을 것을 것을 수 있다. 것을 것을 수 있다. 것을 것을 것을 것을 수 있다. 것을 것을 것을 것을 수 있다. 것을 것을 것을 수 있다. 것을 것을 것을 것을 수 있다. 것을 것을 것을 것을 것을 수 있다. 것을 것을 것을 것을 것을 것을 수 있다. 것을	t	
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7	그 수밖, 그런 아님 같다. 그는 것은 것을 알았다. 그는 것을 많은 것이 같은 것은 것은 것을 다 가지 않는 것을 수 있는 것이 것 같이 있는 것이 것을 가지 않는 것을 하는 것을 하는 것이 없다.		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	1	
9	Did the organization report an amount in Part X, line 21; 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	Ĩ
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or 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, VIII, IX, or X as applicable.		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	x
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	116	
c		11c	x
d	그 말했다. 김 사람은 것에서 이렇게 한 것이 같은 것이 같이 있는 것이 것이 같이 많이 많이 많다. 이 것은 것이 같이 같이 많이 많이 같이 같이 같이 같이 같이 같이 같이 같이 같이 많이	11d	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	
f	그 승규는 것이 같아요. 그는 것이 ?		
12a	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>	11f	X
	Schedule D, Parts XI, XII, and XIII	12a	X
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, XII, and XIII 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	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	
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	
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	х
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

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Yes No

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Form 990 (2010)

### ARIZONA CATTLE GROWERS ASSOCIATION

Farm	990 (2010)	

Part IV Checklist of Required Schedules

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Form 990 (2010)

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22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22
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	23
24	a 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 25	24a
- 53	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	246
2	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?	240
	d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d
	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a
	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete	
28	Schedule L, Part III	27
	instructions for applicable filing thresholds, conditions, and exceptions):	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c
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? If "Yes," complete Schedule M	30
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31
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
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
34	Was the organization related to any tax-exempt or taxable entity?	33
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35
а		
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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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#### ARIZONA CATTLE GROWERS ASSOCIATION

Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the

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

86-0002290 Page 4

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Yes

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Х Form 990 (2010)

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Part IV Checklist of Required Schedules (continued)

1 990 (2010) ARIZONA CATTLE GROWERS ASSOCIATION		86-000	2290	)	Page
rt V Statements Regarding Other IRS Filings and Tax Compliance					ugo
Check if Schedule O contains a response to any question in this Part V					1
				Yes	No
			6		
Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b		0		
(gambling) winnings to prize winners?			1c	X	
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	2a		D		
			2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instruction	ns)				
Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
At any time during the calendar year, did the organization have an interest in, or a signature or other	r autho	rity over, a			
financial account in a foreign country (such as a bank account, securities account, or other financia	accou	int)?	4a		X
If "Yes," enter the name of the foreign country:	2011				
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	ints.			
			5a	1	X
			5b		X
			5c		
					-
			6a	X	
					1
			6b	x	<u> </u>
Organizations that may receive deductible contributions under section 170(c).					
	rvices r	provided to the payor?	7a	0.0000000	X
			1.1		
Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	/as rea	uired	10	-	
			70		x
			10		- A
		12	70	********	X
					X
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	uny un	io during the year:			
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Section 4947(a)(1) non-exempt charitable tructs is the organization filing Form 000 in liquid Form			10		
	12000		12a		
	120				
			10		
			13a		
	100				
Inter the amount of reserves on hand					
Did the organization receive any navments for indoor tanning particles during the tangent					v
f "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14a		X
	Item Provides and Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V         Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V           Enter the number reported in Box 3 of Form 1096. Enter 0-if not applicable Enter the number of Forms W2G included in line 1a. Enter 0-if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners?           Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return of the asat one is reported on line 2a, did the organization file all required federal employment tax returns?, Note. If the sum of lines 1 and 2 alls greater than 250, you may be required to -life. (see instructions) DId the organization have unrelated business gross income of \$1,000 or more during the year?           If 'Yes,' and the a Form 900-T for this year? If 'No, "provide an explanation in Schedule O At any time during the calendar year, did the organizaton have an interest in, or a signature or other autho financial account in a foreign country (such as a bank account, securities account, or other financial account if 'Yes,' enter hanne of the organizaton that was or la party to a prohibited tax shelter transaction at any time during the tax year?           Did any taxable party notify the organization file Form 8866-T?           Does the organization include with every solicitation an express statement that such contributions or ware not tax deductible?           If 'Yes,' did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization neclive a payment is excess of \$57 made party as a contributions and party for goods and services provided?	Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response to any question in this Part V         Enter the number of Forms W2G included in line 3. Enter 0-fit not applicable       10         Enter the number of Forms W2G included in line 3. Enter 0-fit not applicable       10         If a gambing winnings to prize winners?       2a         Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, tag and the organization file an equicate federal employment tax returns?       0         Note, if the sum of lines 1 and 2a is greater than 250, you may be required to e-file, see instructions)       0         Did the organization have unrelated business grooss income of 51, 1000 or more during the year?       17         If 'Yes, 'has if filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O       At any time during the calendar year, did the organization have an interest in, or a signature or other financial account?         If 'Yes, 'has if filed a Form 990-T for this year?       1000 or more during the year?         If 'Yes, 'has if filed a Form 990-T for this year?       1000 or more during the year?         If 'Yes, 'has if filed a Form 890-T for this year?       1000 or more during the science 1100 or more during the year?         If 'Yes,' to line 5 ar 5b, did the organization that a was or is a party to a prohibited tax sheler transaction?       11         If 'Yes,' did the organization include with weny solcitation an express statement tha such c	Image: Statements Regarding Other IRS Filings and Tax Compliance         Check if Schedule O contains a response to any question in this Part V         Enter the number of Encluded in line 1a. Enter 0- if not applicable       1a       6         Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements,       2a       0         If a least one is reported on line 2a, did the organization file all regulated federal employment tax returns?       2b       0         Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winning to prize winning the calendor yray of the transmittal of a magnitume or other authority over, a financial account in a foreign country (but as a bank account, securities account, or other financial account)?       2b         A ray time during the calendor yray conduction tax as in inters tin, or a signature or other authority over, a financial account in a draign transmittal or the warr of the foreign country (but as a bank account, securities account, or other financial account)?       4a         B report and the draign country (but was or is a part to a priobibid at waheler transaction?       5b         B report and the draign country (but was or is a part to a priobibid at waheler transaction?       5b         B report and the draign country	Item Statements Regarding Other IRS Filings and Tax Compliance       Image: Check if Schedule Contains response to any question in this Part V         Enter the number reported in Box 3 of Form 1096. Enter-0- if not applicable       1a       6         Enter the number of Form W2G included in line 1a. Enter 0- if not applicable       1a       0         Dot the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming       0       1a       0         If all call of the call only year of Form W3. Transmittal of Wage and Tax Statements, if all of the call only year organization file all required fedral employment tax returns?       0       2a         If a test one is reported on line 3.a, did the organization have an trequired fedral employment tax returns?       2b       3a         Note. If the sum of line 1 and 21 is greater than 250, you may be required to e-file. (see instructions)       3b       3a         If Yeas, that if the a Form 990-T for this year? // Two, provide an explanation in Schedule 0       3a       3a         Arany time during the calander year on 10 is forget transaction and year to are provide transaction?       5a         See instructions for filing requirements for Form TD F D922.1, Report of Foreign Bank and Financial Accounts.       5a         Did any tabab path notify the organizatio

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Form 990 (2010)

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6

-				ASSOCIATION	1. 100
h	Management	and Disc	OSITO For and	h "Yes" response to lines 2 throug	vh 7h

Part VI Governance below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI					X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	26			
b	Enter the number of voting members included in line 1a, above, who are independent	1b	26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee?		and the second	2		X
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors or trustees, or key employees to a management company or other person?	e direct sup	pervision	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was file	d?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5		X
6	Does the organization have members or stockholders?			6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more mer governing body?	mbers of th	ie	7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other pers			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken or by the following:	during the y	/ear			
a	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read organization's mailing address? If "Yes," provide the names and addresses in Schedule O	hed at the		9		x

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	1	Yes	No
Does the organization have local chapters, branches, or affiliates?	10a	1171	X
	106	Ē	1
		X	
다 이 것을 것입니다. 것은 것은 것은 것은 것은 것을 하는 것을 하는 것을 하는 것을 것을 것을 것을 것 같아. 이 것은 것은 것을 가지 않는 것을 것을 수 있는 것을 것을 수 있는 것을 하는 것을 것을 수 있다. 이 10 100000000			
Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	125		
Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12c		-
	13	1.1.1	X
Does the organization have a written document retention and destruction policy?	14		Х
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?			
The organization's CEO, Executive Director, or top management official	15a		X
	15b		Х
If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
	16-		x
If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	104		<u></u>
exempt status with respect to such arrangements?	16b		
	Does the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes," <i>describe</i> <i>in Schedule O how this is done</i> Does the organization have a written whistleblower policy? Does the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?       10b         Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?       11a         Describe in Schedule O the process, if any, used by the organization to review this Form 990.       12a         Does the organization have a written conflict of interest policy? If "No," go to line 13       12a         Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?       12b         Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done       12c         Does the organization have a written whistleblower policy?       13         Does the organization have a written document retention and destruction policy?       14         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?       15a         The organization's CEO, Executive Director, or top management official       15b         If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)       15b         Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during	Does the organization have local chapters, branches, or affiliates?       10a         If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?       10b         Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?       11a       X         Describe in Schedule O the process, if any, used by the organization to review this Form 990.       12a       12a         Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?       12b         Does the organization have a written whistleblower policy?       11a       X         Does the organization have a written whistleblower policy?       12a       12a         In Schedule O how this is done       12c       12a         Does the organization have a written document retention and destruction policy?       13       12c         Does the organization have a written document retention and destruction policy?       14       14         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?       15a         The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?       15a </td

List the states with which a copy of this Form 990 is required to be filed  $\blacktriangleright\!AZ$ 17

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for 18 public inspection. Indicate how you make these available. Check all that apply. Another's website X Upon request Own website

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 19 statements available to the public.

20	State the name	, physical add	iress, and telephor	ne number of t	he person who	o possesses the books and records of the organization:	-
						602-267-1129	
	1401 N.	24TH ST	r., phoen	IX, AZ	85008		-

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

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

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

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.

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per	(0	(C) Position (check all that apply)				oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of	
	week (describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
STEVE BROPHY											
PRESIDENT	1.00	X		X			1	0.	0.	0.	
ANDY GROSETA 1ST VICE PRESIDENT	1.00	x		x				0.	0.	0.	
DAN BELL		1	1		-	1				0.	
2ND VICE PRESIDENT	1.00	X		X				0.	Ο.	0.	
GRANT BOICE	11250 3			1		1.00					
TREASURER	1.00	X		X			1	0.	0.	0.	
JIM O'HACO											
MEMBER-AT-LARGE	1.00	X						0.	0.	0.	
GARY THRASHER											
MEMBER-AT-LARGE	1.00	X			l in t			0.	0.	0.	
TOM CHILTON		121									
IMMEDIATE PAST PRESIDENT	1.00	X		Х			-	0.	Ο.	0.	
SUZANNE MENGES		1.1				-			S	1	
COWBELLE PRESIDENT	1.00	Х		Х	1	-		0.	0.	0.	
LANCE KNIGHT	4								1		
DIRECTOR - APACHE	1.00	Х						0.	0.	0.	
DAVID JOHNSON											
DIRECTOR - ARIZ STRIP	1.00	Х		-	_			0.	0.	0.	
SONIA GASHO								1	11		
DIRECTOR - COCHISE	1.00	Х	_	_		-		0.	0.	0.	
DUANE COLEMAN	1 00										
DIRECTOR - COCONINO	1.00	X	_	_	-	-	-	0.	0.	0.	
DAN FENN	1 00										
DIRECTOR - GILA	1.00	X	-	-		-	-	0.	0.	0.	
MIKE WEAR	1 00	v						0	0		
DIRECTOR - GRAHAM	1.00	X			-	-+		0.	0.	0.	
ROCKY MANUZ	1.00	v						0.	0	0	
DIRECTOR - GREENLEE	1.00	~	-	-		-	-	0.	0.	0.	
DWAYNE DOBSON	1.00	x						0.	0	0	
DIRECTOR - MARICOPA EMMETT STURGILL	1.00	-	-	-	-	_	-	0.	0.	0.	
DIRECTOR - MOHAVE	1.00	x						0.	0.	0.	
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ARIZONA CATTLE GROWERS ASSOCIATION

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(A) Name and title	<b>(B)</b> Average hours per		<b>(C)</b> Position (check all that apply)					<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation		(F) Estima amoun	
	week (describe hours for related organizations in Schedule O)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		othe ompens from t organiza and rela organiza	r sation he ation ated
JIM O'HACO	1 00							0				
DIRECTOR - NAVAJO	1.00	X	-	-	-	-		0.	0	•		0.
JOE KING DIRECTOR - PIMA	1.00	x						0.	0			0
BILL DUNN	1.00			-	-	-	-	0.	0	-		0.
DIRECTOR - PINAL	1.00	X						0.	0			0.
CYNDI COPING	1.00				-		-		0	-		0.
DIRECTOR - SANTA CRUZ	1.00	x				1.2		0.	0.			0.
PAUL GROSETA										1		
DIRECTOR - YAVAPAI	1.00	X						0.	0.			Ο.
ALEX DEES												
DIRECTOR - YUMA	1.00	Х						0.	0.			0.
LARRY MCDONALD				21								
ACFA PRESIDENT	1.00	Х		Х				0.	0.			0.
CAMERON RUDOLPH												
ACGA BUS. ASSOC. DIRECTOR	1.00	Х			_	_		0.	0 .		_	0.
PATRICK BRAY	1 00											
EXECUTIVE VICE PRESIDENT	1.00	Х		Х		_	_	0.	0.		_	0.
1b Sub-total							+	0.	0.	-		0.
c Total from continuation sheets to Pa d Total (add lines 1b and 1c)						5	-	0.	0.	-		0.
2 Total number of individuals (including				_		) wh	a roc			1		0.
compensation from the organization		030	ister	u au		) wiii					1	0
3 Did the organization list any former of	ficer director or trus	tee	kov	om	nlov	00 0	rhic	thest compensated amo			Yes	No
line 1a? If "Yes," complete Schedule J										3		X
4 For any individual listed on line 1a, is t										3		Λ
and related organizations greater than	\$150,000? If "Yes,"	con	nplet	te S	che	dule	J for	r such individual	onganization	4		X
5 Did any person listed on line 1a receive												
rendered to the organization? If "Yes,"										5		Х
Section B. Independent Contractors												
1 Complete this table for your five higher the organization. NONE	st compensated ind	eper	nden	t co	ontra	ctor	s tha	at received more than \$1	00,000 of compens	ation	from	
(A) Name and busir	ness address							(B) Description of ser	viene		(C)	
Name and busin				-			+	Description of ser		omp	ensatio	n
											-	-
		_									_	
<ul> <li>2 Total number of independent contractor</li> <li>\$100,000 in compensation from the org</li> </ul>		t limi	ted t	to th	nose 0	e liste	ed at	pove) who received more	e than			

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### ARIZONA CATTLE GROWERS ASSOCIATION

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art V				<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
1	<ul> <li>a Federated campaigns</li> <li>b Membership dues</li> <li>c Fundraising events</li> <li>d Related organizations</li> </ul>		193,968.				
	<ul> <li>Government grants (contribut</li> <li>f All other contributions, gifts, gran</li> <li>similar amounts not included abore</li> </ul>	tions) 1e hts, and hve 1f	55,455.				
	g Noncash contributions included in lines			249,423.			
+	h Total. Add lines 1a-1f			247/423.			
	a MEETINGS, CONVE	NUTONS	Business Code 110000	56,372.	56,372.		
	ATTAL DOCTOR OF ALL		110000	53,138.	53,138.		
i t	b NEWSLETTERS AND	CALEND	110000	53,138.	53,138.		
	c						
ç	d						
ę	e						
f	f All other program service reve			100 510			
5	g Total. Add lines 2a-2f			109,510.			
3	Investment income (including other similar amounts) Income from investment of tax			31.		31.	
5	Royalties						
		(i) Real	(ii) Personal				
6 a	a Gross Rents						
F	b Less: rental expenses						
	Rental income or (loss)						
	b Net rental income or (loss)						
	Gross amount from sales of	and the second	600				
7 a		(i) Securities	(ii) Other				
	assets other than inventory						
b	Less: cost or other basis						
· .	and sales expenses						
	Gain or (loss)						
	I Net gain or (loss)		<b>&gt;</b>				
8 a	Gross income from fundraising including \$	of					
	contributions reported on line						
0	Part IV, line 18						
	Less: direct expenses						
	Net income or (loss) from fund						
9 a	Gross income from gaming act		41 040				
	Part IV, line 19	а	41,843.				
	Less: direct expenses						
	Net income or (loss) from gamin		····· •	33,608.			33,608
	Gross sales of inventory, less n and allowances	а					
	Less: cost of goods sold	The sole por streamers of the second					
c	Net income or (loss) from sales						
	Miscellaneous Revenue		Business Code	01 705	01 705		
	OTHER REVENUE		110000	81,705.	81,705.		
b							
с							
d	All other revenue	ninnennen l					
				81,705.			

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	o not include amounts reported on lines 6b, o, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1					
	organizations in the U.S. See Part IV, line 21				
2	attende ante canter de la contra de la contr				
	the U.S. See Part IV, line 22				
3					
	organizations, and individuals outside the U.S.				
5	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1			
9	Other employee benefits	· · · · · · · · · · · · · · · · · · ·			
0	Payroll taxes				
1	Fees for services (non-employees):				
a	Management				
b	Legal	16,746.		1	
c	Accounting	7,070.			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
9					
2	Advertising and promotion				
3	Office expenses				
4	Information technology				
5	Royalties				
6	Occupancy	F 202			
7	Travel	5,292.			
8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
Э	Conferences, conventions, and meetings	76,592.			
)	Interest				
1	Payments to affiliates	070			
2	Depreciation, depletion, and amortization	872.			
3	Insurance				
\$	above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0.)				
a	MANAGEMENT FEES	204,629.			
b	PRINTING & PUBLICATIONS	56,275.			
C	STAFF EXPENSE	55,073.			
d	CONTRACT LABOR MEMBERSHIP DUES	32,529.			
e		22,040. 38,377.			
	All other expenses	515,495.			
	Total functional expenses. Add lines 1 through 24f	515,495.			
	Joint costs. Check here 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

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ARIZONA CATTLE GROWERS ASSOCIATIO	ARIZONA	CATTLE	GROWERS	ASSOCTATIO
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-					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			21,879.	1	43,839.
	2	Savings and temporary cash investments			207,380.		181,135.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		250.	4	17,123.	
	5	Receivables from current and former officers, d					
		employees, and highest compensated employe	es. Comple	te Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as					
		4958(f)(1)), persons described in section 4958(d	c)(3)(B), and	contributing			
	10.1	employers and sponsoring organizations of sec	tion 501(c)(9	9) voluntary			
		employees' beneficiary organizations (see instru	uctions)			6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	7,480.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	38,511.			
	b	Less: accumulated depreciation		36,950.	2,433.	10c	1,561.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line			17,500.	13	17,500.
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			15	A CONTRACTOR OF	
	16	Total assets. Add lines 1 through 15 (must equa			249,442.	16	268,638.
	17	Accounts payable and accrued expenses			349.	17	59,869.
	18	Grants payable				18	
	19	Deferred revenue				19	894.
	20	Tax-exempt bond liabilities				20	
Liabilities	21	Escrow or custodial account liability. Complete F				21	
bilit	22	Payables to current and former officers, director					
Lia		highest compensated employees, and disqualifie	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
		of Schedule L				22	
1	23	Secured mortgages and notes payable to unrela				23	
	24 25	Unsecured notes and loans payable to unrelated				24	
	26	Other liabilities. Complete Part X of Schedule D Total liabilities. Add lines 17 through 25			349.	25	60 762
	20	Organizations that follow SFAS 117, check he			549.	26	60,763.
s		lines 27 through 29, and lines 33 and 34.		and complete			
lce	27	Unrestricted net assets			183,746.	27	190,022.
alar	28	Temporarily restricted net assets			65,347.	28	17,853.
P P	a second second second				037317.	20	17,055.
ůn		Organizations that do not follow SFAS 117, ch		10000		29	
PL		complete lines 30 through 34.	con nore				
ets		Capital stock or trust principal, or current funds		10000		30	
SSG		Paid-in or capital surplus, or land, building, or equ				31	
Net Assets or Fund Balances		Retained earnings, endowment, accumulated inc				32	
ž		Total net assets or fund balances			249,093.	33	207,875.
		Total liabilities and net assets/fund balances				34	268,638.

# Form 990 (2010) Part X Balance Sheet

11

_	1990 (2010) ARIZONA CATTLE GROWERS ASSOCIATION	86-00	02290	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response to any question in this Part XI				1
1	Total revenue (must equal Part VIII, column (A), line 12)	1	47	4,2	277.
2	Total expenses (must equal Part IX, column (A), line 25)	2			195.
3	Revenue less expenses. Subtract line 2 from line 1	3			218.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			93.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	20	7,8	375.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	1
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit.			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	d on a			
	separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	gle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit		-	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		36	12	

Schedule B	
(Form 990, 990-EZ,	
or 990-PF)	

### Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service						2010
Name of the organiza	ition				Emp	loyer identification number
	ARIZONA	CATTLE	GROWERS	ASSOCIATION	86	5-0002290
Organization type (ch	eck one):					

Fliers of:	Section.
Form 990 or 990-EZ	X 501(c)( 5) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### General Rule

X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

#### Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

#### Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

#### Name of organization

Page 1 of 1 of Part |

Employer identification number

86-0002290

ARIZONA CATTLE GROWERS ASSOCIATION

#### Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SAFFORD DISTRICT RANGELAND USER STEERING COMMITTEE PO BOX 878 MORENCI, AZ 85540	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Page of of Part II

Employer identification number

#### ARIZONA CATTLE GROWERS ASSOCIATION

86-0002290

### Part II Noncash Property (see instructions)

operty given	FMV (or estimate) (see instructions)         (see instructions)         (c) FMV (or estimate) (see instructions)         (see instructions)	(d) Date received
operty given	(c) FMV (or estimate) (see instructions)	
operty given	FMV (or estimate) (see instructions)	
	\$	
perty given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
perty given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	<u>x</u>
perty given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
erty given	(c) FMV (or estimate) (see instructions)	(d) Date received
	-	0
	perty given	(c)         FMV (or estimate)         (see instructions)         (see instructions)         \$

023453 12-23-10

	990, 990-EZ, or 990-PF) (2010)			Page of of Par
Name of organ	ization			Employer identification number
ARTZONA	A CATTLE GROWERS ASSO	NOTTAT		86-0002290
Part III	Exclusively religious, charitable, etc., more than \$1,000 for the year. Comple Part III, enter the total of <i>exclusively</i> relig \$1,000 or less for the year. (Enter this in	individual contributions to sect te columns (a) through (e) and th ious, charitable, etc., contributio	ne following line entry. For ns of	organizations aggregating
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		cription of how gift is held
-		(e) Transfer of g	ift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
Part I	(-,· - ,			
-		(e) Transfer of gi		
-	Transferee's name, address, ar			nsferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
		(e) Transfer of gif		
-	Transferee's name, address, an	d ZIP + 4	Relationship of tran	Isferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held
		(e) Transfer of gift		
	Transferee's name, address, and	1 ZIP + 4	Relationship of trans	sferor to transferee
_				

SCHEDULE C	Political Campaig	n and Lobby	ving Activities	OMB No. 1545-0047
(Form 990 or 990-EZ)				2010
Department of the Treasury Internal Revenue Service	Complete if the organization is desc	ribed below. ► Attac parate instructions.	ch to Form 990 or Form 990-	EZ. Open to Public Inspection
<ul> <li>Section 501(c)(3) orga</li> <li>Section 501(c) (other</li> <li>Section 527 organization answ</li> <li>Section 501(c)(3) orga</li> <li>Section 501(c)(3) orga</li> <li>If the organization answ</li> </ul>	rered "Yes," to Form 990, Part IV, line 3, or anizations: Complete Parts I-A and B. Do not than section 501(c)(3)) organizations: Comp tions: Complete Part I-A only. rered "Yes," to Form 990, Part IV, line 4, or anizations that have filed Form 5768 (election anizations that have NOT filed Form 5768 (election anizations that have NOT filed Form 5768 (election ered "Yes," to Form 990, Part IV, line 5 (Pr or (6) organizations: Complete Part III.	Form 990-EZ, Part V complete Part I-C. lete Parts I-A and C be Form 990-EZ, Part V n under section 501(h)) ection under section 50	low. Do not complete Part I-B. I, line 47 (Lobbying Activities I: Complete Part II-A. Do not c 01(h)): Complete Part II-B. Do	Activities), then s), then omplete Part II-B. not complete Part II-A.
Name of organization	or (b) organizations. Complete Part III.		Emp	loyer identification numbe
	ARIZONA CATTLE GROWERS	ASSOCIATIC		86-0002290
<ul> <li>3 Volunteer hours</li> <li>Part I-B Complet</li> <li>1 Enter the amount of a</li> <li>2 Enter the amount of a</li> <li>3 If the organization ind</li> <li>4a Was a correction made</li> <li>b If "Yes," describe in F</li> <li>Part I-C Complet</li> <li>1 Enter the amount dire</li> <li>2 Enter the amount of the amount</li></ul>	e if the organization is exempt un actly expended by the filing organization for s the filing organization's funds contributed to ities expenditures. Add lines 1 and 2. Enter here tion file Form 1120-POL for this year? resses and employer identification number (fe each organization listed, enter the amount part of that were promptly and directly delivered to	ader section 501( Inder section 4955 agers under section 49 20 for this year? Inder section 501( Section 527 exempt fur other organizations for and on Form 1120-PC EIN) of all section 527 p aid from the filing organ o a separate political on	c)(3). >55 >5 c), except section 501(( notion activities > section 527 > \$ > \$ > \$ political organizations to which nization's funds. Also enter the rganization, such as a separat	Yes No Yes No C)(3). Yes No hthe filing organization e amount of political
political action commi (a) Name	ttee (PAC). If additional space is needed, pro (b) Address	(c) EIN	rt IV. (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

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

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 Part II-A Complete if the orga				ON 86- ed Form 5768	0002290 Page
(election under sect	ion 501(h)).				
A Check 🕨 📃 if the filing organizati	on belongs to an af	filiated group.			
B Check 🕨 📃 if the filing organizati	on checked box A a	and "limited control" p	rovisions apply.		
	s on Lobbying Expe tures" means amo	enditures unts paid or incurred	L.)	<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influe	ence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to influe					
c Total lobbying expenditures (add line					
d Other exempt purpose expenditures					
e Total exempt puipose expenditures					
f Lobbying nontaxable amount. Enter					
If the amount on line 1e, column (a) or	and a real of the second se	bying nontaxable an			
Not over \$500,000	20% of	the amount on line 1e	ə.		
Over \$500,000 but not over \$1,000,0	000 \$100,0	00 plus 15% of the ex	cess over \$500,000.		
Over \$1,000,000 but not over \$1,500	0,000 \$175,0	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17,00	00,000 \$225,00	00 plus 5% of the exc	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	.000.			
	ar? 4-Year Ave ions that made a s	eraging Period Under ection 501(h) electio	Section 501(h) n do not have to compl	ete all of the five	Yes No
colu		e instructions for line nditures During 4-Ye	es 2a through 2f on pag ar Averaging Period	je 4.)	
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) Total
2 a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures		1			
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

# Schedule C (Form 990 or 990-EZ) 2010 ARIZONA CATTLE GROWERS ASSOCIATION 86-000229 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)	
		Yes	No	Am	ount
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)?				
c	Media advertisements?				
	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?				
n i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV				
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)?	1			
	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		Ī		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	till-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5), or se	ction	
	501(c)(6).	on 501(c)(	5), or se	Ction Yes	No
Par	501(c)(6).				N
Par 1			1	Yes	No
9ar 1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?		1	Yes X X	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	n 501(c)(ł	1 2 	Yes X X ction	
Part 1 2 3 Part	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."	n 501(c)( t III-A, lin	5), or see	Yes X X ction	
1 2 3 2 1 2	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members       Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures (do not include amounts (d	n 501(c)( t III-A, lin	5), or see	Yes X X ction	
1 2 3 1 2	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members       Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	n 501(c)(ł t III-A, lin al	1 2 3 5), or sec e 3 is an	Yes X X ction	
1 2 3 2 art 1 2 a	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members         Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).         Current year	n 501(c)(: t III-A, lin al	1 2 3 5), or sec e 3 is an 1 2 2	Yes X X ction	
2 1 2 3 2 2 1 1 2 2 a b	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members         Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).         Current year         Carryover from last year	n 501(c)( t III-A, lin al	1 2 3 5), or see e 3 is an 1  2a 2b	Yes X X ction	
Par 1 2 3 Parl 2 arl 2 2 a b c	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members         Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).         Current year         Carryover from last year	n 501(c)( t III-A, lin al	1 2 3 5), or sec e 3 is an 2 2 2 2 2 2	Yes X X ction	
1 2 3 Parl 2 a t c 3	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members       Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).         Current year       Carryover from last year         Total       Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	n 501(c)( t III-A, lin al	1 2 3 5), or sec e 3 is an 2 2 2 2 2 2	Yes X X ction	
Par 1 2 3 2 a b c 3 4	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-D       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members       Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).         Current year       Carryover from last year         Total       Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues         If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	n 501(c)(i t III-A, Iin al	1 2 3 5), or sec e 3 is an 2 2 2 2 2 2	Yes X X ction	
2 1 2 3 2 2 3 1 2 3 4	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         Did (c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members         Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).         Current year         Carryover from last year         Total         Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues         If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political expenditures (do not include amount on line 2c estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political estimate of nondeductible lobb	n 501(c)(ł t III-A, lin al ess	1 2 3 5), or sec e 3 is an 1 2 2 2 2 2 3	Yes X X ction	
1 2 3 3 2 3 1 2 2 3 4	501(c)(6).         Were substantially all (90% or more) dues received nondeductible by members?         Did the organization make only in-house lobbying expenditures of \$2,000 or less?         Did the organization agree to carryover lobbying and political expenditures from the prior year?         III-D       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Par "Yes."         Dues, assessments and similar amounts from members       Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).         Current year       Carryover from last year         Total       Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues         If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	n 501(c)(ł t III-A, lin al ss litical	1 2 3 5), or sec e 3 is an 1 2 2 2 2 2 3	Yes X X ction	

SCHEDULE D
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Department of the Treasury Internal Revenue Service

#### (Form 990)

1000

# Supplemental Financial Statements Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.



Name of the o	organization
---------------	--------------

#### ARIZONA CATTLE GROWERS ASSOCIATION

Employer identification number 86-0002290

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	승규는 그렇게 잘 물었다. 이 것이 가장 그는 것이 가장에서 가지 않는 것이 많이 많이 많이 했다.	
y	are the organization's property, subject to the organization's ex		
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
Da	impermissible private benefit?		Yes N
			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization Preservation of land for public use (e.g., recreation or edu Protection of natural habitat	ucation)	storically important land area ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	d conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Participant in the second seco
			Held at the End of the Tax Yea
a	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified historic struc		
d	Number of conservation easements included in (c) acquired after		
	listed in the National Register		
3	Number of conservation easements modified, transferred, relea	sed, extinguished, or terminated by the	organization during the tax
	year ▶		A '
4 5	Number of states where property subject to conservation easer		
5	Does the organization have a written policy regarding the period violations, and enforcement of the conservation easements it has		
6	Staff and volunteer hours devoted to monitoring, inspecting, an		
7	Amount of expenses incurred in monitoring, inspecting, and enf		
8	Does each conservation easement reported on line 2(d) above s		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, 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		
	conservation easements.		no organization a accounting for
	t III Organizations Maintaining Collections of A	rt, Historical Treasures, or Ot	her Similar Assets.
)ar	Complete if the organization answered "Yes" to Form 990	). Part IV. line 8.	
ar			
_	If the organization elected, as permitted under SFAS 116 (ASC 9		ent and balance sheet works of art,
		958), not to report in its revenue statem	
la	If the organization elected, as permitted under SFAS 116 (ASC s historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes	958), not to report in its revenue statem tion, education, or research in furtheran these items.	ice of public service, provide, in Part XIV,
la b	If the organization elected, as permitted under SFAS 116 (ASC s historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes If the organization elected, as permitted under SFAS 116 (ASC s	958), not to report in its revenue statem tion, education, or research in furtheran a these items. 958), to report in its revenue statement	and balance sheet works of art, historical
la b	If the organization elected, as permitted under SFAS 116 (ASC s historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes	958), not to report in its revenue statem tion, education, or research in furtheran a these items. 958), to report in its revenue statement	and balance sheet works of art, historical
b	If the organization elected, as permitted under SFAS 116 (ASC 9 historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes If the organization elected, as permitted under SFAS 116 (ASC 9 treasures, or other similar assets held for public exhibition, educa relating to these items:	958), not to report in its revenue statem tion, education, or research in furtheran these items. 958), to report in its revenue statement ation, or research in furtherance of pub	ice of public service, provide, in Part XIV, and balance sheet works of art, historical lic service, provide the following amounts
b	If the organization elected, as permitted under SFAS 116 (ASC 9 historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes If the organization elected, as permitted under SFAS 116 (ASC 9 treasures, or other similar assets held for public exhibition, educa relating to these items: (i) Revenues included in Form 990, Part VIII, line 1	958), not to report in its revenue statem tion, education, or research in furtheran these items. 958), to report in its revenue statement ation, or research in furtherance of pub	and balance sheet works of art, historical lic service, provide the following amounts
la b	If the organization elected, as permitted under SFAS 116 (ASC 9 historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes If the organization elected, as permitted under SFAS 116 (ASC 9 treasures, or other similar assets held for public exhibition, educa relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X	958), not to report in its revenue statem tion, education, or research in furtheran these items. 958), to report in its revenue statement ation, or research in furtherance of pub	and balance sheet works of art, historical lic service, provide the following amounts
1a b	If the organization elected, as permitted under SFAS 116 (ASC 9 historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes If the organization elected, as permitted under SFAS 116 (ASC 9 treasures, or other similar assets held for public exhibition, educa relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasure	958), not to report in its revenue statem tion, education, or research in furtheran these items. 958), to report in its revenue statement ation, or research in furtherance of pub	and balance sheet works of art, historical lic service, provide the following amounts
1a b	If the organization elected, as permitted under SFAS 116 (ASC 9 historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes If the organization elected, as permitted under SFAS 116 (ASC 9 treasures, or other similar assets held for public exhibition, educa relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasure the following amounts required to be reported under SFAS 116 (ASC 9 10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	958), not to report in its revenue statem tion, education, or research in furtheran these items. 958), to report in its revenue statement ation, or research in furtherance of pub res, or other similar assets for financial ASC 958) relating to these items:	and balance sheet works of art, historical lic service, provide the following amounts 
1a b	If the organization elected, as permitted under SFAS 116 (ASC 9 historical treasures, or other similar assets held for public exhibit the text of the footnote to its financial statements that describes If the organization elected, as permitted under SFAS 116 (ASC 9 treasures, or other similar assets held for public exhibition, educa relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasure	958), not to report in its revenue statem tion, education, or research in furtheran a these items. 958), to report in its revenue statement ation, or research in furtherance of pub res, or other similar assets for financial ASC 958) relating to these items:	and balance sheet works of art, historical lic service, provide the following amounts 

		A CATTLE GI					0022		
	III Organizations Maintaining								
	Jsing the organization's acquisition, acces	sion, and other reco	rds, check any of th	he following that ar	e a signif	icant use of	its collect	ion ite	ms
E F	check all that apply):		_						
aL	Public exhibition			xchange programs	0				
b L	Scholarly research		e Other						
cL	Preservation for future generations							*	
	rovide a description of the organization's						Part XIV.		
	uring the year, did the organization solicit						_		
	be sold to raise funds rather than to be r						Yes		
Part	Escrow and Custodial Arran reported an amount on Form 990, P	ngements. Comp art X. line 21.	lete if the organiza	tion answered "Yes	s" to Forr	m 990, Part I	V, line 9, d	or	
1a ls	the organization an agent, trustee, custo		diary for contributi	ons or other assets	s not inclu	uded			
or	n Form 990, Part X?						Yes	Γ	
b lf	"Yes," explain the arrangement in Part XIV	and complete the f	ollowing table:						
			n na ser e ser		Γ		Amou	nt	
c Be	eginning balance					1c			
	dditions during the year					1d			
	istributions during the year					1e			
	nding balance					1f			
2a Die	d the organization include an amount on F	form 990, Part X, line	217		····· L		Yes	-	
	"Yes," explain the arrangement in Part XIV			******			les	1	
Part V			swered "Yes" to F	form 990 Part IV li	ne 10				~
		(a) Current year	(b) Prior year	(c) Two years bad		hree years bac	k (e) For		
1a Be	eginning of year balance	and the second s	(b) Phoryean	(C) Two years bat		inee years dat		ur year	s da
	ontributions				-				
	et investment earnings, gains, and losses	1			-				
					-				
	ants or scholarships			-	-				
	her expenditures for facilities								
	d programs				-				
	iministrative expenses			- 1-	_				
	d of year balance								
	ovide the estimated percentage of the yea								
	pard designated or quasi-endowment		_%						
	rmanent endowment 🖻								
		%					-		
3a Are	e there endowment funds not in the posse	ssion of the organiza	ation that are held a	and administered f	or the org	ganization			
by:							1	Yes	N
	unrelated organizations						3a(i)		
(i)	related organizations						3a(ii)		
(ii)	related organizations	the second se	Cohodula D2				36		2
(ii)	related organizations Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule Ar	******************************					
(ii) b  f "`	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the								
(ii) b If "` <u>4 Des</u>	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the	organization's endo	wment funds.						
(ii) b If "` <u>4 Des</u>	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the	organization's endo	wment funds. , Part X, line 10.		) Accum	ulated	(d) Boo	k valu	e
(ii) b If "` <u>4 Des</u>	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the I Land, Buildings, and Equipm	organization's endo ent. See Form 990	wment funds. , Part X, line 10. her (b) Cost	t or other (c	) Accumi deprecia		(d) Boo	k valu	e
(ii) b If "` 4 Des Part V	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the <b>Land, Buildings, and Equipm</b> Description of investment	organization's endo ent. See Form 990 (a) Cost or ot basis (investm	wment funds. , Part X, line 10. her (b) Cost	t or other (c	• * * * * * * * * * * * * * * * * * * *		(d) Boo	k valu	e
(ii) b If "` <u>4 Des</u> <b>Part V</b> 1a Lan	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the <b>Land, Buildings, and Equipm</b> Description of investment	organization's endo ent. See Form 990 (a) Cost or ot basis (investm	wment funds. , Part X, line 10. her <b>(b)</b> Cost	t or other (c	• * * * * * * * * * * * * * * * * * * *		(d) Boo	k valu	e
(ii) b If "` <u>4 Des</u> <b>Part V</b> <b>1a</b> Lan b Buil	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the <b>Land, Buildings, and Equipm</b> Description of investment Idings	organization's endo ent. See Form 990 (a) Cost or ot basis (investm	wment funds. , Part X, line 10. her (b) Cost lent) basis	t or other (c	deprecia	tion	(d) Boo	k valu	e
(ii) b If "` 4 Des Part V Part V 1a Lan b Buil c Lea	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the <b>Land, Buildings, and Equipm</b> Description of investment ad ildings asehold improvements	organization's endo ent. See Form 990 (a) Cost or ot basis (investm	wment funds. , Part X, line 10. her (b) Cost lent) basis	t or other (c	deprecia	tion			0
(ii) b If" <u>4 Des</u> Part V 1a Lan b Buil c Lea d Equ	Yes" to 3a(ii), are the related organizations scribe in Part XIV the intended uses of the <b>Land, Buildings, and Equipm</b> Description of investment Idings	organization's endo ent. See Form 990 (a) Cost or ot basis (investm 	wment funds. , Part X, line 10. her (b) Cost lent) basis	t or other (c	deprecia	tion		k valu 1 <b>,</b> 5	0

Schedule D (Form 990) 2010

# Schedule D (Form 990) 2010 ARIZONA CATTLE GROWERS ASSOCIATION Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)		(	
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►			
Part VIII Investments - Program Related. S	See Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year mar	
(1) INVESTMENT IN ACA	17,500.	COST	
(2)			
(3)			
(4)			- F 26
(5)			
(6)			
(8)			
(8)			
X 1			
(9) (10)			
<u></u>	17,500.		
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line			
	Description		(1) D 1 1
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(6)			
(6) (7)			
(6) (7) (8)			
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line			
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, I			
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line	line 25.	▶ b) Amount	
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, I	line 25.		
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, I (a) Description of liability	line 25.		
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, I (a) Description of liability (1) Federal income taxes	line 25.		
(6) (7) (8) (9) (10) <b>Detal.</b> (Column (b) must equal Form 990, Part X, col (B) line <b>Part X</b> Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2)	line 25.		
(6) (7) (8) (9) (10) Detal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2) (3)	line 25.		
(6) (7) (8) (9) (10) ptal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, I (a) Description of liability (1) Federal income taxes (2) (3) (4)	line 25.		
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, I (a) Description of liability (1) Federal income taxes (2) (3) (4) (5)	line 25.		
(6) (7) (8) (9) (10) <b>Datal.</b> ( <i>Column (b) must equal Form 990, Part X, col (B) line</i> <b>Part X</b> Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7)	line 25.		
(6) (7) (8) (9) (10) <b>Datal.</b> ( <i>Column (b) must equal Form 990, Part X, col (B) line</i> <b>Part X</b> Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	line 25.		
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	line 25.		
(6) (7) (8) (9) (10) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10)	line 25.		
(6) (7) (8) (9) (10) <b>btal.</b> ( <i>Column (b) must equal Form 990, Part X, col (B) line</i> <b>Part X</b> Other Liabilities. See Form 990, Part X, 1 (a) Description of liability (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	line 25. (i	b) Amount	

-	edule D (Form 990) 2010 ARIZONA CATTLE GROWERS ASS				0002290 Page 4
-	rt XI Reconciliation of Change in Net Assets from Form 990 to			tement	
1	Total revenue (Form 990, Part VIII, column (A), line 12)				474,277.
2	Total expenses (Form 990, Part IX, column (A), line 25)				515,495.
4	Excess or (deficit) for the year. Subtract line 2 from line 1				-41,210.
	Net unrealized gains (losses) on investments				
5	Donated services and use of facilities				
6	Investment expenses				
7	Prior period adjustments				
9	Other (Describe in Part XIV.) Total adjustments (net). Add lines 4 through 8				0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and				0.
-	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts With	Revenue per	Return	-41,218.
1	Total revenue, gains, and other support per audited financial statements				518,621.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а		2a			
b				-	
c	Recoveries of prior year grants				*
	Other (Describe in Part XIV.)		44,344		
	Add lines 2a through 2d		and the second sec	2e	44,344.
3	Subtract line 2e from line 1			3	474,277.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)				
	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	474,277.
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme				n
.1	Total expenses and losses per audited financial statements			1	525,610.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
	Prior year adjustments	2b			1
	Other losses				21
	Other (Describe in Part XIV.)		10,115.	,	
	Add lines 2a through 2d			2e	10,115.
	Subtract line 2e from line 1			3	515,495.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)	4b			
	Add lines 4a and 4b			4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		*****	5	515,495.
Par	t XIV Supplemental Information			100	
X, line	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple T X, LINE 2: THE ASSOCIATION HAS EVALUATED	te this part	to provide any ad	ditional in	; Part V, line 4; Part formation.
CUR	RENTLY, THE TAX RETURNS OPEN AND SUBJECT TO	O EXAN	INATION A	RE TH	HE 2008,
	9 AND 2010 FISCAL YEARS BY THE INTERNAL RE	1.77			
200	8, 2009 AND 2010 FISCAL YEARS BY THE ARIZON	NA DEF	ARTMENT O	F REV	/ENUE.
IOW	EVER, THE ASSOCIATION IS NOT CURRENTLY UND	ER AUD	IT NOR HA	S THE	<u> </u>
ASS	OCIATION BEEN CONTACTED BY ANY OF THESE JUN	RISDIC	TIONS. B	ASED	ON THE
IVA:	LUATION OF THE ASSOCIATION'S TAX POSITIONS,	, MANA	GEMENT BE	LIEVE	S ALL TAX
OS	ITIONS TAKEN WOULD BE UPHELD UNDER EXAMINAT	TION.	THEREFOR		and share the same set of the same
32054 2-20-10				schedule	D (Form 990) 2010

Schedule D (Fo						GRC	WERS	ASSOCIATIO	ON	86-	-0002290	Page 5
Part XIV S	uppleme	ntal Inf	ormation (co	ontinue	əd)	_				8		
PROVISIO	ON FOR	THE	EFFECTS	OF	UNCER	TAIN	TAX	POSITIONS	HAVE	BEEN	RECORDE	D
FOR THE	YEARS	ENDE	D JUNE 3	30,	2011	AND	2010.		19.12.			

PART XII, LINE 2D - OTHER ADJUSTMENTS:

PROGRAM SERVICE REVENUE RECOGNIZED IN PREVIOUS PERIOD250.PROGRAM SERVICE REVENUE RECOGNIZED IN THE CURRENT PERIOD35,859.DIRECT EXPENSES FROM GAMING REPORTED ON FORM 990 PART VIII8,235.TOTAL TO SCHEDULE D, PART XII, LINE 2D44,344.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:EXPENSES RECOGNIZED FROM THE CURRENT PERIOD1,880.DIRECT EXPENSES FROM GAMING REPORTED ON FORM 990 PART VIII8,235.TOTAL TO SCHEDULE D, PART XIII, LINE 2D10,115.

SCHEDULE G (Form 990 or 990-EZ)	S	upplemental Inf Fundraising or				ļ.	F	OMB No. 1545-0047
Department of the Treasury nternal Revenue Service	or if the	he organization answered organization entered mor tach to Form 990 or Form	"Yes" to Fe than \$15	orm 9 ,000 o	90, Part IV, lines 17, on Form 990-EZ, line	e 6a.		Open To Public Inspection
Name of the organization	and the second second	CATTLE GROWERS		115			Employer ide 86-0002	entification numb
Part I Fundraisin		complete if the organization				line 1		
<ul> <li>a Mail solicitation</li> <li>b Internet and en</li> <li>c Phone solicitati</li> <li>d In-person solici</li> <li>2 a Did the organization h</li> <li>key employees listed</li> </ul>	nail solicitations ions tations nave a written or c in Form 990, Part ighest paid individ	f Sc g Sp ral agreement with any indiv VII) or entity in connection v uals or entities (fundraisers)	olicitation of olicitation of pecial fundr vidual (inclu with profess	non-g gover aising ding c	overnment grants mment grants events fficers, directors, tru fundraising services'	stees ?	Yes	
(i) Name and address o or entity (fundrai	A CONTRACTOR OF	(ii) Activity	fund have c or cor	Did raiser ustody trol of utions?	(iv) Gross receipts from activity	to (o	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by organization
			Yes	No				
							·c	
								-
			_					
						<u>[</u> ]		
			-					
otal 3 List all states in which t	ho organization in	registered or licensed to so			or has been activity	14 fa -		
or licensing.				110110	of has been notified	11.15 0.	Xempt from re	gistration
				_				

Schedule G (Form 990 or 990-EZ) 2010	ARIZONA	CATTLE	GROWERS	ASSOCIATION	86-0002290	Page 2
						and the second se

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-FZ, lines 1 and 6b, List events with gross receipts greater than \$5,000

Revenue						(d) Total events (add col. (a) through col. (c))
Le l			(event type)	(event type)	(total number)	- coi. (c))
5						10.00
Re	1	Gross receipts		-		
	2	Less: Charitable contributions				
	3	Gross income (line 1 minus line 2)				*
	4	Cash prizes				
ses	5	Noncash prizes				
Expen	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
14	8	Entertainment				
-	10	Other direct expenses Direct expense summary. Add lines 4 through				(
Par	11	Net income summary. Combine line 3, colum Gaming. Complete if the organization	n (d), and line 10	000 Det IV line 10 and	<b>&gt;</b>	
r al	1.13	\$15,000 on Form 990-EZ, line 6a.	answered res to Form	1990, Part IV, line 19, or r	eported more than	
Kevenue	Ĩ		<b>(a)</b> Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
	1	Gross revenue			41,843.	41,843.
ses	2	Cash prizes				
Cybell:	3	Noncash prizes			8,235.	8,235.
Lurect Expenses	4	Rent/facility costs				
1	5 (	Other direct expenses				
		Volunteer labor	└── Yes % └── No	└── Yes % └── No	☐ Yes % X No	
7	7 [	Direct expense summary. Add lines 2 through	5 in column (d)			( 8,235;
٤	3 1	Net gaming income summary. Combine line 1,	column d, and line 7			33,608.
F	inte	r the state(s) in which the organization operate	as gaming activities: A	7		
a ls b lf	the No	e organization licensed to operate gaming act o," explain: THE ORGANIZATION	ivities in each of these s	states?	FORE IS NOT	Yes X No REQUIRED TO
]	BE	LICENSED.				
aM	lere	any of the organization's gaming licenses rev	oked suspended arte	minated during the terror	2012	Ver VIII
		eany of the organization's garning licenses revealed any of the organization s garning licenses rev	okeu, suspended of tel	minated during the tax ye	ear (	Yes X No

Schedule G (Form 990 or 990-EZ) 2010

Schedule G (Form 990 or 990-EZ) 2010 ARIZONA CATTLE GROWERS ASSOCIATION 86-	0002	290	Page 3
11 Does the organization operate gaming activities with nonmembers?			XNo
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
to administer charitable gaming?		Yes	X No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	13a		.00 %
b An outside facility		100	.00 %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name  KIM COE		_	
Address ► 1401 NORTH 24TH STREET, STE. 4 - PHOENIX, AZ 85008	_		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🗆 ,	Yes	X No
b If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> \$ and the amount			
of gaming revenue retained by the third party <b>&gt;</b> \$ and the amount			
c If "Yes," enter name and address of the third party:			
c in res, entername and address of the time party.			
Name 🕨			
Address ►			
16 Gaming manager information:			
Name > DOC LANE	41		
Name DOC LANE			
Gaming manager compensation <b>&gt;</b> \$ 0.			
Description of services provided  MANAGER OF THE RAFFLE.			
X Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a is the organization required under state law to make charitable distributions from the gaming proceeds to			1.50
retain the state gaming license?	Y	es	X No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year 🕨 \$			
Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)			
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information	(see ins	struct	ons).
		_	
	_		

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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



Name of the organization

ARIZONA CATTLE GROWERS ASSOCIATION

Employer identification number 86-0002290

#### FORM 990, PART VI, SECTION B, LINE 11: REVIEW AND ACCEPTANCE BY A

RESOULTION AT A BOARD MEETING.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION ALLOWS FOR

INSPECTION UPON REQUEST.

THERE HAS BEEN NO CHANGE FROM PRIOR YEARS IN THE OVERSIGHT PROCESS AND

SELECTION PROCESS.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 032211 01-24-11

	<ul> <li>Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.</li> <li>Attach to Form 990.</li> </ul>	and Unrelated Partner: d "Yes" to Form 990, Part IV, line 33, 3. See separate instructions.	artnerships ine 33, 34, 35, 36, uctions.	or 37.		OMB No. 1545-0047 2010 Open to Public Inspection
Name of the organization ARIZONA CATTLE	E GROWERS ASSOCIATION				Employer identificatio 86-0002900	Employer identification number 86–0002990
Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	ete if the organization answered "Y	es" to Form 990, Part IV, line 3	3.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	me End-of-year assets		(f) Direct controlling entity
				-		
Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	cations (Complete if the organization	n answered "Yes" to Form 990	 , Part IV, line 34 be	cause it had one o	r more related tax-exe	empt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	512 512
						Aes Aes
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ns for Form 990.				Schedule R	Schedule R (Form 990) 2010

12-21-10 LHA

(a)	(a) 101										
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	icome ated, x under 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations? Yes No	(i) Code V-UBI armount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(j) (k) General or Percentage managing partner/ Yes No
							P				
Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year.) (a) Name, address, and EIN of related organization	ations Taxable as tion or trust during	a Corpo the tax y	E .	nplete if the ori ity Legal	ganizatio	or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related       (b)     (c)     (d)     (e)     (f)     (g)     (h)       Primary activity     Legal domicile     Direct controlling     Type of entity     Share of total     Share of percentar	to Form 990, Par (e)	t IV, line 34 becau (1) Share of total	because it had of the definition of the definiti	ad one or moi (g) Share of	e related (h) Percentage
				8 4	foreign country)	enniy	(u corp, s corp, or trust)	Income		5	ownership
	INC 86-0543753		MANAGEMENT SERVICES		AZ	N/A	C CORP	N/A		N/A	N/A
						4					
				30	1					-	Schedule R (Form 000) 2010

(1) (2) (3) (4) (5) (6)
Name of other organization
<ul> <li>Other transfer of cash or property to other organization(s)</li> <li>I Other transfer of cash or property from other organization(s)</li> </ul>
Reimbursement paid to other organization for expenses Reimbursement paid by other organization for expenses
n Sharing of paid employees
m Sharing of facilities, equipment, mailing lists or other assets
Lease of facilities. equipment, or other second from other second from other second seco
i Lease of facilities, equipment, or other assets to other organization(s)
g Purchase of assets from other organization(s)
f Sale of assets to other organization(s)
e Loans or loan guarantees by other organization(s)
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?
2
Part V Transactions With Related Organizations (Complete if the organization
4 5 9 5 5 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2

Differences Organizations Laxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)	(Complete if the organization answ	ared "Yes" to Form 990	, Part IV, line 3	(',			
Provide the following information for each entity taxed as a partnership through which the organization conditinat was not a related organization. See instructions regarding exclusion for certain investment partnerships.	ership through which the organizat colusion for certain investment part	which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) tain investment partnerships.	an five percent	of its activities (me	easured by to	tal assets or gross r	evenue)
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations? Yes No	(e) Share of end-of- year assets	(f) Dispropor- tionate allocations?	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part
					2	(0001 1116 A	
		de.					
032164					_	Schedule R (Form 990) 2010	n 990) 2010

12-21-10

## TAX RETURN FILING INSTRUCTIONS

ARIZONA FORM 99

### FOR THE YEAR ENDING

June 30, 2011

Prepared for	Mr. Doc Lane Arizona Cattle Growers Association 1401 North 24th Street Phoenix, Arizona 85008
Prepared by	Wallace, Plese + Dreher, LLP 3933 S. Mcclintock Dr., Ste 500 Tempe, AZ 85282
Amount due or refund	No payment required
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Arizona Department of Revenue PO Box 52153 Phoenix, AZ 85072-2153
Return must be mailed on or before	November 15, 2011
Special Instructions	The return should be signed and dated by an authorized individual. We recommend that you send the return to the taxing authority by U. S. Post Office date stamped certified mail with a request for a return receipt. Please retain the receipt as a proof of filing.

11

# ARIZONA FORM Arizona Exempt Organization Annual Information Return 99 For the \_\_\_\_\_\_ calendar year 2010 or X fiscal year beginning 07/01/10 and ending 06/30/11

00	14	-
20	1	11
20		v

CHE		NE: E Name anded C & ARIZONA CATTLE GROWERS AS	SOCI	ATTON		Employ	ver identification number	(EIN)
Original A	I Ame	Number and street or PO Box	0001	TTON	-	86	-0002290	
Rusiness tele	Business telephone number						nsaction privilege tax	numbe
City or town, state and ZIP code						- ~~ ua	insaction privilege tax	numbe
602-26	7-1					86	-0002290	
68 Check b		particular provide the second s	hange	CHECK BOX 82 Return filed u extension.		2	os. Fed 6-mos. A	Z - Fed 1
A Date Ariz	ona	operations began $12/01/1924$			NLY	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	OT MARK IN THIS	AREA.
B Nature of	Ariz	ona activities MEMBERSHIP						
C Check fe	dera	form filed: X 990 990-EZ Other (specify)						-
En	clos	e a copy of the organization's federal return.		81		6	6	
Sources	1	Gross sales or receipts from business activities	1	41,843	00	T I		
of	2		2		00			
Income	3	그는 것 같아요. 그렇지? 한 것 같아요. 이는 것 다 적 수학적인 전자가 가장 없는 지방 정말 것이 것 같아요. 것 같아요. 정말 것	3	41,843	1			
	4		4	31	00	1		
	5		5		00	1		
	6	이 그런 것은 것 같아요. 그는 것 같아요. 이 것 같아요. 이 것 같아요. 이 것 같아요. 이 것 같아요. 전문 것 같아요. 소문 것 같아요. ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ?	6	1	00	-		
	7		7		00	1		
	8	양 그렇는 나는 것 같아요. 그는 것, 동안은 한 것, 그는 것이라. 그는 것은 것은 것이 가지 않는 것 같아요. 이 것 같아?	8	193,968		1		
	9		9		00	1		
	10		10	55,455	-	-		
			11	191,215			FATEMENT 1	
	12	Other income - attach itemized statement Total income - add lines 3 through 11				12	482,51	
Administrative	13	1 An A A A A	13		00	12	102/01	2100
Expenses	14				00			
	15		3	340	00			
	16		16	1	00			
	17		17		00			
	18	Depreciation - attach schedule	18		00			
	19	Miscellaneous expenses - attach itemized statement	19		00			
	20				-7.7	20		00
Disbursements	21		21		00	20		100
From Current		Contributions, gifts, grants, etc., paid		-	00	ñ		
ncome for the	23	Benefit payments to or for members or their dependents:	66		00			
Organization's		a. Death, sickness, hospitalization, disability, or pension benefits	23a		00			
empt		b. Other benefits	23b		00			
urposes	24	Dividends and other distributions to members, shareholders, or depositors			00			
	25	Other	25	523,730		ST	TATEMENT 2	
	26	Total - add lines 21 through 25			_	26	523,73	
lisbursements	27	Dues, assessments, etc., to affiliated corporations	27		00	20	525715	0100
rom Principal	28	Contributions, gifts, grants, etc., paid	28		00			
or the	29	Benefit payments to or for members or their dependents:			00			
rganization's		a. Death, sickness, hospitalization, disability, or pension benefits	29a		00			
xempt		b. Other benefits	29b		00			
urposes	30	Dividends and other distributions to members, shareholders, or depositors	30		00			
	31	Other	31		00			
	32	Total • add lines 27 through 31			-	32		00
ther	33	Other disbursements not itemized above - attach schedule				33		00
ccumulation	34	Accumulation of income in current year - line 12 less the sum of line			_	34	-41,21	
f Income	35	Accumulation of income at beginning of year				35	249,09	
37971 1-29-10	36	Accumulation of income at end of year - add lines 34 and 35				36	207,87	
enalty		Penalty for late filing or incomplete filing - See instructions				37	201101.	00
DOR 10418 (10)		THE EVEN PT ORGANIZATION IS SUBJECT TO A DENALTY IS THIS DETUDA			_			00

revious ADOR 91-0022 THE EXEMPT ORGANIZATION IS SUBJECT TO A PENALTY IF THIS RETURN IS FILED LATE OR IS INCOMPLETE. ARS § 42-1125(K).

### ...Z Form 99 (2010) Name: ARIZONA CATTLE GROWERS ASSOCIATION

EIN: 86-0002290 Page 2 of 2

### Schedule A - Balance Sheet

NOTE: Amounts used in attached schedules and in this column should be end of year amounts.			t be end of	(a) Beginning of year		(b) End of year		
-	Assets			boginning of your		Life of year		
			T.	000 050				
A1	Cash			229,2590	0 A1	224,9740		
A2a	Accounts receivable		00					
	b Less: allowance for doubtful accounts		00	250	1000	17 100		
1.	c Line A2a less line A2b. Enter difference in column			250 0	0 A2c	17,1230		
АЗа	Other notes and loans receivable - attach schedule	A3a	00					
	b Less: allowance for doubtful accounts	A3b	00	1.	1			
	c Line A3a less line A3b. Enter difference in column				0 A3c	0		
A4	Inventories		······		0 A4	0		
A5	Investments (securities) - attach schedule			17,500 0		17 500-		
A6	Investments (other) - attach schedule		38,511 00	17,5000	0 A6	17,5000		
A7a	Land, buildings, and equipment; basisb Less: accumulated depreciation - attach schedule		36,950 00					
				2,4330		1 561		
	c Line A7a less line A7b. Enter difference in column (		ATEMENT 3			1,561 0		
A8				240 442		7,480 0		
49	Total assets - add lines A1 through A8		E	249,442 0	0 A9	268,638 0		
	Liabilities							
410	Accounts payable and accrued expenses			349 0		59,869 00		
A11	Mortgages and other notes payable - attach schedule				0 A11			
12	Other liabilities - describe S				0 A12	894 00		
	Total liabilities - add lines A10 through A12		A CONCERNENT OF A DATA BARANCE AND A	349 00		60,763 00		
			·····	019 0	AIS	00,705,00		
	Net Assets							
14	Capital stock or trust principal			00	A14	00		
15	Paid-in or capital surplus				A15	00		
16	Retained earnings or accumulated income			249,093 00		207,875 00		
	Total net assets - add lines A14 through A16			249,093 00	A17	207,875 00		
			Ξ.					
18	Total liabilities and net assets - add lines A13 and A	17		249,442 00	A18	268,638 00		
ertil	ication Under penalties of perjury, I declare that I have best of my knowledge and belief, it is a true, co the income tax laws of the State of Arizona.	examined prrect and c	this return, including acc complete return, made in	companying schedules good faith, for the tax	s and st able yea	atements, and to the ar stated pursuant to		
leas	e							
ign l								
	Officer's signature		Date	Л	itle			
aid	MA . L. M. M	1		i t				
	rer's Middle MM	PPA	1 17	110/11				
se C	///////////////////////////////////////	611	Date	P	reparer's	EIN, PTIN or SSN		
	WALLACE, PLESE + DREHER,	LLP		8	6-08	341383		
	Firm's name (or preparer's, if self-employed)					EIN or SSN		
	3933 S. MCCLINTOCK DR.,	STE 5		00 /	480)	345-0500		
	TEMPE, AZ		852	02	4001	343-0300		

ARIZONA CATTLE GROWERS ASSOCIATION

### 86-0002290

AZ 99	OTHER INCOM	E	STATEMENT	1
DESCRIPTION			AMOUNT	
OTHER REVENUE MEETINGS, CONVENTIONS, NEWSLETTERS AND CALENI			81,70 56,3 53,1	72.
TOTAL TO FORM 99, PAGE	E 1, LINE 11		191,2	15.
AZ 99	OTHER EXPEN	SES	STATEMENT	2
DESCRIPTION			AMOUNT	
DIRECT EXPENSES OF GAM LEGAL FEES ACCOUNTING FEES TRAVEL CONFERENCES AND CONVEN DEPRECIATION, DEPLETIC MANAGEMENT FEES PRINTING & PUBLICATION STAFF EXPENSE CONTRACT LABOR MEMBERSHIP DUES ALL OTHER EXPENSES TOTAL TO FORM 99, PAGE	TIONS N AND AMORTIZATION S		8,23 16,74 7,07 5,29 76,59 87 204,62 56,27 55,07 32,52 22,04 38,37 523,73	16. 70. 92. 72. 72. 73. 75. 73. 75. 75. 75. 75. 75. 75. 77.
AZ 99	OTHER ASSETS	5	STATEMENT	3
DESCRIPTION		BEG OF YEAR	END OF YEAR	
PREPAID EXPENSES AND D	EFERRED CHARGES	0.	7,48	0.
TOTAL TO FORM 99, PAGE	2, LINE A8	0.	7,48	0.

ARIZONA CATTLE GROWERS ASSOCIATION

AZ 99	OTHER LIABILITIES	LIABILITIES		
DESCRIPTION		BEG OF YEAR	END OF YEAR	
DEFERRED REVENUE		0.	894	ł .
TOTAL TO FORM 99, PAGE 2,	LINE A12	0.	894	ł .

# A COPY OF THE FEDERAL INCOME TAX RETURN WAS ATTACHED TO THIS STATE RETURN

		EXTENSION GRANTED TO FEBRUARY		
	C	Return of Organization Exempt From		OMB No. 1545-0047
Fo	rm 🖕	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue	Code (except black lung	2009
		benefit trust or private foundation) For the organization may have to use a copy of this return to satisfy s	tate reporting requirements	Open to Public
-			JUN 30, 2010	
-	Check	C Name of organization	D Employer identifi	
	applica	use IRS	D Employer Identifi	outon number
	Add	ge print or ARIZONA CATTLE GROWERS ASSOCIATION		
	Nanchar	ge Doing Business As	86-0	002290
	Initia	n See Number and street (or P.U. box if mail is not delivered to street address) Room/		
F	Tern ated	Instruc- 1401 N. 24TH ST.	and the second sec	267-1129
-	App	Gity or town, state or country, and ZIP + 4	G Gross receipts \$	584,560.
	tion pend	FRUENIA, AZ 05000	H(a) Is this a group re	
		1401 NORTH 24TH STREET, PHOENIX, AZ 85008	for affiliates?	Yes X No
1	Tax-e	xempt status: $X = 501(c) (5) \leq (insert no.) = 4947(a)(1) \text{ or } 527$		luded? Yes No
_		ite: N/A	H(c) Group exemptio	
-			Year of formation: 1924	
	artl	Summary		
e	1	Briefly describe the organization's mission or most significant activities: $\underline{TO}$ PROVI	DE EDUCATION	ABOUT THE
Activities & Governance	1.2	CATTLE INDUSTRY.		
ern	2	Check this box 🕨 🛄 if the organization discontinued its operations or disposed of		
Gov	3			26
00	4	Number of independent voting members of the governing body (Part VI, line 1b)		26
ities	5	Total number of employees (Part V, line 2a)		0
ctivi	6 7a	Total number of volunteers (estimate if necessary)	0 7a	184.
A		Net unrelated business taxable income from Form 990-T, line 34		0.
			Prior Year	Current Year
e	8	Contributions and grants (Part VIII line 1h)	109,514.	215,119.
Revenue	9	Program service revenue (Part VIII, line 20 Investment income (Part VIII, column (A), lines 3, 4, and Cel)	279,815.	200,210.
Rev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,832.	184.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1 20, 14	153,856.	161,946.
÷	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), ine 12)	545,017.	577,459.
	13 14	Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)		
'n		Salaries, other compensation, employee benefits (Part IX, column (A), line 4)	29,910.	
Ise		Professional fundraising fees (Part IX, column (A), line 11e)	25,510.	
Expenses		Total fundraising expenses (Part IX, column (D), line 25)		
ĥ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	502,032.	587,325.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	531,942.	587,325.
. 0	19	Revenue less expenses. Subtract line 18 from line 12	13,075.	-9,866.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
Bala		Total assets (Part X, line 16)	301,569.	249,442.
und u		Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	<u>42,610.</u> 258,959.	349.
	rtll	Signature Block	430,939.	249,093.
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stateme and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledg	e and belief, it is true, correct,
		and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowle	dge.	
Sign				
Here	9	Signature of officer	Date	
		MR. DOC LANE		
	-	Type or print name and title	Chook if	In International
Paid		Preparer's signature Ale And, CPC 2-9-11	self- (see inst	's identifying number ructions)
repa	arer's	Signature WALLACE, PLESE + DREHER, LLP	employed	
Use (	Dnly	yours if self-employed), 3933 S. MCCLINTOCK DR., SUITE 500	EIN ►	
		address, and ZIP+4 TEMPE, ARIZONA 85282	Phone no > ( A	180) 345-0500
May	the IF	S discuss this return with the preparer shown above? (see instructions)	Truone no. ► / ٩	X Yes No
		/		

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

	m 990 (2009) ARIZONA CATTLE GROWERS ASSOCIATION 86-0002290 Page 2 art III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: TO PROVIDE EDUCATION ABOUT THE CATTLE INDUSTRY.
	TO PROVIDE EDUCATION ABOUT THE CATTLE INDUSTRY.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ? Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) PROVIDED EDUCATIONAL AND PROMOTIONAL INFORMATION TO CATTLE GROWERS AND THE GENERAL PUBLIC.
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) SPONSORED MEETINGS AND SEMINARS FOR CATTLE GROWERS AND THE GENERAL PUBLIC.
4c	(Code: )(Expenses \$ including grants of \$ )(Revenue \$ ) PROVIDED PUBLICATIONS TO CATTLE GROWERS AND THE GENERAL PUBLIC TO DISSEMINATE INFORMATION PERTINENT TO THE CATTLE INDUSTRY.
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

932002 02-04-10

Fame	000	10000
Form	990	(2009)

-					
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		-	Yes	No
2	If "Yes," complete Schedule A		1	-	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	andidatas for	2	+	X
	public office? If "Yes," complete Schedule C, Part I		3	1.1	x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Scho	edule C. Part II	4	-	1
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)				
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III		5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have		-		1
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete S	chedule D, Par	t/ 6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,	' complete	110		
9	Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X		8		X
U	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule				v
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endo		. 9	-	X
	If "Yes," complete Schedule D, Part V		10		v
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VI	WIII IX or X	. 10	-	X
	as applicable		11	x	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	e Schedule D,	. 11	- 21	
	Part VI.				
	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of	of its total			
	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 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 in			
1.2	Part X, line 16? If "Yes," complete Schedule D, Part IX.				
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Pa		10		
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that a	ddresses			
12	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.				
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," con Schedule D, Parts XI, XII, and XIII.	plete	-		
124	Was the organization included in consolidated, independent audited financial statements for the tax year?		12	X	
1 Len	If "Yos" completing Schedule D. Darte VI. VII. and VIII is actional	Yes N 12A			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12A 2			X
	Did the organization maintain an office, employees, or agents outside of the United States?		13 14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraisi	na business	140		A
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	ig, 546ine56,	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any orga	nization	. 140		
	or entity located outside the United States? If "Yes," complete Schedule F, Part II		15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	to individuals			4.
	located outside the United States? If "Yes," complete Schedule F, Part III		16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on F	Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on P	art VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II		18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "	Yes,"	1.1		
	complete Schedule G, Part III		19	X	-
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		20	+	Х

Form 990 (2009)

 Form 990 (2009)
 ARIZONA
 CATTLE
 GROWERS
 ASSOCIATION

 Part IV
 Checklist of Required Schedules (continued)
 Association
 Association
 Association

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		Yes	No
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
2.0	Schedule J	23	-	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	1	
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27	-	X
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		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was	28b		X
20	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-	X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> 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>	29		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30 31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		X
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	x	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	120		v
36	If "Yes," complete Schedule R, Part V, line 2	35		X
	If "Yes," complete Schedule R, Part V, line 2	36		_
	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? <i>If "Yes," complete Schedule R, Part VI</i> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	37		X

Form 990	(2009)
Part V	Sta

### ARIZONA CATTLE GROWERS ASSOCIATION Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		103	INU
	U.S. Information Returns. Enter -0- if not applicable1a	6		
Ł	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0		
c	B'ILI III III III III III III III III III			1
	(gambling) winnings to prize winners?	. 1c	x	·
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			1
	filed for the calendar year ending with or within the year covered by this return	0	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			· · · · ·
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	0.5		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b	If "Yes," enter the name of the foreign country:			43
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and	111	1111	
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	이 프로그램 이 것 같아요. 그는 것 같아요. 그는 것 같아요. 그는 그 요즘 아이는 것 같아요. 이 것 같아요. 이 것 같아요. 이 것 같아요. 그는 것 같아요. 것 같아요. 그는 것 같아요. 그는 것 같아요. ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	00	-	
	Tax Shelter Transaction?	5c	110	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	00		
	any contributions that were not tax deductible?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			- 43
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	00		
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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c	_	x
d	If "Yes," indicate the number of Forms 8282 filed during the year7d		-	
e	Did the organization, during the year, 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	1	
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		_
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders11a			
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		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1.00		

Form 990 (2009)

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### ARIZONA CATTLE GROWERS ASSOCIATION

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

	ction A. Governing Body and Management				Yes	No
1:	Enter the number of voting members of the governing body	1a	26		res	NO
	Enter the number of voting members that are independent	1b	26			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with any	other			
2	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the					1.5
	of officers, directors or trustees, or key employees to a management company or other person?			3	-	X
4	Did the organization make any significant changes to its organizational documents since the prior Fo			4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		5	-	X
6	Does the organization have members or stockholders?			6	-	X
	Does the organization have members, stockholders, or other persons who may elect one or more me governing body?			7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken by the following:	during the	year			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re					
				-	Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			10a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such			100		
				10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fill	ing the forn	n?	11	X	1
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					11
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	1.1	X
	Are officers, directors or trustees, and key employees required to disclose annually interests that cou					
	to conflicts?	1. S. S. S. S. S. S. S.		12b		
c	그 그는 것 같은 것 같	Yes," descr	ibe			
	in Schedule O how this is done		and the second se	12c		
13	Does the organization have a written whistleblower policy?			13		Х
14	Does the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approval					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	_	Х
	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			10.5		4.4
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem					
	taxable entity during the year?			16a	-	X
d	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluin joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization of the organ	nization's	licipation			
0	exempt status with respect to such arrangements?		anna ann ann ann ann ann ann ann ann an	16b		
1.1.1	tion C. Disclosure					_
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright AZ$		Part in the last			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (	(501(c)(3)s	only) available f	or		
	public inspection. Indicate how you make these available. Check all that apply. Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, con	nflict of inte	erest policy, and	finar	ncial	
	statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books and	records o	f the organizatio	on: 🕨		

ARIZONA	CATTLE	GROWERS'	ASSOC.	, INC -	602-267-1129
 1401 N.	24TH ST	., PHOENI	X, AZ	85008	

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. Use Schedule J-2 if additional space is needed.

• 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. See instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

X Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)					oly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
STEVE BROPHY										
PRESIDENT	1.00	1			-			0.	0.	0.
ANDY GROSETA 1ST VICE PRESIDENT	1.00							0.	0.	0.
DAN BELL							121			
2ND VICE PRESIDENT	1.00				1.00			Ο.	Ο.	0.
C.B. 'DOC' LANE	78.47				100					
EXECUTIVE VICE PRESIDENT	15.00				1			0.	0.	0.
GRANT BOICE									1.000	
TREASURER	1.00				_		_	0.	Ο.	Ο.
JIM O'HACO										
MEMBER-AT-LARGE	1.00							0.	Ο.	0.
GARY THRASHER	1.000									
MEMBER-AT-LARGE	1.00		-					0.	0.	0.
TOM CHILTON								1.		
IMMEDIATE PAST PRESIDENT	1.00							0.	0.	0.
PAM ZAWACKY	1200-0		1							
COWBELLE PRESIDENT	1.00							0.	0.	0.
LANCE KNIGHT										
DIRECTOR - APACHE	1.00	-						0.	0.	0.
DAVID JOHNSON	0.0000/									
DIRECTOR - ARIZ STRIP	1.00			-				0.	0.	0.
DENNIS MORONEY	1.1.1									
DIRECTOR - COCHISE	1.00					1.1	-	0.	0.	0.
DUANE COLEMAN		H	-			1 = 1				
DIRECTOR - COCONINO	1.00		_		_	_		0.	0.	0.
DAVID COOK										
DIRECTOR - GILA	1.00							0.	0.	0.
MIKE WEAR										
DIRECTOR - GRAHAM	1.00							0.	0.	0.
ROCKY MANUZ										
DIRECTOR - GREENLEE	1.00			_		_		0.	0.	0.
DWAYNE DOBSON										
DIRECTOR - MARICOPA	1.00					- 1		0.	0.	0.

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Form 990 (2009) ARIZONA ( Part VII Section A. Officers, Directors, Tru									<u>86-0002</u>	2290	F	Page 8
(A) Name and title	<b>(B)</b> Average hours	(B) (C) erage Position ours (check all that app				n		(D) Reportable compensation	<b>(E)</b> Reportable compensation		(F) stimat mount	t of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	fi org an	other opens rom th ganiza d rela anizat	ation ne tion ted
EMMETT STURGILL												
DIRECTOR - MOHAVE	1.00							0.	0.		_	0.
JIM O'HACO DIRECTOR - NAVAJO	1.00							0.	0.			0.
JOE KING DIRECTOR - PIMA	1 00	141						0	0	1		~
BILL DUNN	1.00		-	-		1		0.	0.			0.
DIRECTOR - PINAL	1.00							0.	0.			0.
CYNDI COPING	- 1. C.I											
DIRECTOR - SANTA CRUZ	1.00	_					_	0.	0.	1		0.
PAUL GROSETA	1 00							0	0			
DIRECTOR - YAVAPAI ALEX DEES	1.00	-	-	-	-			0.	0.	-		0.
DIRECTOR - YUMA	1.00							0.	0.			0.
LARRY MCDONALD		1-11	_									0.
ACFA PRESIDENT	1.00							0.	0.			0.
CAMERON RUDOLPH												
ACGA BUS. ASSOC. DIRECTO	1.00	-		-	-	-		0.	0.			0.
			_									
1b Total								0.	0.	-		0.
2 Total number of individuals (including but no compensation from the organization	or infinited to th	ose	liste	u ao	ove	9) WI	o re	ceived more than \$100,	000 in reportable	_		0
											Yes	No
3 Did the organization list any former officer, o		stee,										v
line 1a? <i>If "Yes," complete Schedule J for su</i> 4 For any individual listed on line 1a, is the sur								er compensation from t	a consider a consider contract a consider a consid	3	-	X
and related organizations greater than \$150,								Care and a second s		4		х
5 Did any person listed on line 1a receive or ad											-	
the organization? If "Yes," complete Schedu	le J for such p	erso	n							5		X
Section B. Independent Contractors						2.7						_
<ol> <li>Complete this table for your five highest com the organization. NONE</li> </ol>	ipensated ind	eper	nden	it co	ontra	actor	rs th	at received more than \$	5100,000 of compensi	ation fr	om	
(A) Name and business a	ddress							(B) Description of se	ervices C	(C) ompensation		
				-			-					-
			_		_		_					_
2 Total number of independent contractors (inc \$100,000 in compensation from the organiza		t lim	ited	to th	nose O	e list	ed a	above) who received mo	re than			_

		(2009) ARIZ	ONA CATT	LE GROWER,	S ASSOCIAT	NOI	86-0002	290 Page 9
	rt V				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	k c c f	<ul> <li>Federated campaigns</li> <li>Membership dues</li> <li>Fundraising events</li> <li>Related organizations</li> <li>Government grants (contributions, gifts, gransimilar amounts not included about some similar amounts not included in lines</li> </ul>	1b           1c           1d           tions)         1e           nts, and         1f	171,475.				
ang		Total. Add lines 1a-1f			215,119.			
Program Service Revenue	2 a	MEETINGS, CONVE NEWSLETTERS AND	ENTIONS, CALEND	Business Code 110000 110000	154,596. 45,614.			
		All other program service reve	enue		200,210.			
-	3	Total. Add lines 2a-2f Investment income (including			200,210.			
	4	other similar amounts) Income from investment of tax	x-exempt bond p	proceeds	184.		184.	
	5	Royalties	(i) Real	(ii) Personal		~ ~ ~ ~ ~		
	c d	Less: rental expenses Rental income or (loss) Net rental income or (loss)		<b></b>				
	b c	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities	(ii) Other				
Other Revenue	8 a	Gross income from fundraising including \$ contributions reported on line Part IV, line 18	g events (not of 1c). See a					
đ		Less: direct expenses Net income or (loss) from fund						
	9 a	Gross income from gaming act Part IV, line 19 Less: direct expenses	tivities. See	<u>48,146.</u> 7,101.				
		Net income or (loss) from gami			41,045.	41,045.		
1	b	Gross sales of inventory, less r and allowances Less: cost of goods sold Net income or (loss) from sales	a b					
	b	Miscellaneous Revenue		Business Code 110000	120,901.	120,901.		
	c d	All other revenue				~		
		Total. Add lines 11a-11d			120,901.			
	2	Total revenue. See instructions.			577,459.	362,156.	184.	0.

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# Form 990 (2009) ARIZONA CATTLE GROWERS ASSOCIATION Part IX Statement of Functional Expenses

	All other organizations must comp ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and			general suparious	07401362
0	organizations in the U.S. See Part IV, line 21				
2 G	Grants and other assistance to individuals in	1			
th	he U.S. See Part IV, line 22				
	Grants and other assistance to governments,				
	rganizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	rustees, and key employees				
	ompensation not included above, to disqualified				
	ersons (as defined under section 4958(f)(1)) and				
	ersons described in section 4958(c)(3)(B)				
	other salaries and wages				
	ension plan contributions (include section 401(k)				
	nd section 403(b) employer contributions)				
9 0	ther employee benefits				
	ayroll taxes				
	ees for services (non-employees):				
	lanagement				
	egal	23,345.			
	ccounting	4,839.			
	obbying				
	ofessional fundraising services. See Part IV, line 17				
f In	vestment management fees				
	ther	6,100.			
2 Ac	dvertising and promotion		× 11		
3 Of	ffice expenses	280.			
4 Inf	formation technology				
	oyalties				
	ccupancy				
	avel	9,758.			
	ayments of travel or entertainment expenses				
for	r any federal, state, or local public officials				
	onferences, conventions, and meetings	101,595.			
	erest				
	yments to affiliates				
	preciation, depletion, and amortization	948.			
	surance	5100			
t Oth	ner expenses. Itemize expenses not covered				
abo	ove. (Expenses grouped together and labeled				
mis	scellaneous may not exceed 5% of total penses shown on line 25 below.)	-			
	ANAGEMENT FEES	196,571.			
	TAFF EXPENSE	57,252.			
	RINTING & PUBLICATIONS	55,472.			
	JES				
	ONTRACT LABOR	51,056.			
		40,434.			
	other expenses	39,675.			
	al functional expenses. Add lines 1 through 24f	587,325.			
	nt costs. Check here  if following				
	98-2. Complete this line only if the organization				
	orted in column (B) joint costs from a combined				
	cational campaign and fundraising solicitation				

ARIZONA	CATTLE	GROWERS	ASSC	CIA	TION
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86-0002290 Page 11

		(A) Beginning of year		(B) End of year
	1 Cash - non-interest-bearing		1	229,259
13	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
1.3	4 Accounts receivable, net	3,908.		250
	5 Receivables from current and former officers, directors, trustees, key			250
	employees, and highest compensated employees. Complete Part II			
	of Schedule L	· · · · · · · · · · · · · · · · · · ·	5	
	6 Receivables from other disqualified persons (as defined under section		5	
	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	Part II of Schedule L		6	
0	7 Notes and loans receivable, net	•	7	
et	8 Inventories for sale or use	·	1	
As	9 Prepaid expenses and deferred charges	0 006	8	
	Da Land, buildings, and equipment: cost or other	8,996.	9	
			1.11	
101			1.2.11	0.400
1.44	b Less: accumulated depreciation 10b 36,078			2,433.
11			11	
12		10 500	12	
13		17,500.		17,500.
14			14	
15	***************************************		15	
16				249,442.
17			17	349.
18			18	
19			19	
20	***************************************		20	
s 21			21	
Liabilities	•			
Lial	highest compensated employees, and disqualified persons. Complete Part II		2.11	
	of Schedule L		22	
23	5 5		23	
24	particular second particular s		24	
25			25	
26		42,610.	26	349.
	Organizations that follow SFAS 117, check here 🕨 🔟 and complete			
ces	lines 27 through 29, and lines 33 and 34.			
ue 27		41,892.	27	183,746.
28 Bal		217,067.	28	65,347.
밑 29	· · · · · · · · · · · · · · · · · · ·		29	
E	Organizations that do not follow SFAS 117, check here 🕨 📃 and		100	
s or	complete lines 30 through 34.			
30 Set			30	
8 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances 8 2 2 6 8 2 2 8 2 1 0 6 8 2 2	Retained earnings, endowment, accumulated income, or other funds	1	32	
33	Total net assets or fund balances	258,959.	33	249,093.
34	Total liabilities and net assets/fund balances	301,569.	34	249,442.

11

Form 990 (2		ARIZONA	CATTLE	GROWERS	ASSOCIATION
Part XI	Financial Sta	tements and	Reporting	A Real Property of	12.200 Mar 1996

			Yes	No
1 2a	Accounting method used to prepare the Form 990: Cash X Accrual Other	2a		x
b	Were the organization's financial statements audited by an independent accountant?	2b	X	1
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		x	
d	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	За		X
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.	3b		
		Form	990 (	2009

SCHEDULE C	
(Form 990 or 990-EZ)	- d. 5

### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public

Inspection

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. See separate instructions.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax), then

· Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

Department of the Treasury

Internal Revenue Service

Name of org		Employer	identificatio	n number
Devit I A	ARIZONA CATTLE GROWERS ASSOCIATION	8	6-00022	290
Part I-A	Complete if the organization is exempt under section 501(c) or is a section	n 527 orga	nization.	
1 Provide	a description of the organization's direct and indirect political campaign activities in Part IV.			
2 Politica	l expenditures	▶\$		
3 Volunte	er hours		_	
Part I-B	Complete if the organization is exempt under section 501(c)(3).			
1 Enter th	e amount of any excise tax incurred by the organization under section 4955	▶\$		
2 Enter th	e amount of any excise tax incurred by organization managers under section 4955	▶\$		
3 If the or	ganization incurred a section 4955 tax, did it file Form 4720 for this year?		Yes	No
4a Was a c	correction made?		Yes	No
b If "Yes,"	describe in Part IV.			
Part I-C	Complete if the organization is exempt under section 501(c), except section	on 501(c)(3		
1 Enter th	e amount directly expended by the filing organization for section 527 exempt function activities	▶\$		
2 Enter th	e amount of the filing organization's funds contributed to other organizations for section 527			
exempt	function activities	▶\$		
	empt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,			
line 17b		▶\$		
4 Did the	filing organization file Form 1120-POL for this year?		Yes	No
5 Enter th	e names, addresses and employer identification number (EIN) of all section 527 political organization	s to which pay	ments were i	made.
For each	n organization listed, enter the amount paid from the filing organization's funds. Also enter the amour	nt of political c	ontributions r	eceived
that wer	e promptly and directly delivered to a separate political organization, such as a separate segregated	fund or a polit	ical action co	mmittee
	additional space is needed, provide information in Part IV.			

(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
		-	
	(b) Address	(b) Address (c) EIN	

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009 LHA

932041 02-04-10

Schedule C (Form 990 or 990-EZ) 2009 A Part II-A Complete if the organ	ization is ex	ATTLE GROWE empt under secti	RS_ASSOCIATIO	<u>ON 86-</u> ed Form 5768	0002290 Page 2
(election under section A Check ► ☐ if the filing organization		filiated area			
B Check  Grider if the filing organization			rovisions apply.		
	n Lobbying Exp	enditures		(a) Filing organization's totals	(b) Affiliated group totals
<ul> <li>1 a Total lobbying expenditures to influence</li> <li>b Total lobbying expenditures to influence</li> <li>c Total lobbying expenditures (add lines</li> <li>d Other exempt purpose expenditures</li> <li>e Total exempt purpose expenditures (add fines</li> <li>f Lobbying nontaxable amount. Enter the</li> </ul>	e a legislative b 1a and 1b) Id lines 1c and 1	ody (direct lobbying) 1d)			
If the amount on line 1e, column (a) or (b)		bbying nontaxable an			
Not over \$500,000		of the amount on line 1e			
Over \$500,000 but not over \$1,000,000		000 plus 15% of the ex			
Over \$1,000,000 but not over \$1,500,0		000 plus 10% of the ex			
Over \$1,500,000 but not over \$17,000,		000 plus 5% of the exc			
Over \$17,000,000	\$1,000				
j If there is an amount other than zero on reporting section 4911 tax for this year (Some organization	4-Year Av s that made a	r line 1i, did the organiz reraging Period Under section 501(h) electio	Section 501(h) n do not have to comple	ete all of the five	Yes No
	Charles and the second s	ne instructions for line enditures During 4-Yes	es 2a through 2f on pag	e 4.)	
	CODDying Expe	Inditures During 4-rea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

# Schedule C (Form 990 or 990 EZ) 2009 ARIZONA CATTLE GROWERS ASSOCIATION 86-0002290 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

		(a)			b)
		Yes	No	Am	ount
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)?	1			
	Media advertisements?				
d	Mailings to members, legislators, or the public?				
e	Publications, or published or broadcast statements?				
f	그는 가지 못 같아. 정말 것 같아요. 그는 것 같아요. 이 것 같아요. 것은 것은 것을 가지 못 다 먹을 수 있었는 것 같아요. 그가 집에 가지 않는 것 같아요. ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities? If "Yes," describe in Part IV	-			
i	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				
c	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).	n 501(c)(5	i), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	
Sec. 1	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
2	Did the organization make only in-house lobbying expenditules of \$2,000 of less?		2	Х	1
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		. 3	1.1	X
3		n 501(c)(5	), or see	ction	
3 Par	Did the organization agree to carryover lobbying and political expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."	n 501(c)(5 III-A, line	), or see 3 is an	ction	-
3 Par	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part	n 501(c)(5 III-A, line	), or see 3 is an	ction	-
3 Par 1 2	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members       Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	n 501(c)(5 III-A, line	3 ), or see a 3 is an	ction	-
3 Dar 1 2 a	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members       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	n 501(c)(5 III-A, line	3), or see 3 is an 1 2a	ction	
3 Par 1 2 a b	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members         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         Carryover from last year	n 501(c)(5 III-A, line	3), or see 3 is ar 2a 2b	ction	
3 Par 1 2 a b c	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members         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         Carryover from last year	n 501(c)(5 III-A, line	3), or see 3 is ar 2a 2b 2c	ction	
3 Par 1 2 a b c 3	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members         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         Carryover from last year         Total         Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	n 501(c)(5 III-A, line	3), or see 3 is ar 2a 2b 2c	ction	-
3 Par 1 2 a b c 3 4	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members       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       Carryover from last year         Total       Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues         If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political estimate of nondeductible lobbying and political expension of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political estimate of nondeductible lobbying esting the political estimate of nondeductible	n 501(c)(5 III-A, line	3 ), or see 3 is an 2a 2b 2c 3	ction	
3 Par 1 2 a b c 3 4	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members       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       Carryover from last year         Total       Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues         If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexpenditure next year?	n 501(c)(5 III-A, line	3 ), or see 3 is an 2 2 2 2 2 2 2 3	ction	
3 Par 1 2 a b c 3 4	Did the organization agree to carryover lobbying and political expenditures from the prior year?         t III-B       Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."         Dues, assessments and similar amounts from members       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       Carryover from last year         Total       Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues         If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excee does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?         Taxable amount of lobbying and political expenditures (see instructions)	n 501(c)(5 III-A, line	3 ), or see 3 is an 2 2 2 2 2 2 2 3	ction	

Sche	dule	D
		_

Department of the Treasury Internal Revenue Service

(Form	990)
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# Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.



Indi	ne of the organization ARIZONA CATTLE GROW	JERS ASSOCIATION	Employer identification number 86-0002290
Pa	art I Organizations Maintaining Donor Advised	Funds or Other Similar Fund	as or Accounts Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
-		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	N 1997 Q. 200 1997 1997	
2	Aggregate contributions to (during year)		
3	Aggregate grapts from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor adv	vised funds
	are the organization's property, subject to the organization's e		
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		
Pa	IT II Conservation Easements. Complete if the orga	nization answered "Yes" to Form 990	Part IV line 7
1	Purpose(s) of conservation easements held by the organization		raitiv, ille 7.
	Preservation of land for public use (e.g., recreation or ple		istorically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space		runed historic structure
2	Complete lines 2a through 2d if the organization held a qualifie	d conconction contribution in the form	
4	day of the tax year.	a conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		Unid at the Fed states Terry V
а	Total number of conservation easements		Held at the End of the Tax Year
b	Total acreage restricted by conservation easements		
c	Number of conservation easements on a certified historic struct	turo included in (a)	
d			
3	Number of conservation easements modified, transferred, relea		
	year >	ased, excinguished, or terminated by th	le organization during the tax
4	Number of states where property subject to conservation ease	ment is located	
5	Does the organization have a written policy regarding the period		
Č	violations, and enforcement of the conservation easements it h		
6	Staff and volunteer hours devoted to monitoring, inspecting, an	d enforcing conservation essements	during the year
7	Amount of expenses incurred in monitoring, inspecting, and en		
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation	easements in its revenue and expens	e statement and balance sheet and
	include, if applicable, the text of the footnote to the organization		
	conservation easements.		the organization's accounting for
Par	t III Organizations Maintaining Collections of A	Art, Historical Treasures, or C	ther Similar Assets.
	Complete if the organization answered "Yes" to Form 99		
1a	If the organization elected, as permitted under SFAS 116, not to	preport in its revenue statement and b	alance sheet works of art historical
	treasures, or other similar assets held for public exhibition, educ		
	the footnote to its financial statements that describes these iter		
b	If the organization elected, as permitted under SFAS 116, to rep	port in its revenue statement and balar	nce sheet works of art historical treasures
	or other similar assets held for public exhibition, education, or re-		
	these items:		, presidente foldening to
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
	If the organization received or held works of art, historical treasu		
	the following amounts required to be reported under SFAS 116		Service and Servic
	Revenues included in Form 990, Part VIII, line 1	가슴을 물건이 있는 것이 물 것 같아. 것 같아. 말 것 같아. 이 가지 않는 것 같아.	► \$
b	Assets included in Form 990, Part X		• •

Schedule D (Form 990) 2009

Sche		A CATTLE GI							-00	0229	0 F	age 2
-	er gamzatione maintaining	Collections of A	Art, Histo	orical T	reasures,	or Oth	ner S	Similar A	sse	ts (con	tinuec	1)
3	Using the organization's acquisition, access (check all that apply):	sion, and other reco	ras, cneck	any of the	e following th	lat are a	signif	icant use o	of its	collectio	on iten	ns
а	Public exhibition			oan or ev	change prog	rame						
b	Scholarly research				shange prog							
c	Preservation for future generations		e Llo									
	Provide a description of the organization's of	collections and evol-	nin how the	v further	the erenize	tion's ou	amat	ouroaa ir	Ded	NR.		
5	During the year, did the organization solicit	or receive donations	of ort bid	arical tra	ne organiza	non s ex	empt	purpose ir	Pan	L XIV.		
5	to be sold to raise funds rather than to be m	naintained as part of	the organi	zation's o	alloction?	ier sirnia	ar ass	ets	1	Yes	F	<b>T</b>
Par		ngements. Comp	lete if orga	nization a	nswered "Ye	es" to Fo	orm 99	0, Part IV,	, line (	9, or		No
	Is the organization an agent, trustee, custod on Form 990, Part X?								F	Yes		No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the f	ollowing ta	ble:								
							Γ			Amour	nt	
С	Beginning balance						. [	1c				
	Additions during the year							1d				
	Distributions during the year							1e				
	Ending balance							1f				
2a	Did the organization include an amount on F	Form 990, Part X, line	e 21?						1	Yes		No
	If "Yes," explain the arrangement in Part XIV						*******					1.10
Part	V Endowment Funds. Complete	if the organization ar	nswered "Y	es" to Fo	rm 990, Part	IV, line	10.					
		(a) Current year	(b) Pric		(c) Two yea			hree vears t	back	(e) Fou	r vears	hack
1a	Beginning of year balance		N=1	1	1-1-1-1-1		1-1			107.00	youro	Duon
	Contributions						1		1	1		
	Net investment earnings, gains, and losses											
	Grants or scholarships								~			_
	Other expenditures for facilities											
	and programs											
	Administrative expenses		1									
	End of year balance						1		-			
	Provide the estimated percentage of the yea		as.			· · · · · · · · · · · · · · · · · · ·	-					
	Board designated or quasi-endowment 🕨		%									
	Permanent endowment	%										
		%										
	Are there endowment funds not in the posse	ession of the organiz	ation that a	are held a	nd administe	ered for t	he or	anization				
	y:	societt et the organiz	anon mare					gunization		Г	Yes	No
	i) unrelated organizations									3a(i)	105	NO
•	ii) related organizations	************				•••••				3a(ii)		
bi	f "Yes" to 3a(ii), are the related organizations	s listed as required o	n Schedul	- R2	*******	••••••	••••••	*******		3b		
	Describe in Part XIV the intended uses of the							******		00		
Part		s, and Equipmo	ent. See F	orm 990.	Part X, line	10.						
	Description of investment	(a) Cost or o		(b) Cost			ccum	ulated		(d) Book	cvalue	
		basis (investr		basis (			precia	Contraction of the second s		(u) 0001	( value	·
1a	and								-			
	Buildings											
	easehold improvements		713.				1	,713.				0.
	quipment					1 -		,365.			2,43	
	Nther	14					54	, 505.			.,	
	Add lines 1a through 1e. (Column (d) must ed		X column	(B) line 1	0(c))						2,43	22
ordi, /	ind med ta anough to foodmin for most of	gour oni 000, i dit.	n, column	D), mie 11				Sabad		/Form	-	

	Schedule D	(Form 990)	200
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#### Schedule D (Form 990) 2009 ARIZONA CATTLE GROWER Part VII Investments - Other Securities, See Form 990, Part X ARIZONA CATTLE GROWERS ASSOCIATION

(including name of security)	(b) Book value		od of valuation: f-year market value
inancial derivatives			
Closely-held equity interests			
)ther			
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value		d of valuation:
		Cost or end-of	-year market value
INVESTMENT IN ACA	17,500.	COST	
		r.	
otal. (Col (b) must equal Form 990, Part X, col (B) line 13.)	17,500.		
Part IX Other Assets. See Form 990, Part X, line	15.		
	Description		(b) Book value
			(b) Book value
(a)	Description		(b) Book value
(a)	Description		(b) Book value
(a) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1	Description		
(a) <u>otal. (Column (b) must equal Form 990, Part X, col (B) line</u> <u>Part X   Other Liabilities.</u> See Form 990, Part X, 1 (a) Description of liability	Description	o) Amount	
(a) Detal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	Description		
(a) <u>otal. (Column (b) must equal Form 990, Part X, col (B) line</u> <u>Part X   Other Liabilities.</u> See Form 990, Part X, 1 (a) Description of liability	Description		
(a) <u>otal. (Column (b) must equal Form 990, Part X, col (B) line</u> <u>Part X   Other Liabilities.</u> See Form 990, Part X, 1 (a) Description of liability	Description		
(a) Detal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	Description		
(a) Detal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	Description		
(a) otal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1	Description		
(a) Detal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	Description		
(a) Detal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	Description		
(a) Detal. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X, 1 (a) Description of liability	Description		

al statements that reports the organization's liability for uncertain tax positions under FIN 48. 932053 92-01-10

-	edule D (Form 990) 2009 ARIZONA CATTLE GROWERS AS: rt XI Reconciliation of Change in Net Assets from Form 990 t		ION Financial St	86-(	002290 Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)			atoment	577,459.
- 2	Total expenses (Form 990, Part IX, column (A), line 25)		2		587,325.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		-9,866.
4	Net unrealized gains (losses) on investments		4	the second second	5,000.
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8		9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	nd 9	10		-9,866.
Pa	rt XII Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per	r Return	
1	Total revenue, gains, and other support per audited financial statements			1	538,507.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a			
b	그 그는 것 같아요. 그는 것 같아요. 그는 것 같아요. 그는 것 같아요. 같아요. 그는 것 같아요. 것 ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ?	2b			
с		2c			
d	Other (Describe in Part XIV.)	2d	3,90	8.	
	Add lines 2a through 2d				3,908.
3	Subtract line 2e from line 1			3	534,599.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				551,555.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
	Other (Describe in Part XIV.)		42,860	2	
	Add lines 4a and 4b				42,860.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		*************************	5	577,459.
Par	t XIII Reconciliation of Expenses per Audited Financial Statem				n <u>5777455</u>
1	Total expenses and losses per audited financial statements				578,329.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				5707525.
_	Donated services and use of facilities	2a		- 12 million	
b	Prior year adjustments	2b			
	Other losses				
	Other (Describe in Part XIV.)				
	Add lines 2a through 2d			2e	0.
	Subtract line 2e from line 1				578,329.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:				510,525.
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV.)		8,996		
	Add lines 4a and 4b				8,996.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		***************************************	4c	587,325.
	t XIV Supplemental Information		********************	. 5	
X, line	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp T X: THE ASSOCIATION HAS EVALUATED ITS TA	olete this par	t to provide any a		
CUR	RENTLY, THE TAX RETURNS OPEN AND SUBJECT	TO EXA	MINATION	ARE TI	HE 2007,
200	8 AND 2009 FISCAL YEARS BY THE INTERNAL RI	EVENUE	SERVICE	AND TH	HE 2006,
200	7, 2008 AND 2009 FISCAL YEARS BY THE ARIZO	ONA DE	PARTMENT	OF REV	VENUE.
HOW	EVER, THE ASSOCIATION IS NOT CURRENTLY UNI	DER AUI	DIT NOR H	AS THI	3
ASS	OCIATION BEEN CONTACTED BY ANY OF THESE JU	JRISDIC	CTIONS.	BASED	ON THE
EVA	LUATION OF THE ASSOCIATION'S TAX POSITIONS	S, MANZ	AGEMENT B	ELIEVE	ES ALL TAX
POS	ITIONS TAKEN WOULD BE UPHELD UNDER EXAMINA	ATION.	THEREFO		) e D (Form 990) 2009
932054 02-01-10	2			Concoult	2 0 (i orni 990) 2009

ARIZONA CATTLE GROWERS ASSOCIATION 86-0002290 Page 5 Schedule D (Form 990) 2009 Part XIV Supplemental Information (continued)

PROVISION FOR THE EFFECTS OF UNCERTAIN TAX POSITIONS HAVE BEEN RECORDED

FOR THE YEARS ENDED JUNE 30, 2010 AND 2009.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

PROGRAM SERVICE REVENUE RECOGNIZED IN PREVIOUS PERIOD: 3908.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

PROGRAM SERVICE REVENUE ACCRUED IN PRIOR PERIOD: 42610.

PROGRAM SERVICE REVENUE RECOGNIZED IN THE CURRENT PERIOD: 250.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

EXPENSES RECOGNIZED FROM THE PREVIOUS PERIOD: 8996.

S	CI	HE	D	UL	E	G	

(Form 990 or 990-EZ)

Departr	nent of	the '	Treasury	
Internal	Reven	ue Se	ervice	

Part I

С

### Supplemental Information Regarding **Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

2009
Open To Public
Inspection

Employer identification number

Yes

OMB No. 1545-0047

2000

No

Name	of the	organization
------	--------	--------------

	ARIZONA	CATTLE	GROWERS	ASSOCIATION	86-0002290
Part I	Fundraising Activities. required to complete this part.	Complete if th	e organization a	nswered "Yes" to Form 990,	Part IV, line 17. Form 990-EZ filers are not
1 Indicat	te whether the organization raise	ed funds throu	gh any of the fol	lowing activities. Check all th	nat apply.

Mail solicitations а

Internet and email solicitations b Phone solicitations

	Э	L	
1	f		

Solicitation of non-government grants Solicitation of government grants

Special fundraising events

d In-person solicitations

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	l have c	Did raiser sustody ntrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by organization
		Yes	No			
		-	-			

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990 or 990-EZ) 2009

	on Form 990-EZ, line 6a. List events with	(a) Event #1	(b) Event #2	(c) Other events	141	Total ev	onte
						col. (a) th	hrough
0		(event type)	(event type)	(total number)		col. (c))	)
2		1					
2	1 Gross receipts				-		
	0 Less: Charitable contributions	4					
1	2 Less: Charitable contributions		1		-		
	3 Gross income (line 1 minus line 2)		4				
	4 Cash prizes				1		
	5 Noncash prizes						
				1			
12	6 Rent/facility costs				-		
1							
	7 Food and beverages						
	O. Fatadaiamant				1		
	8 Entertainment 9 Other direct expenses						
	10 Direct expense summary. Add lines 4 through			•	1		
	11 Net income summary. Combine line 3, column	n (d), and line 10					- E
ar	t III Gaming. Complete if the organization a	answered "Yes" to Forn	n 990, Part IV, line 19, or	reported more than			
T	\$15,000 on Form 990-EZ, line 6a.				<b>F</b>		
		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming		al gamin	
1			bingorprogressive bingo		col. (a) t	nrougn	col. (c
	1 Gross revenue			48,146.		48,	146
	2 Cash prizes						
	3 Noncash prizes			7,101.		7,	101
	4 Rent/facility costs						
							-
1	5 Other direct expenses	Yes %	Yes %	Yes %			-
6	6 Volunteer labor		No 765 76	Yes%	-		
		5 in column ( i)					1.0.4
1	7 Direct expense summary. Add lines 2 through	5 in column (a)		🕨	(	1,-	101.
8	8 Net gaming income summary. Combine line 1,	column (d), and line 7				41,0	
-	"starting state(s) is which the superiority		7		_	Yes	No
	Enter the state(s) in which the organization operate s the organization licensed to operate gaming acti						v
lf	f "No," explain:	vities in each of these s	states i	••••••••••••••••••••••••••••••		3	X
T	HE ORGANIZATION IS TAX EX	EMPT AND TH	EREFORE IS N	TC			0
R	EQUIRED TO BE LICENSED.	and the second second					
	Vere any of the organization's gaming licenses rev	oked, suspended or te	rminated during the tax y	ear?	10	а	X
W	"Yes," explain:						
W							
W							
V If		h nonmembers?			4.		x
	loes the organization operate gaming activities wit the organization a grantor, beneficiary or trustee		of a partnership or other	entity formed to	11	L	x

Schedule G (Form 990 or 990 EZ) 2009 ARIZONA CATTLE GROWERS ASSOCIATION 86-00	0229	10 P	age 3
			No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility 13a .00 %	ć		
b An outside facility 13b 100.00 %	,		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
Name <b>KIM COE</b>			
Address > 1401 NORTH 24TH STREET, STE. 4 - PHOENIX, AZ 85008			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		X
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount			
of gaming revenue retained by the third party $\blacktriangleright$ \$			
c If "Yes," enter name and address of the third party:			
Name			
Address			
16 Gaming manager information:			
Name DOC LANE			
Gaming manager compensation 🕨 \$0.			
Description of services provided  MANAGER OF THE RAFFLE.			
X Director/officer Employee Independent contractor			
17 Mandatory distributions:			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		Х
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
organization's own exempt activities during the tax year 🕨 \$			

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Attach to Form 990. OMB No. 1545-0047 **2009** Open to Public Inspection

Name of the organization

ARIZONA CATTLE GROWERS ASSOCIATION

Employer identification number 86-0002290

#### FORM 990, PART VI, SECTION B, LINE 11: REVIEW AND ACCEPTANCE BY A

RESOULTION AT A BOARD MEETING.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION ALLOWS FOR

INSPECTION UPON REQUEST.

THERE HAS BEEN NO CHANGE FROM PRIOR YEARS IN THE OVERSIGHT PROCESS AND

SELECTION PROCESS.

Internal Revenue Service / Name of the organization	Attach to Form 990. See separate instructions.	See separate instructions.	ons.	-	Upen to Public Inspection
ARIZONA CATTLE	ATTLE GROWERS ASSOCIATION	ON		ŭ	Employer identification number 86-0002290
Part I Identification of Disregarded Entities (	Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)	to Form 990, Part IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt O organizations during the tax year.)	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	l answered "Yes" to Form 990, Pa	l rt IV, line 34 becaus	lise it had one or more	related tax-exempt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
LHA For Privacy Act and Paperwork Beduction Act Notice see the Institution for Form on					

02-04-10

D	(j) JBI General or box managing dule Partner? 0650 Vec No				iore related	(h) Percentage ownership	N/A		
or more relate	(i) Code V-UBI amount in box K-1 (Form 1065)	-			had one or m	(g) Share of end-of-year assets	N/A		
use it had one o	(h) Disproportion- ate allocations?				34 because it	(f) Share of total income	N/A		
, III Ie 34 Decal	(g) Share of end-of-year assets				0, Part IV, line	I do the			
11 330, Fail IV	(f) Share of total income				s" to Form 99	(e) Type of entity (C corp, S corp, or trust)	c corp		
						(d) Direct controlling entity	N/A		
	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)				נו ופ טועמו וובמנו	(c) Legal domicile (state or foreign country)	AZ		
רישייראיטט איז טאטאינגעוטט מוסאיטטט ו פא נט ו טווו ססט, רמו וע, ווופ אל טפנמוצפ וו חמס טהפ טר חסרפ רפומנפט	(d) Direct controlling entity			S	or must vourprete in the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	(b) Primary activity	MANAGEMENT SERVICES		
	(c) Legal domicile (state or foreign country)		x		x year.)	Prir	MANAGEME		
ership during the tax year.)	(b) Primary activity			irstine Tavella and C	ration or trust during the ta		INC 86-0543753		
organizations treated as a partnership during the tax year.)	(a) Name, address, and EIN of related organization			Identification of Related Orosov	organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization	ARIZONA CATTLEMEN'S ASSOCIATION, 1401 NORTH 24TH STREET SUITE 4 PHOENIX, AZ 85008		

ų.			
			Yes No
a necept of (I) interest (II) annuities (III) royalties or (iv) rent from a controlled entity b Gift, grant, or capital contribution to other organization(s)		1a	×
c Gift, grant, or capital contribution from other organization(s)	******************	10	
d Loans or loan guarantees to or for other organization(s)	*****	10	
e Loans or loan guarantees by other organization(s)		1d 1d	4
f Sale of assets to other organization(s)			
s)	*****	1t	1
h Exchange of assets	······	19	T
i Lease of facilities, equipment, or other assets to other organization(s)	*****	<del>;</del> ;=	
j Lease of facilities, equipment, or other assets from other organization(s)			
		fi	
<ol> <li>Performance of services or membership or fundraising solicitations by other organization(s)</li> </ol>		1k	
m Sharing of facilities, equipment, mailing lists, or other assets	********************	11	
n Sharing of paid employees	*****	Ę,	X
<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>		<u> </u>	
p Reimbursement paid by other organization for expenses		10 1p	×
d Other transfer of cash or property to other organization(s)			
	*****	<b>b</b>	
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	nsaction threshold		
(a) Name of other organization(s)	(b) Transaction type (a-r)	<b>(c)</b> Amount involved	olved
(1)	6-0-1C		
932185 02-04-10 27 27	Sci	Schedule R (Form 990) 2009	6 1000

(a)     (b)     (c)       Name, address, and EN     Primary activity     Legal domicie       of entity     of entity     country)	(d)     (d)     (e)       Are all attrents section 501(c)(3) organizations/3 Year assets     Share of end-of- year assets       Yes     No	(f) Disprepor- tionargoor- allocations? Yes No	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes No
Control Con	Kes No	Kes Kes		Yes

### Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

	File	a	separate	application	for	each	return.
--	------	---	----------	-------------	-----	------	---------

► X

01

If you are filing for an Additional (Not Automatic	c) 3-Month Extension, complete only Part II (on page 2 of this form).

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form,

visit www.irs.gov/efile and click on e-file for Charities & Nonprofil	visit	www.irs.o	gov/efile	and	click	on	e-file	for	Charities	&	Non	profit
---	-------	-----------	-----------	-----	-------	----	--------	-----	-----------	---	-----	--------

Part I	Automatic 3-Month Extension of	Time. Only submit original (no copies needed).
CONTRACTOR OF		

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization	Employer identification number						
	ARIZONA CATTLE GROWERS ASSOCIATION 86-0002290							
File by the due date for filing your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. 1401 N. 24TH ST.							
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions. PHOENIX, AZ 85008							

Enter the Return code for the return that this application is for (file a separate application for each return)

Application	Return	Application			Return
Is For	Code	Is For		Code	
Form 990	01	Form 990-T (corporation)			07
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
<ul> <li>The books are in the care of ▶ <u>1401 N. 24TH</u> Telephone No. ▶ <u>602-267-1129</u></li> <li>If the organization does not have an office or place of bus</li> <li>If this is for a Group Return, enter the organization's four of</li> </ul>	ST 1 ness in the Ur ligit Group Exe	FAX No.  ited States, check this box mption Number (GEN) I	If this is fo	or the whole g	roup, check this
<ul> <li>box ▶ If it is for part of the group, check this box ▶</li> <li>1 I request an automatic 3-month (6 months for a corpora <u>F'EBRUARY 15, 2011</u>, to file the ex- is for the organization's return for:</li> <li>▶</li></ul>	ntion required families for the second se	to file Form 990-T) extension of time tion return for the organization name dending <u>JUN 30, 2010</u>	until ed above.	The extensio	
<ol> <li>I request an automatic 3-month (6 months for a corpora <u>FEBRUARY 15, 2011</u>, to file the ex- is for the organization's return for:</li> <li>calendar year or</li> <li>X tax year beginning <u>JUL 1, 2009</u></li> <li>If the tax year entered in line 1 is for less than 12 month</li> </ol>	tion required f empt organizat , and s, check rease	to file Form 990-T) extension of time tion return for the organization name d ending <u>JUN 30, 2010</u>	until ed above.	The extensio	n
<ol> <li>I request an automatic 3-month (6 months for a corpora <u>FEBRUARY 15, 2011</u>, to file the ex- is for the organization's return for:</li> <li>□ calendar year or</li> <li>X tax year beginning <u>JUL 1, 2009</u></li> <li>If the tax year entered in line 1 is for less than 12 month □ Change in accounting period</li> <li>If this application is for Form 990-BL, 990-PF, 990-T, 47 nonrefundable credits. See instructions.</li> <li>If this application is for Form 990-PF, 990-T, 4720, or 600</li> </ol>	tion required f empt organizat , and s, check reaso 20, or 6069, er 69, enter any i	to file Form 990-T) extension of time tion return for the organization name d ending <u>JUN 30, 2010</u> on: Initial return I nter the tentative tax, less any	until ed above. Final retur 3a	The extensio	n 0 .
<ol> <li>I request an automatic 3-month (6 months for a corpora <u>FEBRUARY 15, 2011</u>, to file the ex- is for the organization's return for:</li> <li>□ calendar year or</li> <li>X tax year beginning <u>JUL 1, 2009</u></li> <li>If the tax year entered in line 1 is for less than 12 month □ Change in accounting period</li> <li>If this application is for Form 990-BL, 990-PF, 990-T, 47 nonrefundable credits. See instructions.</li> <li>If this application is for Form 990-PF, 990-T, 4720, or 60 estimated tax payments made. Include any prior year or</li> </ol>	tion required f empt organizat , and s, check reaso 20, or 6069, er 69, enter any r repayment all	to file Form 990-T) extension of time tion return for the organization name d ending <u>JUN 30, 2010</u> on: Initial return I neter the tentative tax, less any refundable credits and owed as a credit.	until ed above. Final retui	The extensio	n
<ol> <li>I request an automatic 3-month (6 months for a corpora <u>F'EBRUARY 15, 2011</u>, to file the ex- is for the organization's return for:</li> <li>calendar year or</li> <li>a tax year beginning <u>JUL 1, 2009</u></li> <li>If the tax year entered in line 1 is for less than 12 month Change in accounting period</li> <li>If this application is for Form 990-BL, 990-PF, 990-T, 472 nonrefundable credits. See instructions.</li> <li>If this application is for Form 990-PF, 990-T, 4720, or 60 estimated tax payments made. Include any prior year or</li> </ol>	tion required t empt organizat , and s, check rease 20, or 6069, er 69, enter any n verpayment all r payment with	to file Form 990-T) extension of time tion return for the organization name d ending <u>JUN 30, 2010</u> on: Initial return I neter the tentative tax, less any refundable credits and owed as a credit.	until ed above. Final retur 3a	The extensio	n 0 .

### TAX RETURN FILING INSTRUCTIONS

ARIZONA FORM 99

### FOR THE YEAR ENDING

Treme	20	2010
June	30.	2010
		and the second second second second

Prepared for	Mr. Doc Lane Arizona Cattle Growers Association 1401 North 24th Street Phoenix, Arizona 85008
Prepared by	Wallace, Plese + Dreher, LLP Certified Public Accountants and Consultants 3933 S. Mcclintock Dr., Suite 500 Tempe, Arizona 85282
Amount due or refund	No payment is required.
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Arizona Department of Revenue PO Box 52153 Phoenix, AZ 85072-2153
Return must be mailed on or before	February 15, 2011
Special Instructions	The return should be signed and dated by an authorized individual.

Ĭ.

AZ Form 99 (2009) Name: Schedule A - Balance Sheet

	E: Amounts used in attached schedules and in this colu amounts.	umn si	hould be end of		(a) Beginning of	vear		(b) End of year
	Assets							
	Que la			1	0.07	704	d is	000.050
A1	Cash				267,7	/84 0	A	1 229,259 0
A2a	Accounts receivable							
	b Less: allowance for doubtful accounts			00	2.0	0.0	1.22	0.5.0
	c Line A2a less line A2b. Enter difference in column (			2.23	3,5	90800	) A20	250 0
АЗа	Other notes and loans receivable - attach schedule	A3a		00				
	b Less: allowance for doubtful accounts	A3b		00		12	1	
	c Line A3a less line A3b. Enter difference in column (						) A30	/
A4	Inventories					00		-
A5	Investments (securities) - attach schedule				17 0	00		
A6	Investments (other) - attach schedule				17,5	00000	A A	17,500 o
A7a								
	<b>b</b> Less: accumulated depreciation - attach schedule					0.1	T	0 100
5	c Line A7a less line A7b. Enter difference in column (					81 00		
<b>A</b> 8	Other assets - describeS					96 00		
A9	Total assets - add lines A1 through A8				301,5	690	AS	249,442 0
	Liabilities	_						
A 10	Accounts payable and accrued expenses				42,6	10 00	1 10	349 00
	Mortgages and other notes payable - attach schedule				= 4,0		A11	
	Other liabilities - describe						A12	
	Total liabilities - add lines A10 through A12				42,6			
					10/0	10,00		54500
	Net Assets							
A14	Capital stock or trust principal					00	A14	00
	Paid-in or capital surplus					00	A15	
	Retained earnings or accumulated income				258,9			
	Total net assets - add lines A14 through A16				258,9			
				_				
18	Total liabilities and net assets - add lines A13 and A	17			301,5	69 00	A18	249,442 00
Certi	fication Under penalties of perjury, I declare that I have best of my knowledge and belief, it is a true, co the income tax laws of the State of Arizona.							
leas	e Here					1		
ngn	Signature of officer			Date		Title	9	
aid	1. 121 00	0			2			
repa	rer's Plan 11000 CPC	0		7-	-9-11	(48	0)	345-0500
se C	only Preparer's signature			Date		Busin	ess te	lephone number
	WALLACE, PLESE + DREHER	, L.	LP					86-0841383
	Firm's name (or preparer's, if self-employed)							Preparer's TIN
	3933 S. MCCLINTOCK DR.,	SU	ITE 500				È.	05000
	TEMPE, ARIZONA							85282

## 86-0002290

~Z 99	OTHER INCOME		STATEMENT	1
DESCRIPTION			AMOUNT	
JTHER REVENUE MEETINGS, CONVENTIONS, IEWSLETTERS AND CALEND			120,9 154,5 45,6	96.
TOTAL TO FORM 99, PAGE	1, LINE 11		321,1	11.
AZ 99	OTHER EXPENSES		STATEMENT	2
DESCRIPTION			AMOUNT	
)IRECT EXPENSES OF GAMI LEGAL FEES ACCOUNTING FEES )THER PROFESSIONAL FEES OFFICE EXPENSES TRAVEL :ONFERENCES AND CONVENT )EPRECIATION, DEPLETION MANAGEMENT FEES 3TAFF EXPENSE 'RINTING & PUBLICATIONS DUES CONTRACT LABOR ALL OTHER EXPENSES TOTAL TO FORM 99, PAGE	IONS AND AMORTIZATION		9,79 101,59	45. 39. 80. 58. 71. 572. 56. 75. 75.
NZ 99	INVESTMENTS (OTHER)		STATEMENT	3
DESCRIPTION		BEG OF YEAR	END OF YEAF	2
INVESTMENT IN ACA		17,500.	17,50	0.
OTAL TO FORM 99, PAGE 2	2, LINE A6	17,500.	17,50	0.

= =

Z 99 OTHER ASSETS		STATEMENT 4
DESCRIPTION	BEG OF YEAR	END OF YEAR
REPAID EXPENSES AND DEFERRED CHARGES	8,996.	0.
'OTAL TO FORM 99, PAGE 2, LINE A8	8,996.	0.

# A COPY OF THE FEDERAL INCOME TAX RETURN WAS ATTACHED TO THIS STATE RETURN

	Short Form	1					OMB No. 1545-1150
Fo	orm 990-EZ Return of Organization Exemp Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue private foundation)	ot F ue Cod	rom in e (except bla	ack lung ben	Ta efit tru	X ist or	2008
	private foundation) Sponsoring organizations of donor advised funds and controlling organization other organizations with gross receipts less than \$1,000,000 and total assets less	s as defi than \$2,3	ned in section 500,000 at the	512(b)(13) mus end of the year	t file Fo may us	rm 990. se this fo	All Open to Public
-	The organization may have to use a copy of this return	to sati	sty state re	porting requ	uirem	ents.	Inspection
B	For the 2008 calendar year, or tax year beginning JUL 1, 2008		and end				2009
-	applicable: Please Change of organization				Demp	luyer	identification number
F	Address Change Name print or Print or ARIZONA CATTLE GROWERS ASSOCIATION	TAC			0	6 0	002290
F	Initial type. Number and streat /or P.O. how if mail is not delivered to streat address		10	Room/suite			number
F	Termin- Specific 1401 N. 24TH ST			100m/suite		6 - C.	267-1129
F	Amended tions City or town, state or country, and ZIP + 4						mption
Ē	PHOENIX, AZ 85008					nber 🕨	
	<ul> <li>Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attac</li> </ul>	h a cor	npleted	G Account			
	Schedule A (Form 990 or 990-EZ).			Other (s			
	Website: N/A			H Check		Xift	he organization is not
1	Organization type (check only one) X 501(c) ( 5 ) (insert no.) 4947(a)	(1) or	527	required to	attach	Sched	ule B (Form 990, 990-EZ, or 990-PF).
К	Check  Ch	gross r	receipts are r	ormally not	more t	han \$2	5,000. A return is not
	required, but if the organization chooses to file a return, be sure to file a complete return.						
10000	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Formart 1 Revenue, Expenses, and Changes in Net Assets or Fundamental Statement 1 Revenue, Expenses, and Changes in Net Assets or Fundamental Statemental	m 990 i	nstead of Fo	rm 990-EZ		► \$	545,017.
P			and the second se				109,514.
	Contributions, gifts, grants, and similar amounts received     Program service revenue including government fees and contracts					1	279,815.
	<ul> <li>2 Program service revenue including government fees and contracts</li> <li>3 Membership dues and assessments</li> </ul>					3	153,856.
	4 Investment income					4	1,832.
	5a Gross amount from sale of assets other than inventory						
	b Less: cost or other basis and sales expenses	5b					
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (	(attach	schedule)			5c	
one	6 Special events and activities (complete applicable parts of Schedule G). If any amount	is from	gaming, ch	eck here 🕨			
Revenue	a Gross revenue (not including \$ of contributions						
Re	reported on line 1)	6a					
	b Less: direct expenses other than fundraising expenses	6b					
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)					6c	
	7a Gross sales of inventory, less returns and allowances						
	b Less: cost of goods sold						
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)				···· -	7c 8	
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8				►' F	9	545,017.
	10 Grants and similar amounts paid (attach schedule)					10	010/01/1
	11 Benefits paid to or for members					11	
S	12 Salaries, other compensation, and employee benefits					12	29,910.
Expenses	13 Professional fees and other payments to independent contractors					13	26,156.
xbe	14 Occupancy, rent, utilities, and maintenance					14	1,739.
ш	15 Printing, publications, postage, and shipping					15	78,152.
				MENT 1	- ' -	16	395,985.
	17 Total expenses. Add lines 10 through 16					17	531,942.
Is	18 Excess or (deficit) for the year (Subtract line 17 from line 9)			••••••		18	13,075.
Net Assets	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)				8	19	245,884.
etA	20 Other changes in net assets or fund balances (attach explanation)					20	2457004.
ž	21 Net assets or fund balances at end of year. Combine lines 18 through 20					21	258,959.
Pa	art II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or r				rm 99		
	(See the instructions for Part II.)			eginning of y			(B) End of year
22				238,3		22	267,784.
23	Land and buildings					23	
24		2	)	76,0			33,785.
25	Total assets			314,4			301,569.
26			)	68,5			42,610.
<b>27</b> 8321				245,8	04.	27	258,959.

EXTENSION GRANTED TO FEBRUARY 16, 2010

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 1 12-17-08

Form 990-EZ (2008)

	990-EZ (2008) ARIZONA CATTLE GROWERS A			86-	-00022	290 Page 2
	rt III Statement of Program Service Accomplishme		r Part III.)			xpenses
	is the organization's primary exempt purpose? SEE STATEMEN				(Required	for 501(c)(3) rganizations and
provid	ibe what was achieved in carrying out the organization's exempt purposes. In ded, the number of persons benefited, or other relevant information for each	program title.			4947(a)( for others	1) trusts; optional
_	PROVIDED EDUCATIONAL AND PROMOTION	AL INFORMATION	I TO CATTI	E		
<u>(</u>	GROWERS AND THE GENERAL PUBLIC					
(	Grants \$ ) If this amount includes foreign	grants, check here	•		28a	
	SPONSORED MEETINGS AND SEMINARS FO			IE		
9	GENERAL PUBLIC					
	Grants \$ ) If this amount includes foreign	grante check here			29a	
30 I	ROVIDED PUBLICATIONS TO CATTLE GR	OWERS AND THE	GENERAL	_	230	
	UBLIC TO DISSEMINATE INFORMATION	PERTINENT TO I	HE CATTLE			
	Grants \$) If this amount includes foreign	aranta abaak bara			30a	
		grants, check here			504	
(0	Grants \$ ) If this amount includes foreign	grants, check here			31a	
	otal program service expenses (add lines 28a through 31a)					
Par	t IV List of Officers, Directors, Trustees, and Key	Employees. List each one e	ven if not compensated.		e instructions ontributions	
	(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0)	to e bene d	employee efit plans & leferred ipensation	(e) Expense account and other allowances
	EE STATEMENT 4	-				
- 0	EE STATEMENT 4					
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		-				
832172 12-17-08					Form	990-EZ (2008)

For	1990-EZ (2008) ARIZONA CATTLE GROWERS ASSOCIATION 86-0	002290	Page 3
Pa	Other Information (Note the statement requirements in the instructions for Part VI.)		
			Yes No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	s 34	X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not		
	reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy		v
	tax requirements?	35a	X X
227	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A X
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Sch. N Enter amount of political expenditures, direct or indirect, as described in the instructions.	0.36	A
	Did the organization file Form 1120-POL for this year?	100000000000000000000000000000000000000	X
	Did the organization her put if 120-FOL for this year? Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made	3/0	
00 a	in a prior year and still unpaid at the start of the period covered by this return?	38a	X
h	If "Yes," complete Schedule L, Part II and enter the total amount involved 1990 1990 1990 1990 1990 1990 1990 199	500	
39	Section 501(c)(7) organizations. Enter:		
22.	Initiation fees and capital contributions included on line 9		
	Gross receipts, included on line 9, for public use of club facilities 39b N/A		
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
	section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A		
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or		T. C
	did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part 1	40b	N/A
C	Enter amount of tax imposed on organization managers or disqualified persons during the year under		
		0.	
		0.	
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter		
	transaction? If "Yes," complete Form 8886-T	40e	X
41	List the states with which a copy of this return is filed. $\blacktriangleright AZ$	267 11	20
42 a	The books are in care of ARIZONA CATTLE GROWERS' ASSOC., INC Telephone no. > 602		
		▶ 85008	)
٥	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	1	Yes No
		42b	Yes No X
	account)? If "Yes," enter the name of the foreign country: ►	420	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	_	
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	420	X
	If "Yes," enter the name of the foreign country: ►	teres [ teres ]	1.35
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here		
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A	
		1	Yes No
14	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		
14	Form 990-EZ	44	Yes No X
14 15			

Forn	rm 990-EZ (2008) ARIZONA CATTLE GROWERS ASSOCIATION	86-0002290	Page
2	Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organization tables for lines 50 and 51.	ons must answer questions 46-49 and complete	the
46	Did the organization engage in direct or indirect political campaign activities on behalf of or in oppos	sition to candidates for public Y	es No
	office? If "Yes," complete Schedule C, Part I	46	
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	
48	Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete	e Schedule E	
49a	a Did the organization make any transfers to an exempt non-charitable related organization?	49a	
b	b If "Yes," was the related organization(s) a section 527 organization?	49b	

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000 N/A	(b) Title and average hours per week devoted to position	(c) Compensation	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Total number of other employees paid over \$100,000				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

	N/A	- Andrews		
	(a) Name and address of each independent contractor paid more than \$100,000		(b) Type of service	(c) Compensation
Total numb	er of other independent contractors each receiving over \$100,000. Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	statements, and	d to the best of my knowled edge.	ge and belief, it is true,
Here	Signature of officer Type or print name and title.		Date	
Paid Preparer's	Preparer's signature Roch OPA Date 1-18-2010	Check if s employed		entifying Number (See instr.)
Use Only	Firm's name (or yours) WALLACE, PLESE + DREHER, LLP if self-employed), address, and ZIP+4 TEMPE, ARIZONA 85282		EIN Phone no. (2	180) 345-0500
May the IRS	S discuss this return with the preparer shown above? See instructions			No X Yes

Form 990-EZ (2008)

	ARIZONA	CATTLE	GROWERS	ASSOCIATION
--	---------	--------	---------	-------------

FORM 990-EZ

DESCRIPTION	AMOUNT
TRAVEL	9,227.
CONFERENCES, CONVENTIONS, AND MEETINGS	63,609.
DEPRECIATION	821.
MANAGEMENT FEES	211,310.
STAFF EXPENSE	53,479.
RAFFLE EXPENSE	15,356.
COMMUNICATION EXPENSE	430.
USFS INDIRECT COSTS	797.
DIRECTOR EXPENSE	3,611.
MERCHANT AND BANK FEES	3,889.
WEBSITE PRODUCTION	609.
MISCELLANEOUS	3,135.
MEALS	1,129.
CENTENNIAL BOOK EXPENSE	855.
RESEARCH EXPENSE	1,178.
DUES	24,304.
TELEPHONE	797.
SUPPLIES	1,449.
TOTAL TO FORM 990-EZ, LINE 16	395,985.

OTHER EXPENSES

FORM 990-EZ	OTHER ASSETS		STATEMENT 2
DESCRIPTION		BEG. OF YEAR	END OF YEAR
ACCOUNTS RECEIVABLE PREPAID EXPENSES		51,204. 5,509.	3,908. 8,996.
INVESTMENT IN ACA OTHER DEPRECIABLE ASSETS		17,500.	17,500. 3,381.
TOTAL TO FORM 990-EZ, LINE 24		76,090.	33,785.

-

STATEMENT 1

86-0002290

-

5

FORM 990-EZ	INFORMATION REGARDING TRANSFERS	STATEMENT	3
	ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		

- B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . [] YES [X] NO

## 86-0002290

FORM 990-EZ			LIST OF EES AND			ORS,	STAT	EM	ENT 4
NAME AND ADDRESS						OMPEN- ATION		N	
TOM CHILTON 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	SIDEN: 1.00		0.	0		0.
STEVE BROPHY 1401 N. 24TH ST.,	PHOENIX,	AZ		VICE 1.00	PRESIDE	ENT/TREAS 0.			0.
ANDY GROSETA 1401 N. 24TH ST.,	PHOENIX,	AZ		VICE 1.00	PRESIDE	ENT 0.	0		0.
C.B. 'DOC' LANE 1401 N. 24TH ST.,	PHOENIX,	AZ		CUTIVE	E VICE E	PRESIDENT 0.	0		0.
DAN BELL 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	BER-AD 1.00	-LARGE	0.	0	•	0.
JIM O'HACO 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	BER-AD	-LARGE	0.	0		0.
GARY THRASHER 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	BER-A1 1.00	-LARGE	0.	0		0.
BILL BRAKE 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	EDIATE 1.00	PAST P	PRESIDENT 0.	0	2	0.
BETTY JO NICHOLSON 1401 N. 24TH ST.,		AZ	85008		PRESIDE	INT 0.	0	÷	0.
LANCE KNIGHT 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	CTOR 1.00	- APACH	ιE Ο.	0		0.
DAVID JOHNSON 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	CTOR 1.00	- ARIZ	STRIP 0.	0		0.
DENNIS MORONEY 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	CTOR 1.00	- СОСНІ	SE 0.	0		0.
BROOKS CAMERON 1401 N. 24TH ST.,	PHOENIX,	AZ	85008	CTOR 1.00	- COCON	INO 0.	0		0.
JOHN FOWLER 1401 N. 24TH ST.,	PHOENIX,	AZ	85008		- GILA	0.	0		0.

7

ARIZONA CATTLE GROWERS ASSOCIA	TION	86-000	02290
NEWEL DRYDEN 1401 N. 24TH ST., PHOENIX, AZ 85	DIRECTOR - GRAHAM 008 1.00 0.	0.	0.
BILL MARKS 1401 N. 24TH ST., PHOENIX, AZ 85	DIRECTOR - GREENLEE 008 1.00 0.	0.	0.
DWAYNE DOBSON 1401 N. 24TH ST., PHOENIX, AZ 85	DIRECTOR - MARICOPA 008 1.00 0.	ο.	0.
PHILIP BRAVO, JR 1401 N. 24TH ST., PHOENIX, AZ 850	DIRECTOR - MOHAVE 008 1.00 0.	0.	0.
BILLY ELKINS 1401 N. 24TH ST., PHOENIX, AZ 850	DIRECTOR - NAVAJO 008 1.00 0.	0.	0.
CINDY COPING 1401 N. 24TH ST., PHOENIX, AZ 850	DIRECTOR - PIMA 008 1.00 0.	Ο.	0.
BILL DUNN 1401 N. 24TH ST., PHOENIX, AZ 850	DIRECTOR - PINAL 008 1.00 0.	0.	0.
TED NOON 1401 N. 24TH ST., PHOENIX, AZ 850	DIRECTOR - SANTA CRUZ 008 1.00 0.	0.	0.
DAVE SCHAFER 1401 N. 24TH ST., PHOENIX, AZ 850	DIRECTOR - YAVAPAI 008 1.00 0.	Ο.	0.
ALEX DEES 1401 N. 24TH ST., PHOENIX, AZ 850	DIRECTOR - YUMA 0.00 0.	0.	0.
SCOTT SHILL 1401 N. 24TH ST., PHOENIX, AZ 850	ACFA PRESIDENT 008 1.00 0.	0.	0.
CAMERON RUDOLPH 1401 N. 24TH ST., PHOENIX, AZ 850	ACGA BUS. ASSOC. DIRECTOR 008 1.00 0.	0.	0.
TOTALS INCLUDED ON FORM 990-EZ, P	PART IV 0.	0.	0.

8

990-EZ PG 2

STATEMENT 5

TO PROVIDE EDUCATION ABOUT THE CATTLE INDUSTRY

## TAX RETURN FILING INSTRUCTIONS

ARIZONA FORM 99

### FOR THE YEAR ENDING

June 30, 2009

Prepared for	Mr. Doc Lane Arizona Cattle Growers Association 1401 North 24th Street Phoenix, Arizona 85008
Prepared by	Wallace, Plese + Dreher, LLP Certified Public Accountants and Consultants 3933 S. Mcclintock Dr., Suite 500 Tempe, Arizona 85282
Amount due or refund	No payment is required.
Make check payable to	Not applicable
Mail tax return and check (if applicable) to	Arizona Department of Revenue PO Box 52153 Phoenix, AZ 85072-2153
Return must be mailed on or before	February 16, 2010
Special Instructions	The return should be signed and dated by an authorized individual.

ARIZONA 99		RM Arizona Exempt Organization Ar For the calendar year 2008 or fiscal year beginning 0.7/0	nnu:	al Information 8 and ending 06	Re/30	eturn 200		
CHECK ONE: Original	X				CHECK	Calendar Fiscal X		
Business telep	ohone			Ex. Or Later	Emp	oloyer identification number (EIN)		
602-267-1129 SNumber and street or PO Box					86-0002290			
1.0		§ 1401 N. 24TH ST.			AZ	transaction privilege tax numb		
		City or town, state and ZIP code PHOENIX, AZ 85008						
Check box	if.	This is a first return Name change Address cl	hango	CHECK BOX IF	2	-mos. Fed 6-mos. AZ - Fe		
CHECK DOX			nange	82 Return filed und extension.		2 C X 82 F		
A Date Arizo	ona d	perations began 12/01/24			A	NOT MARK IN THIS AREA		
B Nature of	Ariz	ona activities MEMBERSHIP						
C Check fee	deral	form filed: 990 X 990-EZ Other (specify)						
Atta	ach	copy of federal return.		81	1	66		
Sources	1	Gross sales or receipts from business activities	1	0	0			
of	2	Less: Cost of goods sold or of operations - attach itemized statement	2	0	D			
Income	3	Gross profit from business activities - subtract line 2 from line 1	3	0				
	4	Interest	4	1,832 0	2			
	5	Dividends	5	0	2			
	6	Rents and royalties	6	00	2			
	7	Gain or (loss) from sales of assets, excluding inventory items	7	152.056				
	8	Dues, assessments, etc., from members	153,856 0	1.1				
	9	Dues, assessments, etc., from affiliated organizations	100 514					
	10	Contributions, gifts, grants, etc., received	10	109,514 00	_	CONTRACTOR 1		
	11	Other income - attach itemized statement	11	279,815 00	-	STATEMENT 1		
	12	Total income - add lines 3 through 11			12	545,0170		
Administrative	13	Compensation of officers, directors, trustees, etc.	13	29,910 00	_			
Expenses	14	Salaries and wages - other than amounts included on line 2	14 15	29,910 00	-			
	15	Interest SLIENT		00				
	16 17	Taxes Rent expense	C16	1,739 00	_			
	18	Depreciation - attach schedule	18	OPV 00				
		Miscellaneous expenses - attach itemized statement	19	500,293 00		STATEMENT 2		
	20	Total expenses · add lines 13 through 19			20	E 21 040		
Disbursements	21	Dues, assessments, etc., to affiliated corporations	21	00	-	001/012/0		
from Current	22	Contributions, gifts, grants, etc., paid	22	00	-			
Income for the	23	Benefit payments to or for members or their dependents:			-			
Organization's		a. Death, sickness, hospitalization, disability, or pension benefits	23a	00	7			
Exempt		b. Other benefits	23b	00	5			
Purposes	24	Dividends and other distributions to members, shareholders, or depositors	24	00				
	25	Other	25	00				
	26	Total - add lines 21 through 25		*******	26	00		
Disbursements	27	Dues, assessments, etc., to affiliated corporations	27	00				
rom Principal	28	Contributions, gifts, grants, etc., paid	28	00				
or the	29	Benefit payments to or for members or their dependents:			-			
Organization's		a. Death, sickness, hospitalization, disability, or pension benefits	29a	00				
xempt		b. Other benefits	29b	00				
urposes	30	Dividends and other distributions to members, shareholders, or depositors	30	00	1			
	31	Other	31	00	1	1		
	5.3	Total - add lines 27 through 31			32	00		
Other	33	Other disbursements not itemized above - attach schedule			33	12 075		
ccumulation f Income		Accumulation of income in current year - line 12 minus the sum of li			34	13,075 00		
f Income 37971		Accumulation of income at beginning of year			35	245,884 00		
6-22-09		Accumulation of income at end of year - add lines 34 and 35			36	258,959 00		
enalty		Penalty for late filing or incomplete filing · See instructions		the second s	37			

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AZ Form 99 (2008) Name: Schedule A - Balance Sheet

	r amounts.			Beginning of year		End of year
	Assets					
			i i i i i i i i i i i i i i i i i i i	220 220	1 1	267 704
A1	Cash			238,320 00	) A1	267,784 00
A2a			00			
	b Less: allowance for doubtful accounts		00		last	
	c Line A2a less line A2b. Enter difference in column		5. S.	00	A2c	00
A3a	Other notes and loans receivable - attach schedule	A3a	00			
	<b>b</b> Less: allowance for doubtful accounts		00		Tes T	
	c Line A3a less line A3b. Enter difference in column			00		00
A4	Inventories			00		00
A5	Investments (securities) · attach schedule			00		00
A6	Investments (other) - attach schedule			00	A6	00
A7a	• • • • • • • • • • • • • • • • • • • •		38,511 00			
	<b>b</b> Less: accumulated depreciation - attach schedule		35,130 00	1 000		0.001
	c Line A7a less line A7b. Enter difference in column (	b)		1,877 00	A7c	3,381 00
<b>A8</b>	Other assets - describe S			74,213 00		30,404 00
A9	Total assets - add lines A1 through A8			314,410 00	A9	301,569 00
-	Liabilities				_	
A10	Accounts payable and accrued expenses		Г	00	A10	0
					A11	00
A11	Mortgages and other notes payable - attach schedule Other liabilities - describe	ਸੂਸ ਉਸਾ		68,526 00		42,610 00
A12				68,526 00		42,610 00
413	Total liabilities - add lines A10 through A12			00,520,00	A13	42,01000
	Net Assets					
A14	Capital stock or trust principal		Ε	00	A14	00
A15	Paid-in or capital surplus			00	A15	00
A16	Retained earnings or accumulated income			245,884 00		258,959 00
417	Total net assets - add lines A14 through A16			245,884 00		258,959 00
A18	Total liabilities and net assets - add lines A13 and A	17		314,410 00	A18	301,569 00
Cert	fication Under penalties of perjury, I declare that I have best of my knowledge and belief, it is a true, co the income tax laws of the State of Arizona.					
lea						
Sign	Here				-	
	Signature of officer		Date	e Title	9	
	the April CP	9	1	1-18-2010		
aid		- L				
rep	Dnly Preparer's signature		Date	e		
rep		, LLP	Date	e	8	6-0841383
rep	Only Preparer's signature	, LLP	Date	e	-	6-0841383 eparer's TIN
rep	Only Preparer's signature <u>WALLACE, PLESE + DREHER</u> Firm's name (or preparer's, if self-employed) 3933 S. MCCLINTOCK DR.,			e	Pre	eparer's TIN
rep	Dnly Preparer's signature WALLACE, PLESE + DREHER Firm's name (or preparer's, if self-employed)			e	Pre	

#### 86-0002290

AZ 99	OTHER INCOME	STATEMENT
DESCRIPTION		AMOUNT
PROGRAM SERVICE REVE	NUE	279,815
TOTAL TO FORM 99, PA	GE 1, LINE 11	279,815
AZ 99	MISC EXPENSES	STATEMENT 2
DESCRIPTION		AMOUNT
	ES	26,156 78,152 9,227 63,609 821 211,310 53,479 15,356 430 797 3,611 3,889 609 3,135 1,129 855 1,178 24,304 797 1,449
TOTAL TO FORM 99, PAG	E 1, LINE 19	500,293.
AZ 99	OTHER ASSETS	STATEMENT 3

DESCRIPTION	BEG OF YEAR	END OF YEAR
ACCOUNTS RECEIVABLE PREPAID EXPENSES INVESTMENT IN ACA	51,204. 5,509. 17,500.	3,908. 8,996. 17,500.
TOTAL TO FORM 99, PAGE 2, LINE A8	74,213.	30,404.

AZ 99 OTHER LIABILITIE	ES	STATEMENT
DESCRIPTION	BEG OF YEAR	END OF YEAR
ACCOUNTS PAYABLE	68,526.	42,610
TOTAL TO FORM 99, PAGE 2, LINE A12	68,526.	42,610

A COPY OF THE FEDERAL INCOME TAX RETURN WAS ATTACHED TO THIS STATE RETURN