WILSON, HARRIS & COMPANY CERTIFIED PUBLIC ACCOUNTANTS

April 15, 2013

Idaho Cattle Association Inc PO Box 15397 Boise, ID 83715

Idaho Cattle Association Inc:

Enclosed is the 2010 Form 8868, Federal Application for Extension of Time To File an Exempt Organization Return, prepared for Idaho Cattle Association Inc. Mail this form to the following address:

Department of the Treasury Internal Revenue Service Ogden, UT 84201-0045

Thank you for the opportunity to be of service. For further assistance with your tax needs, please do not hesitate to contact this office at (208)344-1355.

Sincerely,

James P Warr CPA

990 Form

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

2010

Department of the Treasury

The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public

| | | ilue Service | • | | • | a copy or triis return to | e canery crare repermi | 9.090. | 0111011101 | | • | |
|-------------------|---|-----------------|----------------------------|-------------------|-----------------------------|---------------------------|---|------------|------------------------|----------------|--|--|
| <u> </u> | For the | 2010 calend | lar year, or tax | year beginr | ning | 10 | -01 , 2010 , and e | nding | | 09- | 30 , 20 11 | |
| В | Check if | applicable: | C Name of orga | nization IDA | HO CATTLE ASS | OCIATION INC | | | | D | Employer identification no. | |
| | Address | change | Doing Busines | ss As | | | | | | | 82-0384167 | |
| | Name ch | nange | Number and s | street (or P.O. | box if mail is not deli | vered to street address) | | Room | /suite | T _E | Telephone number | |
| | nitial ret | • | PO BOX 1 | , | | , | | | | | (208)343-1615 | |
| | rerminat | | | state or countr | v and 7IP ± 4 | | | | | | 422,194 | |
| $\overline{\Box}$ | | | | | y, and zir + 4 | | | | | ا | | |
| | Amended | | BOISE, I | | | | | | | | Gross receipts \$ | |
| ш. | Applicati | on pending | | · | cipal officer: WYATT | PRESCOTT | | H(a |) Is this a g | roup re | turn for | |
| | | | SAME AS | | | | 1 | | | | | |
| | Tax-exer | mpt status: | 501(c)(3) | 501(c) (6 |) (insert no.) | 4947(a)(1) or | <u>527</u> | H(b | Are all af | filiates ii | ncluded? Yes No ist. (see instructions) number | |
| | Nebsite: | | | | | | | H(c |) Group ex | emption | number | |
| $\overline{}$ | | organization: X | Corporation | Trust Asso | ociation | <u> </u> | L Year of formation: | 1983 | M State | of lega | I domicile: ID | |
| Pa | rt I | Summar | У | | | | | | | | | |
| | 1 | Briefly descri | be the organizat | ition's missior | n or most significar | nt activities: PR | OMOTE THE CATTLE | E IND | USTRY | | | |
| | | | | | | | | | | | | |
| A C G | | | | | | | | | | | | |
| t o | | - | | | | | | | | | | |
| v e | 2 | Check this bo | ox I if the o | organization | discontinued its on | erations or disposed | of more than 25% of i | ts net a | ssets. | | | |
| l r t n | 3 | | | - | ing body (Part VI, | • | | | | 3 | 0 | |
| i a | 4 | | J | 0 | 5) (| ody (Part VI, line 1b) | | | | 4 | 0 | |
| e n s c | 5 | | • | J | alendar year 2010 | , , | | | | 5 | 4 | |
| e e | | | r of volunteers (| . , | • | , | | | | 6 | | |
| u. | 6 | | , | | • , | | | | | | | |
| | 7a | | | | art VIII, column (C) | | | | • • • • • | 7a | 0 | |
| | d | Net unrelated | d business taxat | ble income fro | om Form 990-T, lir | ne 34 | | | | 7b | 0 | |
| R | | | | | | | - | | Prior Year | | Current Year | |
| е | 8 | | s and grants (Pa | | | | | | 225 | ,522 | 314,318 | |
| v e | 9 | Program ser | vice revenue (Pa | art VIII, line 2 | g) | | | | 11 | ,303 | 73,268 | |
| n | n u lowestment income (Part VIII, column (A), lines 3, 4, and 7d) | | | | | | | | 2 | ,881 | 2,749 | |
| e | 11 | Other revenu | ue (Part VIII, colu | umn (A), lines | s 5, 6d, 8c, 9c, 10d | c, and 11e) | | | 3 | ,467 | 31,859 | |
| | 12 | Total revenue | e - add lines 8 th | hrough 11 (m | ust equal Part VIII | , column (A), line 12) | | | 243 | ,173 | 422,194 | |
| | 13 | Grants and s | imilar amounts p | paid (Part IX, | column (A), lines | 1-3) | | | | | 0 | |
| Е | 14 | Benefits paid | I to or for member | ers (Part IX, | column (A), line 4) | | | | | | 0 | |
| X | 15 | Salaries, other | er compensatior | n, employee l | benefits (Part IX, c | olumn (A), lines 5-10) | [| | 110 | ,296 | 151,108 | |
| p e | 16a | | | | umn (A), line 11e) | | | | | | 0 | |
| n | | | - | • | nn (D), line 25) | | 0 | | | | | |
| s e | 17 | | | | s 11a-11d, 11f-24f | | | | 193 | ,310 | 230,177 | |
| s | 18 | | | | qual Part IX, colum | | | | | ,606 | 381,285 | |
| | 19 | • | s expenses. Su | , | • | iii (A), iiilo 25) . | | | | 0,433 | | |
| | 13 | Neveriue ies | s expenses. Su | ibtract line 10 | inominie iz . | | | Do alasada | | | | |
| Net Asset | 3 20 | Total assets | (Dort V. line 16) | | | | | beginnii | ng of Current | | End of Year | |
| or Fund | 20 | | (Part X, line 16) | | | | | | | ,193 | 261,347 | |
| Bal- | 21 | | s (Part X, line 26 | , | | | | | | ,623 | 3,869 | |
| ances | 22 | | | . Subtract line | e 21 from line 20 | | | | 216 | ,570 | 257,478 | |
| Pa | | | re Block | | antional deplication and | | - d - t - t d t - th | | and the soul and | | | |
| | | | | | | | nd statements, and to the mation of which preparer | | | ge | | |
| | | | | | | | | | | | | |
| C:~ | _ | | | | | | | | | | | |
| Sig | | Signatu | ure of officer | | | | | | | Date | | |
| Her | е | | T PRESCOTT, | | E DIRECTOR | | | | | | | |
| | | Type of | r print name and ti | itle | | | | | | | | |
| | | Print/Type p | reparer's name | | Preparer's signature | • | Date | | Check | if P | TIN | |
| Pai | d | James P | Warr CPA | | | | | | self-emplo | yed | | |
| Pre | parer | Firm's name | 7 | WILSON HA | RRIS AND COMP | ANY | | Firm's | EIN • | | | |
| | Only | | ess 1602 W FRANKLIN STREET | | | | | | Phone no. 208-344-1355 | | | |
| | , | | | BOISE ID | | | | | | | | |
| May | the IDC | diagrap this r | | | n ahove? (see ins | tru sationa) | | 1 | | | ▼ Ves No | |

| | 1990 (2010) IDAHO CATTLE ASSOCIATION INC | 82-0384167 | Page 2 |
|----|---|------------|----------|
| Pa | rt III Statement of Program Service Accomplishments | | |
| | Check if Schedule O contains a response to any question in this Part III | <u> </u> | <u> </u> |
| 1 | Briefly describe the organization's mission: | | |
| | PROMOTE THE CATTLE INDUSTRY | | |
| | | | |
| | | | |
| 2 | Did the organization undertake any significant program services during the year which were not listed on | | |
| 2 | the prior Form 990 or 990-EZ? | □ Ves | x No |
| | If "Yes," describe these new services on Schedule O. | 103 | <u> </u> |
| 3 | Did the organization cease conducting, or make significant changes in how it conducts, any program | | |
| | services? | 🗌 Yes | x No |
| | 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 | d | |
| | allocations to others, the total expenses, and revenue, if any, for each program service reported. | | |
| 4a | (Code:) (Expenses \$ including grants of \$) (Revenue | ıe \$ |) |
| | PROMOTE THE CATTLE INDUSTRY. | | |
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| 4b | (Code:) (Expenses \$ including grants of \$) (Revenue | ue \$ |) |
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| | | | |
| 4c | (Code:) (Expenses \$ including grants of \$) (Revenue | ue \$ |) |
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| 4d | Other program services. (Describe in Schedule O.) | | |
| _ | (Expenses \$ including grants of \$) (Revenue \$ |) | |

EEA

Part IV Checklist of Required Schedules

| | | | Yes | No |
|-------------|---|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| | complete Schedule A | 1 | | X |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) | 2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) | | | |
| | election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, | | | |
| | or similar amounts as defined in Revenue Procedure 98-19? 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 | | | |
| | the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," | | | |
| | complete Schedule D, Part I | 6 | | 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 Schedule D, Part III | 8 | | X |
| 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," | _ | | 37 |
| | complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or | | | 37 |
| | quasi-endowments? If "Yes," complete Schedule D, Part V | 10 | | X |
| 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. | | | |
| • | a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete | 44- | v | |
| | Schedule D, Part VI | 11a | X | |
| | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more | 446 | | X |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | |
| , | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | X |
| | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets | 110 | | 22 |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | X |
| | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | X |
| 1 | | 110 | | 21 |
| | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | | | | |
| ~ | Schedule D, Parts XI, XII, and XIII | 12a | | X |
| h | 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 | | Х |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | Х |
| 14a | | 14a | | Х |
| b | | | | |
| | business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV | 15 | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | | | |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services | | | |
| | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) | 17 | | X |
| 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 | Х | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | |
| | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20 a | | 20a | | X |
| k | · | | | |
| | Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) | 20b | | |

Part IV Checklist of Required Schedules (continued) No 21 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 21 Χ 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 Χ Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated Χ employees? If "Yes," complete Schedule J 23 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 Χ 24b through 24d and complete Schedule K. If "No," go to line 25 **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? **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 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 Χ 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 Schedule L, Part III Χ Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): Χ a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV **b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b Χ 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 Χ 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 conservation contributions? If "Yes," complete Schedule M Χ 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Χ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Χ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ 33 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, Χ 34 Χ 35 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Χ 37 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

10) IDAHO CATTLE ASSOCIATION INC
Statements Regarding Other IRS Filings and Tax Compliance Page 5 82-0384167

| | Check if Schedule O contains a response to any question in this Part V | | | \Box |
|--------|--|----------|-----|--------|
| | | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | | |
| b | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| | gaming (gambling) winnings to prize winners? | 1c | Х | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return 2a 4 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Х | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | Χ | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority | | | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial | | | |
| | account)? | 4a | | Χ |
| b | If "Yes," enter the name of the foreign country: | | | |
| | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Χ |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Χ |
| С | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | 5с | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | |
| | organization solicit any contributions that were not tax deductible? | 6a | | X |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | | | |
| | gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | | | |
| | and services provided to the payor? | 7a | | X |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | _ | | 7.7 |
| | required to file Form 8282? | 7с | | X |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | _ | | 37 |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g 7h | | X |
| h 8 | If the organization received a contribution of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | /11 | | Λ |
| 0 | 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? | Ω | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | 8 | | |
| 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 | | |
| 0 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | | | |
| 1 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | | |
| | amounts due or received from them.) | | | |
| 2a | 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 | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | | |
| | the organization is licensed to issue qualified health plans | | | |
| C | Enter the amount of reserves on hand | | | 37 |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | X |
| p | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | İ |

| Form | 1990 (2010) IDAHO CATTLE ASSOCIATION INC 82-038416 | 7 | Р | age 6 |
|------------------------|---|-----|-----|--------------|
| Pa | rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and | | | |
| | for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in | | | |
| | Schedule O. See instructions. | | | |
| | Check if Schedule O contains a response to any question in this Part VI | | | . X |
| Sec | ction 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 | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b 0 | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | |
| | any other officer, director, trustee, or key employee? | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | |
| | supervision of officers, directors or trustees, or key employees to a management company or other person? | 3 | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | X |
| 6 | Does the organization have members or stockholders? | 6 | | X |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members | | | |
| | of the governing body? | 7a | | X |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | _X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following: | | | |
| а | The governing body? | 8a | Χ | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Χ | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached | | | |
| | at the organization's mailing address? 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 Revenue Code.) | | | |
| | | | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | | <u>X</u> |
| b | 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 | | |
| 11a | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the | | | |
| | form? | 11a | X | |
| b | 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 | | <u>X</u> |
| b | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | | | |
| | rise to conflicts? | 12b | | |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | |
| | describe in Schedule O how this is done | 12c | | |
| 13 | Does the organization have a written whistleblower policy? | 13 | | X |
| 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 by | | | |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | 4- | 77 | |
| a | The organization's CEO, Executive Director, or top management official | 15a | X | |
| b | Other officers or key employees of the organization | 15b | X | |
| 10- | If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | 16- | | Χ |
| | with a taxable entity during the year? | 16a | | |
| b | 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 | 16h | | Χ |
| Sec | the organization's exempt status with respect to such arrangements? | 16b | | 77 |
| 3 e c 17 | List the states with which a copy of this Form 990 is required to be filed | | | |
| 1 <i>7</i> 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) | | | |
| 10 | | | | |
| | available for public inspection. Indicate how you make these available. Check all that apply. Own website Another's website Upon request | | | |
| 10 | | | | |
| 19 | Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest | | | |
| 20 | policy, and financial statements available to the public. | | | |
| 20 | State the name, physical address, and telephone number of the person who possesses the books and records of the organization: LAURA SECHLER (208)343-1615 | | | |
| | UIYAHIIZAHUH. 7 LAUKA BECHLEK (200)373-1013 | | | |

PO BOX 15397 BOISE, ID 83715

| orm= | 990 | (2010) | |
|-------|-----|--------|--|
| OIIII | 550 | (2010) | |

82-0384167

Page 7

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.

| Check this box if neither the organization nor any related | l organizations | compe | ensat | ted a | any c | urrent | offic | er, director, or truste | ee. | |
|--|---|---|-------------------|-------------|---------|---|-------|---|--|--|
| (A) | (B) | | | (6 | C) | | | (D) | (E) | (F) |
| Name and Title | Average hours per week (describe hours for related organizations in Schedule O) | I t d n r i d u r i s e v t c i e t d e o | l t n r s u | O f f i c e | K all f | Hat app Hc e i o m g mp e e o s n y t s e t e d | F | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | Estimated amount of other compensation from the organization and related organizations |
| (1) WYATT PRESCOTT | | | | 37 | 37 | 37 | | | _ | _ |
| (2) EXECUTIVE DIRECTOR | 40.00 | | | Λ | X | X | | 60,583 | 0 | 0 |
| (3) | | | | | | | | | | |
| (4) | | | | | | | | | | |
| (5) | | | | | | | | | | |
| (6) | | | | | | | | | | |
| (7) | | | | | | | | | | |
| (8) | | | | | | | | | | |
| (9) | | | | | | | | | | |
| (10) | | | | | | | | | | |
| (11) | | | | | | | | | | |
| (12) | | | | | | | | | | |
| (13) | | | | | | | | | | |
| (14) | | | | | | | | | | |
| (15) | | | | | | | | | | |
| (16) | | | | | | | | | | |

| | | CATTLE ASSOCIAT | ION INC | | | | | | | | 82-038416 | 7 | Pa | age 8 |
|-------------|---|--------------------------------|---|--|---------------------------------|-------------|--|---|-----------------|--|--|-----------------------|---|----------------------|
| Par | rt VII Section A. Officers, | Directors, Trustees, | Key Emplo | yees, | and | l Hig | jhes | t Com | per | sated Employees | (continued) | | | |
| | (A) | | (B) | | | (0 | C) | | | (D) | (E) | | (F) | |
| | Name and Title | | Average hours per week (describe hours for related organizations in Schedule O) | Posi I t d n r i d u r i s e v t c i e t d e o u r a o I r | I t n r s u t s i t | O f f i c e | K all t K e y e m p l o y e e | H c e i o m g m p h p o s n y t s e t e d | F | Reportable compensation from the organization (W-2/1099-MISC) | Reportable compensation from related organizations (W-2/1099-MISC) | con f org ar | stimated mount of other npensation from the ganization of related panization | f ion on ed |
| (17) | | | | | I | | | | | | | | | |
| (18) | | | | | | | | | | | | | | |
| (19) | | | | | | | | | | | | | | |
| (20) | | | | | | | | | | | | | | |
| (21) | | | | | | | | | | | | | | |
| (22) | | | | | | | | | | | | | | |
| (23) | | | | | | | | | | | | | | |
| (24) | | | | | | | | | | | | | | |
| (25) | | | | | | | | | | | | | | |
| (26) | | | | | | | | | | | | | | |
| (27) | | | | | | | | | | | | | | |
| (28) | | | | | | | | | | | | | | |
| c d 2 | Sub-total | to Part VII, Section A | | | | | | | ▶ ▶ an \$ | 60,583 3100,000 in | 0 | | | 0 |
| 3 | Did the organization list any form employee on line 1a? If "Yes," com | ner officer, director or | - | | oyee | e, or | high | est co | mpe | ensated | | 3 | Yes | No X |
| 4 | For any individual listed on line 1a, the organization and related organ individual | is the sum of reportab | le compensa | tion an | | | | | | | | 4 | | Х |
| 5 | Did any person listed on line 1a rector services rendered to the organistion B. Independent Con | zation? If "Yes," compl | | | | | - | nization | | ndividual | • • • • • • • • • • | 5 | | X |
| | Complete this table for your five high | | dependent co | ntracto | ors th | nat re | eceiv | ed mo | re th | nan \$100.000 of | | | | |
| | compensation from the organization | on. | , | | | | | | | | I | | | |
| | N _i | (A) ame and business addres | s | | | | | | | (B) Description of | services | | (C) ensation | 1 |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | Total number of independent contr more than \$100,000 in compensat | | | ose lis | sted | abov | /e) w | /ho rec | eive | d | | | | |

| Part \ | /111 | Statement of Revenue | | | | | | |
|---------------------|----------|--|-------|----------------|----------------------|---|---|--|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| | 1a | Federated campaigns | 1a | | | | | |
| | b | Membership dues | 1b | 225,268 | | | | |
| Contri- butions, | С | Fundraising events | 1c | 80,939 | | | | |
| gifts, | d | Related organizations | 1d | | | | | |
| grants | e | Government grants (contributions) | 1e | | | | | |
| and other | | All other contributions, gifts, grants, | | | | | | |
| similar | ' | and similar amounts not included above | 1f | 8,111 | | | | |
| amounts | g | Noncash contributions included in lines 1a-1 | | *, | - | | | |
| | h | | | | 314,318 | | | |
| | | | | Business Code | 011,010 | | | |
| | 2a | PUBLICATION ADVERTISING | | 511120 | 57,970 | 57,970 | | |
| | | | | 110000 | 15,298 | 15,298 | | |
| Program | C | PROGRAMS | | 110000 | 13,230 | 15,250 | | |
| Service Revenue | d | | | | | | | |
| | e | | | | | | | |
| | | All other program service revenue | | | | | | |
| | 1 | Total. Add lines 2a-2f | | | 73,268 | | | |
| | | Investment income (including dividends, interest | | | 737200 | | | |
| | 3 | other similar amounts) | | | 2,749 | 2,749 | | |
| | 4 | Income from investment of tax-exempt bond | | | 27,13 | 27,15 | | |
| | 5 | Royalties | | | | | | |
| | | (i) Rea | | (ii) Personal | | | | |
| | 62 | Gross Rents | | (ii) i ersonar | - | | | |
| | 1 | Less: rental expenses | ,001 | | - | | | |
| | 1 | Rental income or (loss) 15 | . 084 | | - | | | |
| | l . | Net rental income or (loss) | | • | 15,084 | 15,084 | | |
| | | | | (ii) Other | 13,001 | 15,001 | | |
| | /a | Gross amount from sales of assets other than inventory | .103 | (ii) Other | - | | | |
| | b | Less: cost or other basis and sales expenses | | | | | | |
| 0 | | Gain or (loss) | | | - | | | |
| t h | | Net gain or (loss) | | • | | | | |
| e | l | Gross income from fundraising | • • • | | | | | |
| r | l oa | events (not including \$ 80,93 | . a | | | | | |
| R | | of contributions reported on line 1c). | _ | | | | | |
| е | | See Part IV, line 18 | • | | | | | |
| v e | ١, | Less: direct expenses | | | - | | | |
| n | | Net income or (loss) from fundraising events | | • | | | | |
| u e | 1 | Gross income from gaming activities. | • | <u>•</u> | | | | |
| Ū | Ja | See Part IV, line 19 | • | | | | | |
| | ۱ ۵ | • | | | - | | | |
| | l | Less: direct expenses | | • | | | | |
| | | , , , | • • | | | | | |
| | 10a | Gross sales of inventory, less returns and allowances | 9 | | | | | |
| | h | Less: cost of goods sold | | | - | | | |
| | 1 | Net income or (loss) from sales of inventory | | • | | | | |
| | | Miscellaneous Revenue | • • | Business Code | | | | |
| | 112 | TRADE SHOW | | 110000 | 16,775 | 16,775 | | |
| | b | - | | | 23,7,5 | 20,,,5 | | |
| | C | | | | | | | |
| | | All other revenue | | | | | | |
| | l | Total. Add lines 11a-11d | | | 16,775 | | | |
| | | Total revenue Con instructions | | | 422 104 | 107 076 | | 0 |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) Total expenses (D) Do not include amounts reported on lines 6b, Program service Fundraising Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 2 Grants and other assistance to individuals in Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 60,583 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 73,285 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 9 7,148 10 10,092 11 Fees for services (non-employees): а 2,035 С d Professional fundraising services. See Part IV, line 17 е f 2,807 a 12 Advertising and promotion 918 13 16,731 14 1,050 15 16 20,149 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 19 Conferences, conventions, and meetings 84,566 20 21 22 Depreciation, depletion, and amortization 116 23 Insurance 24 Other expenses. Itemize expenses not covered 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 O.) **PUBLICATIONS** 44,236 27,505 NATIONAL DUES С OTHER CATTLE PROGRAMS 30,064 d е f 381,285 25 Total functional expenses. Add lines 1 through 24f . . 0 0 0 Joint Costs. Check here ▶ ☐ if following SOP 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

Form 990 (2010) IDAHO CATTLE ASSOCIATION INC 82-0384167 Page 11 Part X **Balance Sheet** (A) (B) Beginning of year End of year Cash - non-interest-bearing 159,770 1 116,257 2 Savings and temporary cash investments 2 69,627 3 Pledges and grants receivable, net 3 4 4 10,174 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing A s employers and sponsoring organizations of section 501(c)(9) voluntary s employees' beneficiary organizations (see instructions) 6 7 Notes and loans receivable, net 7 t 8 Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a b Less: accumulated depreciation 10b 227,356 65,405 10c 65,289 11 Investments - publicly traded securities 11 12 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 14 15 1,018 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 226,193 261,347 17 9,623 17 3,869 18 18 19 Deferred revenue 19 L i 20 20 а 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified i 22 persons. Complete Part II of Schedule L t i 23 Secured mortgages and notes payable to unrelated third parties 23 е 24 Unsecured notes and loans payable to unrelated third parties 24 s 25 25 Total liabilities. Add lines 17 through 25 26 9,623 26 3,869 Organizations that follow SFAS 117, check here 🕨 🗵 and ΝF complete lines 27 through 29, and lines 33 and 34. u 27 162,533 27 215,363 n 28 Temporarily restricted net assets 54,037 28 42,115 d 29 29 В s Organizations that do not follow SFAS 117, check here

257,478

261,347

30

31 32

33

34

216,570

226,193

e l

t a

n c 30

31

32

33

34

and complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

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

Retained earnings, endowment, accumulated income, or other funds

| Form | m 990 (2010) IDAHO CATTLE ASSOCIATION INC 82-0384167 | | Page | | | | | |
|------|--|----------|-------|------------|--|--|--|--|
| Pa | Reconciliation of Net Assets | | | | | | | |
| | Check if Schedule O contains a response to any question in this Part XI | · • • • | | . X | | | | |
| | | | | | | | | |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | | 422,1 | L94 | | | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 381, | | 285 | | | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | | | | | | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | | 216,5 | 570 | | | | |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | | | (1) | | | | |
| 6 | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, | | | | | | | |
| | column (B)) | | 257,4 | 178 | | | | |
| Pai | Financial Statements and Reporting | | | _ | | | | |
| | Check if Schedule O contains a response to any question in this Part XII | <u>.</u> | | <u>. Ц</u> | | | | |
| | | | Yes | No | | | | |
| 1 | Accounting method used to prepare the Form 990: | | | | | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | | | | | | | |
| | Schedule O. | | | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | . 2a | Х | | | | | |
| b | Were the organization's financial statements audited by an independent accountant? | . 2b | | X | | | | |
| С | 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? | . 2c | | X | | | | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | | | | | | |
| | Schedule O. | | | | | | | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were | | | | | | | |
| | issued 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 Single Audit Act and OMB Circular A-133? | . 3a | | 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 | | | | | | |

EEA

Form **990** (2010)

SCHEDULE C

(Form 990 or 990-EZ) Political Campaign and

Political Campaign and Lobbying Activities

2010

OMB No. 1545-0047

Open to Public Inspection

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

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

► See separate instructions.

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

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

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

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) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

| Name | e of organization | | | | Employer ide | ntification number | |
|---------|--|--|-----------------------|-----------------------------------|--------------|--|-------|
| | DAHO CATTLE ASSOCIATION INC | | | | 82-03841 | | |
| Pa | rt I-A Complete if the organ | ization is exempt under secti | on 501(c) or is | a section 5 | 27 orgar | nization. | |
| 1 | Provide a description of the organization's of | direct and indirect political campaign activ | ities in Part IV | | • | | |
| 2 | Political expenditures | | | | \$ | | |
| 3 | Volunteer hours | | | | | | |
| | | | | | | | |
| Pa | rt I-B Complete if the organ | ization is exempt under secti | on 501(c)(3). | | | | |
| 1 | Enter the amount of any excise tax incurred | d by the organization under section 4955 | | | \$ | | |
| 2 | Enter the amount of any excise tax incurred | d by organization managers under section | n 4955 | | \$ | | |
| 3 | If the organization incurred a section 4955 t | tax, did it file Form 4720 for this year? | | | | . Yes | No |
| 4a | Was a correction made? | | | | | . Yes | □No |
| b | If "Yes," describe in Part IV. | | | | | | |
| Pa | rt I-C Complete if the organ | ization is exempt under secti | on 501(c), exc | ept section | 501(c)(3) |). | |
| 1 | Enter the amount directly expended by the | filing organization for section 527 exempt | t function | | | | |
| | activities | | | | \$ | | |
| 2 | Enter the amount of the filing organization's | funds contributed to other organizations | for section | | | | |
| | 527 exempt function activities | | | | \$ | | |
| 3 | Total exempt function expenditures. Add lin | nes 1 and 2. Enter here and on Form 112 | 0-POL, | | · | | |
| | line 17b | | | | \$ | | |
| 4 | Did the filing organization file Form 1120 | -POL for this year? | | | | . Yes | No |
| 5 | Enter the names, addresses and employer | identification number (EIN) of all section | 527 political organiz | ations to which th | ne filing | | |
| | organization made payments. For each org | ganization listed, enter the amount paid fro | om the filing organiz | ation's funds. Als | o enter | | |
| | the amount of political contributions receive | ed that were promptly and directly delivere | ed to a separate poli | tical organization | , such | | |
| | as a separate segregated fund or a political | I action committee (PAC). If additional sp | ace is needed, prov | ide information in | Part IV. | | |
| | (a) Name | (b) Address | (c) EIN | (d) Amount pa | | (e) Amount of politic | |
| | | | | filing organiz funds. If none, | | contributions received promptly and direct | |
| | | | | | | delivered to a separ | |
| | | | | | | political organization none, enter -0 | 1. IT |
| (1) | | | | | | , | |
| (., | | | | | | | |
| (2) | | | | | | | |
| | | | | | | | |
| (3) | | | | | | | |
| <u></u> | | | | | | | |
| (4) | | | | | | | |
| (5) | | | | | | | |
| | | | | | | | |
| (6) | | | | | | | |

| Sch | edule C (Form 990 or 990-EZ) 2010 IDAHO CATTLE ASS | OCIATION INC | | | 82-03841 | .67 Page 2 |
|---------|---|--|--|---------------------|----------------------------------|------------------------------------|
| Pa | Complete if the organization section 501(h)). | is exempt ur | nder section 501 | (c)(3) and filed | Form 5768 (elec | tion under |
| A | Check if the filing organization belongs to an | offiliated group | | | | |
| | Check if the filing organization belongs to all | | tral" provisions apply | | | |
| _ | Limits on Lobby | | | | (a) Ellina | (I-) A ((:): - () |
| | (The term "expenditures" me | • . | | | (a) Filing organization's totals | (b) Affiliated group totals |
| 40 | ` . | • | · · · · · · · · · · · · · · · · · · · | | | 3. 1 ph 1 1 1 1 1 1 |
| 1a b | , | | , 0, | | | |
| | | | | | | |
| C | | | | | | |
| c | | | | | | |
| e | | | | | | |
| f | 2000) ing normanable amount 2 mer are amount norm | the following table | e in both | | | |
| | columns. | | | | | |
| | If the amount on line 1e, column (a) or (b) is: | 1 | nontaxable amount | IS: | | |
| | Not over \$500,000 | <u> </u> | nount on line 1e. | | | |
| | Over \$500,000 but not over \$1,000,000 | | 15% of the excess over | | | |
| | Over \$1,000,000 but not over \$1,500,000 | | 10% of the excess over | | | |
| | Over \$1,500,000 but not over \$17,000,000 | · · · · | 5% of the excess over | r \$1,500,000. | | |
| | Over \$17,000,000 | \$1,000,000. | | | | |
| 9 | • | | | | | |
| h | , | | | | | |
| İ | Subtract line 1f from line 1c. If zero or less, enter -0- | | | | | |
| j | If there is an amount other than zero on either line 1h | * | 9 | | | |
| | reporting section 4911 tax for this year? | | | | | ☐ Yes ☐ No |
| | (Some organizations that ma | ade a section 50 | eriod Under Section 1(h) election do not l tions for lines 2a thro | have to complete al | l of the five | |
| | Lobbyir | ng Expenditures | During 4-Year Avera | aging Period | T | |
| | Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (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 | | | | | |
| | | | | | | |

| | rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi (election under section 501(h)). | icu i v | | |
|------------------------------|--|---------|---------|--------|
| | | (| a) | (b) |
| | | Yes | No | Amount |
| 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)? | | | |
| С | Media advertisements? | | | |
| d | Mailings to members, legislators, or the public? | | | |
| е | Publications, or published or broadcast statements? | | | |
| f | Grants to other organizations for lobbying purposes? | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i | 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)? | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | _ | |
| c d | | | | |
| | rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) | (5) | r sect | ion |
| . u | 501(c)(6). | ,(0), 0 | | .0 |
| | | | | Yes No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 X |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 2 X |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | | | 3 |
| Pa | rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) | | | |
| | 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines 1 | ne 3 i | s ansv | wered |
| | "Yes." | | | |
| 1 | Dues, assessments and similar amounts from members | | 1 | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of | | | |
| | political expenses for which the section 527(f) tax was paid). | | | |
| | Current year | | 2a | |
| а | | | OI. | |
| a b | Carryover from last year | • • | 2b | |
| b c | Total | | 2c | |
| b c 3 | Total | | | |
| b c | Total | | 2c | |
| b c 3 | Total | | 2c 3 | |
| b c 3 4 | Total | | 2c 3 | |
| b c 3 4 | Total | | 2c 3 | |
| b c 3 4 | Total | | 2c 3 | |
| b c 3 4 5 Par | Total | | 2c 3 | |
| b c 3 4 5 Par | Total | | 2c 3 | |
| b c 3 4 5 Par | Total | | 2c 3 | |
| b c 3 4 5 Par | Total | | 2c 3 | |
| b c 3 4 5 Par | Total | | 2c 3 | |

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

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.

OMB No. 1545-0047

2010

Open to Public Inspection

| Name | of the organization | Employer identification number |
|--------|--|---------------------------------------|
| ID. | AHO CATTLE ASSOCIATION INC | 82-0384167 |
| Pa | rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds o | r Accounts. Complete if |
| | the organization answered "Yes" to Form 990, Part IV, line 6. | |
| | (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 writing that the assets held in donor advised | |
| | | |
| 6 | Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be | |
| | used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other | |
| | purpose conferring impermissible private benefit? | |
| Pa | rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV | |
| 1 | Purpose(s) of conservation easements held by the organization (check all that apply). | - |
| | Preservation of land for public use (e.g., recreation or education) Preservation of an historically | v important land area |
| | Protection of natural habitat Preservation of a certified his | |
| | Preservation of open space | |
| 2 | Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation | vation |
| _ | easement on the last day of the tax year. | valori |
| | outonion on the last day of the last year. | Held at the End of the Tax Year |
| а | Total number of conservation easements | |
| b | Total acreage restricted by conservation easements | |
| c | Number of conservation easements on a certified historic structure included in (a) | |
| d | Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic | . = - |
| - | structure listed in the National Register. | . 2d |
| 3 | Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization | |
| · | the tax year | on daming |
| 4 | Number of states where property subject to conservation easement is located | |
| 5 | Does the organization have a written policy regarding the periodic monitoring, inspection, handling of | |
| · | violations, and enforcement of the conservation easements it holds? | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the ye | |
| · | b | ui |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year | |
| | s s | |
| 8 | Does each conservation easement reported on line 2(d) above satisfy the requirements of section | |
| · | 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? | |
| 9 | In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement | |
| • | balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that des | |
| | the organization's accounting for conservation easements. | 33333 |
| Pa | rt III Organizations Maintaining Collections of Art, Historical Treasures, or Otl | her Similar Assets. |
| | Complete if the organization answered "Yes" to Form 990, Part IV, line 8. | |
| 1a | If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and ba | alance sheet works of |
| | art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of p | |
| | provide, in Part XIV, the text of the footnote to its financial statements that describes these items. | , |
| b | If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balan | ce sheet works of art. |
| - | historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public | |
| | provide the following amounts relating to these items: | , |
| | (i) Revenues included in Form 990, Part VIII, line 1 | > \$ |
| | (ii) Assets included in Form 990, Part X | • \$ • \$ |
| 2 | If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provi | • |
| _ | following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: | ide tile |
| • | Revenues included in Form 990, Part VIII, line 1 | ▶ s |
| a h | | · · · · · · · · · · · · · · · · · · · |
| b | Assets included in Form 990, Part X | γ φ |

| Pai | rt III Organizations Maintaining | Collect | ions of | Art, Hist | orical T | reasures, | or Ot | her Similar As | ssets (| continu | ied) |
|-----|--|---------------|---------------|-----------------|-------------|---------------------------------------|-----------|---------------------|-----------------|----------|----------|
| 3 | Using the organization's acquisition, accession, ar | nd other re | cords, che | ck any of the | following | that are a sign | ificant ι | use of its | | | |
| | collection items (check all that apply): | | | | | | | | | | |
| а | ☐ Public exhibition | d | Loa | n or exchan | ge prograr | ms | | | | | |
| b | ☐ Scholarly research | е | | er | | | | | | | |
| С | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's collection | ons and ex | plain how | they further | he organiz | zation's exemp | ot purpo | se in | | | |
| | Part XIV. | | • | • | ŭ | | | | | | |
| 5 | During the year, did the organization solicit or rece | eive donation | ons of art, I | historical trea | asures, or | other similar | | | | | |
| | assets to be sold to raise funds rather than to be r | | | | | | | | 🗆 | Yes | ☐ No |
| Pai | rt IV Escrow and Custodial Arra | | | | | | | | | | |
| | Part IV, line 9, or reported an amount | • | | | | | | · | | | |
| 1a | Is the organization an agent, trustee, custodian or | | | | ns or other | r assets not | | | | | |
| | • | | | | | | | | 🗌 | Yes | ☐ No |
| b | If "Yes," explain the arrangement in Part XIV and | | | | | | | | | | _ |
| | , , | • | | J | | | | Ar | nount | | |
| С | Beginning balance | | | | | | . 10 | ; | | | - |
| d | Additions during the year | | | | | | | <u> </u> | | | - |
| е | Distributions during the year | | | | | | | 1 | | | |
| f | Ending balance | | | | | | | | | | - |
| 2a | Did the organization include an amount on Form 9 | | | | | | | | П | Yes | No |
| b | If "Yes," explain the arrangement in Part XIV. | , | , | | | | | | _ | | _ |
| Pai | | if the organ | nization an | swered "Yes | " to Form | 990, Part IV, I | ine 10. | | | | |
| | <u> </u> | | rent year | (b) Pric | | (c) Two years | | (d) Three years bac | k (e) Fo | ur year | s back |
| 1a | Beginning of year balance | - ' | | | | , , | | ,, | | - | |
| b | Contributions | | | | | | | | | | |
| С | Net investment earnings, gains, and losses . | | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | | |
| е | Other expenditures for facilities | | | | | | | | | | |
| | and programs | | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | | |
| g | End of year balance | | | | | | | | | | |
| 2 | Provide the estimated percentage of the year end | | eld as: | | | | | | | | |
| а | Board designated or quasi-endowment | | | | | | | | | | |
| b | Permanent endowment % | | | | | | | | | | |
| С | Term endowment \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | | | | | | | | | |
| 3a | Are there endowment funds not in the possession | of the ora | anization th | hat are held | and admin | istered for the | | | | | |
| | organization by: | Ü | | | | | | | | Yes | No |
| | (i) unrelated organizations | | | | | | | | . 3a(i | | |
| | (ii) related organizations | | | | | | | | . 3a(ii | | _ |
| b | If "Yes" to 3a(ii), are the related organizations liste | ed as requir | red on Sch | edule R? | | | | | . 3b | | _ |
| 4 | Describe in Part XIV the intended uses of the organization | | | | | | | | | | |
| Pai | rt VI Land, Buildings, and Equip | | | | line 10. | | | | | | |
| | Description of investment | | a) Cost or ot | | | t or other | (a) | Accumulated | (d) D | ook valu | |
| | Description of investment | (4 | investn) | | | s (other) | ` ' | epreciation | (u) b | iok vait | ie. |
| 1a | Land | | , 2 3 | , | | 65,289 | | | | 6 | 5,289 |
| b | Buildings | | | | | 135,326 | | 135,326 | | | <u> </u> |
| c | Leasehold improvements | | | | | , | | , | | | |
| d | Equipment | | | | | 92,030 | | 92,030 | | | |
| e | Other | | | | | - , | | , | | | |
| | I. Add lines 1a through 1e. (Column (d) must eq | | 990. Part 1 | X. column (| 3). line 10 |)(c).) | | | | 6 | 5,289 |
| | (a) made ou | , 51111 | , . with | , - 2 | ,, | · · · · · · · · · · · · · · · · · · · | · · · | | | | <u> </u> |

| 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 valuat Cost or end-of-year mark | |
| (1) Financial d | lerivatives | | | |
| | Id equity interests | | | |
| (3) Other | | _ | | |
| (A) | | | | |
| (B) | | | | |
| (C) | | - | | |
| (D) | | - | | |
| (E) | | - | | |
| (F) | | - | | |
| (G) | | - | | |
| (H) | | - | | |
| | (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII | Investments - Program Related. | | | |
| i dit viii | | | (a) Mathad of valuat | · |
| | (a) Description of investment type | (b) Book value | (c) Method of valuat Cost or end-of-year mark | |
| (1) | | | - | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| Part IX | (b) must equal Form 990, Part X, col. (B) line 13.) | | | |
| rail ix | Other Assets. See Form 990, Part X, line | | | (h) Deek velve |
| (1) | (a |) Description | | (b) Book value |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| | nn (b) must equal Form 990, Part X, col. (B) line | | | |
| Part X | Other Liabilities. See Form 990, Part X, | | | |
| 1. | (a) Description of liability | (b) Amount | | |
| | ncome taxes | | _ | |
| (2) | | | _ | |
| (3) | | | | |
| (5) | | | _ | |
| (6) | | | | |
| (7) | | | | |
| (8) | | | | |
| (9) | | | | |
| (10) | | | | |
| (11) | | | | |
| | (b) must equal Form 990, Part X, col. (B) line 25.) | · | | |
| | | <u> </u> | | |

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

| Pai | Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta | teme | ents |
|-----------|---|------|------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | 3 | |
| 4 | Net unrealized gains (losses) on investments | 4 | |
| 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 | |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 10 | |
| | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per | | urn |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains on investments | - | |
| b | Donated services and use of facilities | _ | |
| C | Recoveries of prior year grants | - | |
| d | | - | |
| е 3 | Add lines 2a through 2d | 26 | |
| 3 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 3 | |
| | Investment expenses not included on Form 990, Part VIII, line 7b 4a | | |
| a b | Other (Describe in Part XIV.) | | |
| C | Add lines 4a and 4b | 40 | |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | 5 | |
| | Reconciliation of Expenses per Audited Financial Statements With Expenses | | |
| 1 | Total expenses and losses per audited financial statements | 1 | |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| а | Donated services and use of facilities | | |
| b | Prior year adjustments | | |
| С | Other losses | | |
| d | Other (Describe in Part XIV.) | | |
| е | Add lines 2a through 2d | 2€ |) |
| 3 | Subtract line 2e from line 1 | 3 | |
| 4 | 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 | | |
| b | Other (Describe in Part XIV.) | | |
| | Add lines 4a and 4b | 40 | |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | |
| | *t XIV Supplemental Information | | |
| | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete | | |
| | art to provide any additional information. | | |
| <u> p</u> | art to provide any additional information. | | |
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SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lies 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.

OMB No. 1545-0047

2010 Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

Inspection

Employer identification number

| IDAHO CATTLE ASSOCIAT | | | | | | 38416/ |
|---|----------------------|---------------------|---------------|-------------------------|--|-------------------------------|
| Part I Fundraising Activities | - | - | | wered "Yes" to Form | 990, Part IV, line 17 | 7. |
| Form 990-EZ filers are no | | | | | | |
| 1 Indicate whether the organization raised | d funds through ar | | | | | |
| a | | | | of non-government gra | nts | |
| b Internet and email solicitations | | f ∐ | | of government grants | | |
| c Phone solicitations | | g ⊔ | Special fun | draising events | | |
| d In-person solicitations | | | | | | |
| 2a Did the organization have a written or o | | | | | | |
| or key employees listed in Form 990, P | | | | _ | | es 🗌 No |
| b If "Yes," list the ten highest paid individu | als or entities (fur | ndraisers) pu | rsuant to ag | reements under which t | he fundraiser is | |
| to be compensated at least \$5,000 by t | he organization. | | | | | |
| | | 1 | | 1 | | , |
| (i) Name and address of individual | (ii) Activity | (iii) Did fund | | (iv) Gross receipts | (v) Amount paid to | (vi) Amount paid to |
| or entity (fundraiser) | | custody or contribu | | from activity | (or retained by) fundraiser listed in | (or retained by) organization |
| | | | 1 | | col. (i) | - |
| | | Yes | No | | | |
| 1 | | | | | | |
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| 2 | | | | | | |
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| 10 | | | | | | |
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| | | | | | | |
| Total | | | | | | |
| 3 List all states in which the organization is | registered or lice | nsed to solici | t contributio | ns or has been notified | t is exempt from | |
| registration or licensing. | | | | | | |
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b If "Yes," explain:

IDAHO CATTLE ASSOCIATION INC Schedule G (Form 990 or 990-EZ) 2010 82-0384167 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-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events CONVENTION GOLF TOURNAM NONE Add col. (a) through R (event type) (event type) (total number) col. (c)) е ٧ Gross receipts е n Less: Charitable u contributions Gross income (line 1 Cash prizes . D i Noncash prizes r е С Rent/facility costs t Е 7 Food and beverages Х p е Entertainment . . n s е Other direct expenses Direct expense summary. Add lines 4 through 9 in column (d) Net income summary. Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. Revenue (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue Direct 2 Cash prizes . . 3 Noncash prizes Expenses Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

Open to Public Inspection

Employer identification number

| IDAHO CATTLE ASSOCIATION INC | 82-0384167 |
|---|------------|
| 01. Form 990 governing body review (Part VI, line 11) | |
| or. Form 990 governing body review (Part VI, Time II) | |
| THE FORM 990 IS GIVEN TO THE BOARD FOR REVIEW PRIOR TO FILING WITH THE IRS. | |
| | |
| 02. CEO, executive director, top management comp (Part VI, line 15a) | |
| THE COMPENSATION OF THE EXECUTIVE DIRECTOR IS APPROVED BY THE BOARD AFTER AN ANALYSIS | S OF |
| COMPARATIVE SALARIES HAS BEEN ACHEIVED. | |
| | |
| 03. Other officer or key employee compensation (Part VI, line 15b | |
| SALARIES OF KEY EMPLOYEES AND OFFICERS ARE DETERMINED BY THE BOARD AFTER COMPARATIVE | |
| SALARY ANALYSIS. | |
| | |
| 04. Governing documents, etc, available to public (Part VI, line 19) | |
| | |
| GOVERNING DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. | |
| | |
| 05. Explanation of other changes in net assets or fund balances (Part XI, line 5) | |
| ROUNDING -1 | |
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| | 000 T | | Exempl Organiza | eturn | OMB No. 1545-0687 | | | | | |
|---------------|---------------------------------|-------------|---|-----------------------|-------------------|---------------------------|-----------------|--------------|--|---------|
| Form | 990-T | _ | • | y tax under | | ` '' | | | 2010 | |
| | tment of the Treasury | For | calendar year 2010 or othe | | _ | 10-01, | | | to Public Inspection | |
| Intern | Check box if | | ending 09-30 , 20 | | | See separate instruc | ctions. | | c)(3) Organizations Or identification numbe | |
| ⁴∐ | address changed | | Name of organization (Chec | | nged an | see instructions.) | | | ees' trust, see instr | |
| | mpt under section | Print | Number, street, and room or su | | , ann in | otructions | | | | |
| | 501(C) (6) | or | | ite no. ii a P.O. box | c, see in | structions. | | 82-03841 | business activity cod | |
| | 408(e) 220(e) | Туре | PO BOX 15397 City or town, state, and ZIP cod | lo. | | | | | tructions.) | 103 |
| | 408A 530(a) | | | e | | | | | | |
| $\overline{}$ | 529(a) k value of all assets | F G | BOISE, ID 83715 | instructions \ | | | | | | |
| | nd of year | | roup exemption number (See | X 501(c) | cornor | ation 501(c) true | + 10 |)1(a) truct | Othor tr | |
| <u></u> | 261,347 | | heck organization type imary unrelated business acti | | corpor | ation 501(c) trus | 1 40 | 01(a) trust | Other tr | JSI |
| | | • | orporation a subsidiary in an | | r a parc | ent subsidiany controlled | Laroup? | | . Yes | X No |
| | = - | | | | a pare | ent-subsidiary controlled | gloup: | • • | . F res | V INO |
| | | | dentifying number of the parer | п согрогацоп. | | Tolonhono | number k | (000) 243 | 1615 | |
| Pai | he books are in care | | e or Business Incom | Δ | | | number • | | | |
| | Gross receipts or s | | e or business incom | <u> </u> | | (A) Income | (B) Expe | nses | (C) Net | |
| 1a b | Less returns and al | | | c Balance | 1c | | | | | |
| 2 | Cost of goods sold | | | | 2 | | | | | |
| 3 | Gross profit. Subtra | • | * | | 3 | | | | | |
| 3 4а | Capital gain net inc | | | | 4a | | | | | |
| +a b | . • | , | Part II, line 17) (attach Form | | 4b | | | | | |
| C | Capital loss deduct | | | • | 4c | | | | | |
| 5 | • | | and S corporations (attach state | | 5 | | | | | |
| 6 | Rent income (Sche | | | | 6 | | | | | |
| 7 | Unrelated debt-fina | , | | | 7 | | | | | |
| 8 | | | , and rents from controlled | | | | | | | |
| Ŭ | organizations (Sche | • | | | 8 | | | | | |
| 9 | • , | , | tion 501(c)(7), (9), or (17) | | | | | | | |
| | organization (Sche | | | | 9 | | | | | |
| 10 | • | , | come (Schedule I) | | 10 | | | | | |
| 11 | Advertising income | • | , , | | 11 | 57,970 | | 14,236 | 13, | 734 |
| 12 | ŭ | ` | | | 12 | 21,7212 | | | | |
| 13 | • | | ough 12 | | 13 | 57,970 | 4 | 14,236 | 13, | 734 |
| $\overline{}$ | | | t Taken Elsewhere | | for limi | | (Except for co | ontributions | | |
| | | | lirectly connected with the uni | | | | ` ' | | | |
| 14 | Compensation of o | fficers, di | irectors, and trustees (Schedi | ule K) | | | | . 14 | | |
| 15 | Salaries and wages | s | | | | | | . 15 | | |
| 16 | Repairs and mainte | enance | | | | | | . 16 | | |
| 17 | Bad debts | | | | | | | . 17 | | |
| 18 | Interest (attach sch | edule) | | | | | | . 18 | | |
| 19 | Taxes and licenses | | | | | | | . 19 | | |
| 20 | Charitable contribut | tions (Se | e instructions for limitation rul | les.) | | | | . 20 | | |
| 21 | Depreciation (attack | h Form 4 | 1562) | | | 21 | | | | |
| 22 | Less depreciation of | claimed c | on Schedule A and elsewhere | on return | | 22a | | 22b | | |
| 23 | Depletion | | | | | | | . 23 | | |
| 24 | Contributions to def | ferred co | mpensation plans | | | | | . 24 | | |
| 25 | Employee benefit p | rograms | | | | | | . 25 | | |
| 26 | Excess exempt exp | enses (S | Schedule I) | | | | | . 26 | | |
| 27 | Excess readership | costs (S | chedule J) | | | | | . 27 | 13, | 734 |
| 28 | , | | hedule) | | | | | | | |
| 29 | Total deductions | . Add lin | es 14 through 28 | | | | | . 29 | 13, | 734 |
| 30 | Unrelated business | taxable | income before net operating | loss deduction. S | Subtrac | t line 29 from line 13 | | . 30 | | |
| 31 | | | n (limited to the amount on lin | | | | | | | |
| 32 | | | income before specific deduc | | | | | . 32 | | |
| 33 | | | lly \$1,000, but see line 33 inst | | | | | . 33 | | |
| 34 | | | ble income. Subtract line 3 | | | • | | | | |
| | enter the smaller of | zero or | line 32 | <u></u> | | | | . 34 | | |

| Par | t III Tax Computation | | | | | |
|----------|--|--------------------------------------|--------------------------|---------------------------|--------------------|-----------------|
| 35 | Organizations Taxable as Corporation | s. See instructions for tax comp | utation. Controlled gr | oup | | |
| | members (sections 1561 and 1563) check | nere | ns and: | | | |
| а | Enter your share of the \$50,000, \$25,000, a (1) \$ (2) \$ | 1 | | ı | | |
| h | | | 50) \$ | | | |
| b | Enter organization's share of: (1) Addition (2) Additional 3% tax (not more than \$10 | | | | | |
| _ | | | | | 250 | |
| C | | | | | 35c | |
| 36 | Trusts Taxable at Trust Rates. See ins the amount on line 34 from: | · | | | 26 | |
| 27 | Proxy tax. See instructions | e schedule or Schedule D | | T T | 36 | |
| 37 38 | Alternative minimum tax | | | † | 37 | |
| 39 | Total. Add lines 37 and 38 to line 35c or | | | | 39 | |
| | t IV Tax and Payments | 30, Willianever applies | | | 39 | |
| 40a | Foreign tax credit (corporations attach Forn | 1118: trusts attach Form 1116) | 40a | | | |
| 40a b | ` ' | | | | | |
| C | General business credit. Attach Form 3800 | | | | | |
| d | Credit for prior year minimum tax (attach Fo | | | | | |
| e | Total credits. Add lines 40a through 40a | | | | 40e | |
| 41 | Subtract line 40e from line 39 | | | | 41 | |
| 42 | | Form 8611 Form 8697 | | | 42 | |
| 43 | Total tax. Add lines 41 and 42 | | | | 43 | |
| 44a | Payments: A 2009 overpayment credited t | | 1 1 | | | |
| b | 2010 estimated tax payments | | | | | |
| С | | | | | | |
| d | Foreign organizations: Tax paid or withheld | | | | | |
| е | Backup withholding (see instructions) . | , | | | | |
| f | Credit for small employer health insurance | | | | | |
| g | Other credits and payments: | Form 2439 | | | | |
| • | Form 4136 | Other | Total ▶ 44g | | | |
| 45 | Total payments. Add lines 44a through | 14g | | | 45 | |
| 46 | Estimated tax penalty (see instructions). Ch | | | | 46 | |
| 47 | Tax due. If line 45 is less than the total of | f lines 43 and 46, enter amount | owed | | 47 | |
| 48 | Overpayment. If line 45 is larger than th | e total of lines 43 and 46, enter | amount overpaid . | ▶ [| 48 | |
| 49 | Enter the amount of line 48 you want: Cr | edited to 2011 estimated tax | • | Refunded • | 49 | |
| Par | t V Statements Regarding Co | ertain Activities and Oth | er Information | (see instructions) | | |
| 1 | At any time during the 2010 calendar y | ear, did the organization have | an interest in or a si | gnature | | Yes No |
| | or other authority over a financial account | nt (bank, securities, or other) ir | a foreign country? | | | |
| | If YES, the organization may have to file | e Form TD F 90-22.1, Report | of Foreign Bank and | | | |
| | Financial Accounts. If YES, enter the name | of the foreign country here |) | | | |
| 2 | During the tax year, did the organization re- | ceive a distribution from, or was it | the grantor of, or trans | feror to, a foreign trust | ? | |
| | If YES, see instructions for other forms the $$ | organization may have to file. | | | | |
| 3 | Enter the amount of tax-exempt interest rec | eived or accrued during the tax y | ear 🕨 \$ | | | |
| Sch | edule A - Cost of Goods Sold. | Enter method of inventory valua | ion | | | |
| 1 | Inventory at beginning of year | 1 6 | , , . | | 6 | |
| 2 | Purchases | 2 7 | Cost of goods sold | | | |
| 3 | Cost of labor | 3 | line 6 from line 5. Ent | er here and | | |
| 4a | Additional section 263A costs | | • | | 7 | |
| | (| 4a 8 | | n 263A (with respect to | | Yes No |
| b | | 4b | property produced or | acquired for resale) ap | oply | |
| _5 | Total. Add lines 1 through 4b | 5 | to the organization? | | | |
| ٥. | Under penalties of perjury, I declare that I have belief, it is true, correct, and complete. Decla | | | | | ge and |
| Sigr | | | | | May the IRS disc | uss this return |
| Here | | | EXECUTIVE DI | RECTOR | with the prepared | shown below |
| | Signature of officer | Date | Title | | (see instructions) | X Yes No |
| | Print/Type preparer's name | Preparer's signature | Date | Check self-employe | if PTIN | |
| Paid | James P Warr CPA | | | | P0002 | |
| Prepa | | RIS AND COMPANY | | | 82-0315594 | <u> </u> |
| | | KLIN STREET | | Phone no. | | |

| Description of property | | | | | | | | | |
|---|--|--|---------------------------------------|---|-------|---|--|---|--|
| (1) | | | | | | | | | |
| | | | | | | | | | |
| (0) | | | | | | | | | |
| | | | | | | | | | |
| (4) | | | | | | | | | |
| | 2. Rent received | d or accrued | | | | | | | |
| (a) From personal property (if the property is more than more than 50%) | | percentage of | rent for persona | I property (if the al property exceed on profit or income | | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) | | | |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| | | | | | | | | | |
| (4) | | _ | | | | | | | |
| Total | Tot | | | | | (b) Total deduction | s. | | |
| (c) Total income. Add totals of here and on page 1, Part I, line 6, | column (A) | <u>, </u> | | | | Enter here and on pa Part I, line 6, column | | | |
| Schedule E - Unrelated | Debt-Financed I | Income | (see instructi | ons) | | | | | |
| | | | 2 Gross in | ncome from or | | 3. Deductions directly cor | | | |
| 1. Description of de | ebt-financed property | | allocable to | debt-financed | (a) S | debt-financ | ed pro | (b) Other deductions | |
| | | | | | | (attach schedule) | | (attach schedule) | |
| <u>(1)</u> | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | | 6. Column 4 divided by column 5 | | | Gross income reportable column 2 X column 6) | 8. Allocable deductions (column 6 x total of column 3(a) and 3(b)) | | |
| | | | | % | | | | | |
| (1) | | | - | | | | | | |
| (2) | | | - | % | | | | | |
| (3) | | | | % | | | | | |
| (4) | | | | % | | | | | |
| Totals | | | | ▶ | | r here and on page 1, I, line 7, column (A). | | ter here and on page 1, rt I, line 7, column (B). | |
| Total dividends-received dedu | ictions included in c | olumn 8 . | | | | <u> </u> | | | |
| Schedule F - Interest, A | nnuities, Royalt | ies, and F | Rents Fro | m Controlle | ed O | rganizations (se | e ins | structions) | |
| | | | Controlled Org | | | , | | , | |
| Name of controlled organization | 2. Employer identification numb | 3. Net unr | elated income e instructions) | 4. Total of spe | | 5. Part of column 4 th included in the contro organization's gross in | lling | 6. Deductions directly connected with income in column 5 | |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Nonexempt Controlled Organization | ons | | | | | <u> </u> | | | |
| 7. Taxable Income | 8. Net unrelated (loss) (see insti | | | tal of specified yments made | | Part of column 9 that included in the controlli organization's gross inco | ng | 11. Deductions directly connected with income in column 10 | |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Totals | 1 | | | | | Add columns 5 and 10. Enter here and on page Part I, line 8, column (A) | | Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). | |

| Schedule G - Investment In | come of a Secti | on 501(| | | anization (s | ee instr | | | |
|--|---|--|----------------------|--|---|--|--------------------|---|--|
| 1. Description of income | 2. Amount of incor | me | direc | Deductions tly connected ch schedule) | 4. Set-asides (attach schedu | | and s | otal deductions et-asides (col. 3 plus col. 4) | |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | <u></u> | | | | | | | | |
| | Enter here and on p | - | | | | | | e and on page 1, | |
| Tarata | Part I, line 9, column | 1 (A). | | | | | Paπ I, Ilne | e 9, column (B). | |
| Totals ▶ Schedule I - Exploited Exer | nnt Activity Inc | ome Ot | hor Th | an Advertising | a Income (oc | o inotru | otiona) | | |
| Schedule 1 - Exploited Exel | | Jille, Ot | iici iii | an Auvertisini | j ilicollie (se | e instru | Clioris) | | |
| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7. | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4). | |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| | Enter here and on page 1, Part I, line 10, col. (A). | Enter here page 1, line 10, o | Part I, | | | | | Enter here and on page,1. Part II, line 26. | |
| Totals | · | | | | | | | | |
| Schedule J - Advertising In | | | _ | | | | | | |
| Part I Income From Per | riodicals Report | ed on a | Consc | plidated Basis | | | | T | |
| 1. Name of periodical | 2. Gross advertising income | 3. Di advertisir | | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | 6. Readership costs | | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). | |
| (1) | | | | | | | | | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Totals (carry to Part II, line (5)) . | · | | | | | | | | |
| Part II Income From Pe | | ted on a | a Sepa | rate Basis (Fo | or each periodical lis | sted in F | Part II, fill in o | columns | |
| 2 through 7 on a line-by | y-line basis.) | | | | | | | | |
| 1. Name of periodical | 2. Gross advertising income | 3. Di advertisir | | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | | eadership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). | |
| (1) LINE RIDER | 57,970 | | 44,236 | 13,734 | 26,135 | | 56,909 | 13,734 | |
| (2) | | | | | | | | | |
| (3) | | | | | | | | | |
| (4) | | | | | | | | | |
| Totals from Part I | Enter here and on | Enter here | and an | | | | | Enter here and | |
| Totale Down II (lines 4.5) | page 1, Part I, line 11, col. (A). | page 1, l line 11, d | Part I, col. (B). | | | | | on page 1, Part II, line 27. | |
| Totals, Part II (lines 1-5) Schedule K - Compensatio | n of Officers Di | | 44,236 and T | rustees (secir | nstructions) | | | 13,734 | |
| Schedule K - Compensatio | ii di Ollicers, Di | iectors, | anu i | iustees (see ii | 3. Percent of | Τ. | 0 11 | | |
| 1. Name | | | : | 2. Title | time devoted to business | | | on attributable to d business | |
| (1) | | | | | | % | | | |
| (2) | | | | | | % | | | |
| (3) | | | | | | % % | | | |
| (4) Total. Enter here and on page 1. Page 1. | art II line 14 | | | | <u> </u> | /0 | | | |

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

OMB No. 1545-1150

2008

Open to Public Inspection

| | | the Treasury | | assets less The organization may l | than \$2,500,000 a | at the end of the year n | nay use this fo fu state record | 0m. Iina requireme | ante | | Inspection | | |
|---|-------------|--|----------------------|---|--------------------|--------------------------|------------------------------------|-----------------------|-------------------|------------------|---------------------------|------------|--|
| Intern | al Reven | nue Service | | | have to use a cop | 10-01 , | | | J1150, | 09-30 | , 20 09 | - | |
| _ | | | year, C | or tax year beginning C Name of organization | | | | 27.21.19 | DEmploy | | lification number | | |
| | | pplicable: | Picase | IDAHO CATTLE ASS | CCTATTON | TNC | | | | -03841 | | | |
| 二 | ddress ch | - T | use IRS abel or | Number and street (or P | | | address) | Room/suite | E Teleph | one nun | nber | | |
| = | ame cha | nge | print or | Transportation and active to | .0 | | | | | | | | |
| _ | itiai retur | | ype. See | PO BOX 15397 | | | | | (2 | 08) 343 | 3-1615 | | |
| 1 | ermination | 13 | Specific Instruc- | City or town, state or co | umtreand ZIP + 4 | | | .I | F Group | Exempt | ion | | |
| | mended (| retuiii | ione | BOISE, ID 83715 | • | | | | | | _ | | |
| A | ppiicatior | n pending | | izations and 4947(a)(1 | nonexempt | charitable trusts | must attac | h G | Accounting m | ethod: | Cash X Accrua | Ī | |
| • | 000 | | | mpleted Schedul (Fo | | | | | Other (specify | | | | |
| | | | | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | | | | | rganization is not | | |
| 1 V | /ebsite | . • | | | | | | 1 | | | nedule B (Form 990, | | |
| | | | eck or | nly one) - X 501(c) (| insert | no.) 4947(a) | (1) or | 527 | 990-EZ, or 99 | 0-PF). | | | |
| KC | heck | if the ord | anizat | ion is not a section 509 | (a)(3) supporti | ng organization an | | receipts a | re normally no | t more | than \$25,000. A retur | rn _ | |
| | | | | nization chooses to file | | | | | | | | | |
| IA | dd line: | s 5b 6b and 7 | 7b. to I | ine 9 to determine gross | receipts: if \$1 | ,000,000 or more, | file Form ! | 990 instead | of Form 990 | EZ ▶\$ | 410,74 | 4 | |
| 100000000000000000000000000000000000000 | rt I | Povonuo | Evr | enses, and Chang | nes in Net | Assets or Fun | d Balan | ces (Se | e the instruct | ons for | Part I.) | _ | |
| | 1 | Contributions | . aiffs. | grants, and similar amo | unts received | | | | | 1 | 32,02 | 22 | |
| | 2 | Program serv | rice rev | venue including governn | nent fees and | contracts • • • | | | | 2 | 8,14 | 16 | |
| | 3 | Membership | dues a | nd assessments | . . | | | | | 3 | 220,41 | 2 | |
| | 4 | Investment in | | | | | | | | 4 | 2,77 | 73 | |
| | | | | sale of assets other tha | n inventory | | 5a | - | | | | | |
| | b | Less: cost or | other I | basis and sales expense | es • • • • • | | • • • 5b | | | | | | |
| R e | C | b Less; cost or other basis and sales expenses · · · · · · · · · · · · · · · · · · | | | | | | | | | | | |
| | 6 | | | ities (complete applicable par | | | | | | | | | |
| v e | | Gross revenu | | | (| of contributions | | | | | | | |
| n | - | reported on li | | *************************************** | | | • • • 6a | | 79,921 | | | | |
| u e | b | | | es other than fundraisin | g expenses | | 6b | | 72,583 | | | | |
| | | | |) from special events an | | | | SCHG | | 6c | 7,33 | 38 | |
| | | | | ntory, less returns and a | | | | | | | | | |
| | | | | sold · · · · · · · | | | 7b | | | | | | |
| | С | Gross profit of | r (loss |) from sales of inventor | / (Subtract line | 7b from line 7a) | | | | 7c | | | |
| | 8 | Other revenu | e (des | cribe > STM141 | | | | |) | 8 | 67,47 | | |
| | 9 | Total revenu | e. Ad | d lines 1, 2, 3, 4, 5c, 6c, | 7c, and 8 • • | | | | • • • • • | 9 | 338,16 | 51 | |
| | 10 | Grants and si | imilar a | amounts paid (attach sc | hedule) | | | | | 10 | | | |
| E | 11 | Benefits paid | to or f | or members • • • • | | | | • • • • • | | 11 | | | |
| х | 12 | Salaries, othe | er com | pensation, and employe | e benefits 🔸 | | | | | 12 | 94,46 | | |
| p e | 13 | Professional | fees a | nd other payments to inc | dependent con | tractors · · · · | <i></i> | | | 13 | 22,38 | | |
| n | 14 | Occupancy, re | ent, uti | ilities, and maintenance | | | | | | 14 | 24,41 | | |
| s e | 15 | Printing, publ | ication | s, postage, and shipping | g • • • • • | | | | | 15 | 53,65 | | |
| S | 16 | Other expens | es (de | escribe > STM130 | | | | |) | 16 | 140,18 | | |
| | 17 | Total expens | ses. A | dd lines 10 through 16 | | | | • • • • • | • • • • • | 17 | 335,09 | | |
| Α | 18 | Excess or (de | eficit) f | or the year (Subtract line | e 17 from line ! | 9) • • • • • • | | | | 18 | 3,06 | <u> </u> | |
| NS | 19 | Net assets or | fund l | balances at beginning of | f year (from lîn | e 27, column (A)) | (must agre | e with | | | 205.00 | 00 | |
| Ns e e t t | | end-of-year fi | gure re | eported on prior year's r | eturn) · | | | | | 19 | 206,88 | | |
| L t | 20 | Other change | es in ne | et assets or fund balanc | es (attach exp | lanation) • • • • | | | · STM104 | 20 | | 53) | |
| | 21 | Net assets or | fund I | palances at end of year. | Combine lines | s 18 through 20 | | | | 21 | 209,09 | <u>, T</u> | |
| Pa | rt II | Balance | She | ets. If Total assets or | | ın (B) are \$2,500,0 | 000 or mor | | | | | | |
| | | | | (See the instructions for | r Part II.) | | | | A) Beginning of) | | (B) End of year 147,19 | 00 | |
| 2 2 | Cash | i, savings, and | invest | tments | • • • • • • | | | · • | | 124 22 | | | |
| 23 | | | | amed 2.1 | | | | ` | | 924 23 364 24 | | 01 | |
| 24 | Othe | r assets (d esc | ribe 🕨 | STM131 | | | | ~' | | 412 25 | | | |
| 25 | | | | amat 22 | | | | `, | | 530 26 | | | |
| 26 | | l liabilities (de | | | /D\ man== | - with line 24) | | | | 882 27 | | | |
| 27 | net a | assets or tunc | palar | nces (line 27 of column | (D) must agre | = WHII HIE ∠1) * | | - | ~~~, | | | | |

| Pa What Des des 28 | Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others.) | | | | | |
|--------------------------------|---|--|--|--|------------|--|
| 29 | (Grants \$) If this am | nount includes foreign grants | s, check here •••• | · · · · > [] | 28a | 231,865 |
| 30 | (Grants \$) If this arr | nount includes foreign grants | s, check here · · · · | · · · · > [] | 29a | |
| 31 | Other program services (attach schedule) · · · · · · | nount includes foreign grants | | | 30a 31a | |
| 32 | Total program service expenses (add lines 28a through | ı 31a) • • • • • • • • • • | | > | 32 | 231,865 |
| | art IV List of Officers, Directors, Trustees, and Key | y Employees. List each one | e even if not compensa | ted. (See the ins | | |
| | (a) Name and address | (b) Title and average hours per week devoted to position | (c) Compensation (if not paid, enter -0) | (d) Contributions employee benefit pl deferred compens | ans & | (e) Expense account and other allowances |
| | DMAS MCDONNELL | EXEC DIRECTOR | 22,917 | | a | o |
| | BOX 15397 BOISE ID, 83715 JRA SECHIER | ACCOUNTING | 22,327 | | | |
| | BOX 15397 BOISE ID, 83715 | 40 | 20,668 | | a | o |
| | | | | | | |
| | | | | | | |
| | | | | | | Form 200 F7 (2008 |

| Pai | 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 | 33 | | <u>X</u> |
| 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 | 34 | | <u>X</u> |
| 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. | | | |
| а | Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, | | | l |
| | and proxy tax requirements? · · · · · · · · · · · · · · · · · · · | 35a | X | |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 35b | X | |
| 36 | Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," | | | ı |
| | complete applicable parts of Schedule N · · · · · · · · · · · · · · · · · · | 36 | | X |
| 37 a | Enter amount of political expenditures, direct or indirect, as described in the instructions · · · · ▶ 37a | | | |
| b | Did the organization file Form 1120-POL for this year? | 37b | | X |
| 38 a | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were | | | |
| | any such loans made in a prior year and still unpaid at the start of the period covered by this return? | 38a | | X |
| b | If "Yes," complete Schedule L, Part II and enter the total amount involved • • • • • • • • • • • • • • • • • • • | | | |
| 39 | 501(c)(7) organizations. Enter: | | | |
| | Initiation fees and capital contributions included on line 9 · · · · · · · · · · · · · · · · · · | | | |
| | Gross receipts, included on line 9, for public use of club facilities · · · · · · · · · · · · · · · · · · · | | | |
| 40 a | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: | | | |
| | section 4911 ▶; section 4912 ▶; section 4955 ▶ | | | |
| b | Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction | | | |
| | during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule | | | |
| | L, Part i · · · · · · · · · · · · · · · · · · | 40b | | |
| C | Enter amount of tax imposed on organization managers or disqualified persons during | | | |
| | the year under sections 4912, 4955, and 4958 | | | |
| d | Enter amount of tax on line 40c reimbursed by the organization | | | |
| е | All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter | 400 | | 7 |
| | transaction? If "Yes," complete Form 8886-T | 40e | <u> </u> | <u>X</u> |
| 41 | List the states with which a copy of this return is filed. The books are in care of DIDAHO CATTLE ASSOCIATION Telephone no. 208-3 | 1 | 61 E | |
| 42 a | The books are in care of P 157110 Care 110 Care | | 013 | |
| | Localed at Pro Box 1997, Box 1997, 12 | | | |
| þ | At any time during the calendar year did the organization have an interest in or a signature or other authority | | Yes | No |
| | over a financial account in a foreign country (such as a bank account, securities account, or other financial | 42b | .00 | X |
| | account)? | 720 | | 7. |
| | If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank | | | |
| | and FinancialAccounts. | | | |
| _ | At any time during the calendar year, did the organization maintain an office outside of the U.S.? • • • • • • • • • • • • • • • • • • • | 42c | | Х |
| C | If "Yes," enter the name of the foreign country: | | J | |
| 43 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-Check here | | | . \square |
| 40 | and enter the amount of tax-exempt interest received or accrued during the tax year • • • • • • • • • • • • • • • • • • • | | · | |
| | and enter the amount of tax-exempt interest recorred or accorded during the tax year | | | |
| | | - 1 | Yes | No |
| 44 | Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of | | | |
| ~ ~ | Form 990-EZ · · · · · · · · · · · · · · · · · · · | 44 | sapanennii talii | X |
| 45 | Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If | | | |
| .,5 | "Yes," Form 990 must be completed instead of Form 990-EZ | 45 | CONTROL OF THE PROPERTY OF | X |
| * | EEA F | orm 99 | 0-EZ | (2008) |

| | 70 LZ (2000) | | - All | (2)pinotions mus | st answer questions 46-49 | | | |
|---------------|---|---------------------------|--|-------------------------------|---|--------------|----------------------------------|----------|
| Part \ | and complete the tables for | or lines 50 and 51. | | | | | | · |
| 46 Di | id the organization engage in d | irect or indirect polit | ical campaign activities o | n behalf of or in oppo | sition to | | Yes | No |
| ca | andidates for public office? If " | Yes," complete Sch | edule C, Part I · · · · | | • • • • • • • • • • • | - 46 | ļ | <u> </u> |
| 4 7 Di | id the organization engage in lo | bbying activities? I | f "Yes," complete Schedu | ile C, Part II • • • • | | - 47 | | |
| 48 Is | the organization operating a so | chool as described i | n section 170(b)(1)(A)(ii)? | ? If "Yes," complete S | chedule E - · · · · · | · 48 | | |
| 49 a D | id the organization make any tr | ansfers to an exemp | ot non-charitable related | organization? • • • • | | - 49a | | |
| b If | "Yes," was the related organiza | ation(s) a section 52 | ?7 organization? • • • • | | | · 49b | | |
| 50 C | omplete this table for the five hi | ighest compensated | d employees (other than o | officers, directors, trus | stees and key employees) v | vho | | |
| e: | ach received more than \$100,0 | 00 of compensation | from the organization. If | there is none, enter' | 'None." | | | |
| | | , | - | | | | | |
| | (a) Name and address of each emplo | yee paid more | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans & deferred compensation | acc | Expense ount and allowance | t |
| | | | | | | | | |
| | | | | | | | | · |
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| | | | | | | | | |
| | | | | - | | | | |
| Total nu | ımber of other employees paid | over \$100,000 ► | | | | | | |
| 51 C | omplete this table for the five h | ighest compensated | d independent contractors | who each received i | more than \$100,000 of | | | |
| | ompensation from the organization | | | | | | | |
| • | , , , , , , , , , , , , , , , , , , , | | • | | | | | |
| | (a) Name and address of each inc | tenendent contractor pai | id more than \$100,000 | (b) Ty | pe of service | (c) Comp | ensation | 1 |
| | (a) Name and address of sast in | | | | | | | |
| | | | | 0. WWW | | | | |
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| | | | | | | | | |
| Total nu | umber of other independent cor | tractors each receive | ving over \$100,000 · · | · > | | | | |
| | Under penelting of positro | u I deciare that I have e | vamined this return, including a | companying schedules at | nd statements, and to the best of | my knowled | ge | |
| | and belief, it is true, come | ct, and complete. Decla | ration of preparer (other than o | fficer) is based on all infor | nation of which preparer has any | knowledge. | | |
| Sign | | | | | | | | |
| Here | Olymphys of a figure | | | | | | | |
| 11616 | THOMAS MCDONNE | LL, EXEC DIRE | CTOR | | | | | |
| | Type or print name and ti | | | | | | | |
| | | | | Date | Check if Preparer's le | dentifying N | o. (See | inst.) |
| Paid | Preparer's signature | | | | self- employed | - نو۰۰۰ر | , | , |
| | | WILSON HAR | RIS AND COMPANY | | EIN EIN | | | |
| Prepare | Firm's name (or yours | | NKLIN STREET | | - Mar-1 | | | |
| Use On | niy if self-employed), address, and ZIP+ 4 | | 83702 | | Phone no. ▶ 208-3 | 44-135 | 5 | |
| Max. 44 - | IRS discuss this return with th | , | | | | X Ye | | No |
| INIMA FLIE | S IL/O DISCUSS THIS LETOTH MITH TH | e hichard anomi a | DETE: GOO MONGOROM | FFA | | | | (2008) |

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

▶ To be completed by organizations described below

OMB No. 1545-0047

2008

Open to Public

Department of the Treasury Inspection ► Attach to Form 990 or Form 990-EZ. Internal Revenue Service 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-Aand B. Do not complete Part I-C. Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-Aand C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-Aonly. 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. Employer identification number Name of organization 82-0384167 IDAHO CATTLE ASSOCIATION, INC. To be completed by all organizations exempt under section 501(c) and section 527 organizations. See the instructions for Schedule C for details. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV. Part I-B To be completed by all organizations exempt under section 501(c)(3). See the instructions for Schedule C for details. Enter the amount of any excise tax incurred by the organization under section 4955 · · · · · · · · · ▶ \$ Enter the amount of any excise tax incurred by organization managers under section 4955 ⋅ ⋅ ⋅ ⋅ ⋅ ⋅ ⋅ ⋅ ▶ \$ 2 No No 🌅 If "Yes," describe in Part IV. To be completed by all organizations exempt under section 501(c), except section 501(c)(3). Part I-C See the instructions for Schedule C for details. Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (d) Amount paid from (e) Amount of political (b) Address (c) EIN (a) Name filing organization's contributions received and promptly and directly funds, if none, enter -0-. delivered to a separate political organization. If none, enter -0-

| | dule C (Form 990 or 990-EZ) 2008DARO CATTLE ASSOC | JIRITON, IN | | =04/->/0> 4b -4 \$ | 1-1 Famo 5700 | |
|---------|---|--------------------|--|-------------------------------------|---|--------------------------|
| Pa | rt II-A To be completed by organiza (election under section 501(h | tions exemp | t under section actions for Schedule | 501(c)(3) that fi C for details. | led Form 5/68 | |
| , | Check if the filing organization belongs to a | n affiliated group | 1 | | | |
| | | | | niv | | |
| | Check if the filing organization checked box | CA and minted | sortion provisions up | P-17. | (a) Filing | (b) Affiliated |
| | Limits on Lobby | ing Expenditure | es | | organization's | group totals |
| | (The term "expenditures" me | ans amounts p | aid or incurred.) | | totals | |
| | | | · lebbying\ | | | <u> </u> |
| la • | Total lobbying expenditures to influence public opi | | | | | |
| þ | Total lobbying expenditures to influence a legislati | | | | | |
| C | Total lobbying expenditures (add lines 1a and 1b) | | | | | |
| d | Other exempt purpose expenditures | | | | | |
| е | Total exempt purpose expenditures (add lines 1c a | | | | | |
| f | Lobbying nontaxable amount. Enter the amount from | om the following | table in both | | | |
| _ | columns. | | | | | |
| | If the amount on line 1e, column (a) or (b) is: Not over \$500,000 | The lobbying | j <mark>nontaxable amoun</mark> nount on line 1e. | tis: | | |
| ŀ | Over \$500,000 but not over \$1,000,000 | | 15% of the excess | over \$500,000. | | |
| ŀ | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus | 10% of the excess | over \$1,000,000. | | |
| ŀ | Over \$1,500,000 but not over \$17,000,000 | | 5% of the excess or | | | |
| - | Over \$17,000,000 | \$1,000,000. | | | | |
| | | | | | | |
| g | Grassroots nontaxable amount (enter 25% of line | | | | *************************************** | |
| h | Subtract line 1g from line 1a. Enter -0- if line g is r | | | | | |
| i | Subtract line 1f from line 1c. Enter -0- if line f is me | ore than line c • | | | | <u> </u> |
| j | If there is an amount other than zero on either line | 1h or line 1i, dic | I the organization file | Form 4720 reportin | g | |
| | section 4911 tax for this year? | | | | | Yes No |
| | 4-Y (Some organizations that m columns below. Se | ade a section 5 | Period Under Section 01(h) election do no | t have to complete | e all of the five | |
| | columns below. Se | e the instructio | ns for fines 2a tillot | igii 21 Of the matru | | |
| | Lobbyir | ng Expenditures | During 4e¥r Averag | ing Period | | |
| | Calendar year (or fiscal year | (a) 2005 | (b) 2006 | (c) 2007 | (d) 2008 | (e) Total |
| | beginning in) | (a) 2000 | (4)2 | (1, | , , | |
| | beginning in) | | | | | |
| 2a | Lobbying non-taxable amount | | 1 | | | |
| | Loboying tron toxeers and an | | | | | |
| b | Lobbying ceiling amount | | | | | |
| | (150% of line 2a, column (e)) | | | | | |
| С | Total lobbying expenditures | | | | | |
| d | Grassroot non-taxable amount | | | | | |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f | Grassroots lobbying expenditures | | | | | |
| | | | E6 | \ | Schedule C (F | Form 990 or 990-EZ) 2008 |

| | 5768 (election under section 501(h)). See the instructions for Schedule C for details. | (| a) | | (b) | |
|---------|--|--------------|------------|---|---|----|
| | | Yes | No | | Amoun | ıt |
| 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? · · · · · · · · · · · · · · · · · · · | | 84.000.3 | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? • • • • • • • | | | | | |
| C | Media advertisements? • • • • • • • • • • • • • • • • • • • | | | | <u> </u> | |
| d | Mailings to members, legislators, or the public? | | | | | |
| e | Publications, or published or broadcast statements? | | | | | |
| f | Grants to other organizations for lobbying purposes? | | | | | |
| | Direct contact with legislators, their staffs, government officials, or a legislative body? • • • • • • • • • • • • • • • • • • • | | | <u> </u> | *************************************** | |
| g h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? • • • • • • • • • • • • • • • • • • • | | | | | |
| _ | Other activities? If "Yes," describe in Part IV • • • • • • • • • • • • • • • • • • | | | | | |
| 1 | Total lines 1c through 1i · · · · · · · · · · · · · · · · · · | | | | | |
| j | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? • • • • • • • • • • • • • • • • • • • | | | | | |
| 2a h | If "Yes," enter the amount of any tax incurred under section 4912 | | | | | |
| þ | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 • • • • • • • • • • • • • • • • • • • | | | | | |
| ч С | 200 mm - 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | | | | |
| đ | | 501 <i>(</i> | c)/5) | or. | | |
| ra | To be completed by all organizations exempt under section 501(c)(4), section section 501(c)(6). See the instructions for Schedule C for details. | 301(| C)(S), | , 01 | | |
| ~~~ | 36CHOH 30 NC/(0): | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? • • • • • • • • • • • • • • • • • • • | | | 1 | , | Х |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? • • • • • • • • • • • • • • • • • • | | | 2 | ? | Х |
| 3 | Did the organization agree to carryover lobbying and political expenditures from the prior year? | | | 3 | , | T |
| Pа | rt III-B To be completed by all organizations exempt under section 501(c)(4), section | | | or | | |
| | section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR i | f Par | t ÌII-/ | ١. | | |
| | question 3 is answered "Yes," See Schedule C instructions for details. | | | | | |
| 1 | Dues, assessments and similar amounts from members · · · · · · · · · · · · · · · · · · · | | 1 | | | |
| 2 | Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of | | | | | |
| | political expenses for which the section 527(f) tax was paid). | | | | | |
| а | Current year · · · · · · · · · · · · · · · · · · · | • • | 2 a | | | |
| b | Carryover from last year · · · · · · · · · · · · · · · · · · · | • • | 2b | | | |
| С | Total · · · · · · · · · · · · · · · · · · · | | 2 c | | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | 3 | | | |
| 4 | if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess | | | | | |
| | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political | | | | | |
| | expenditure next year? • • • • • • • • • • • • • • • • • • • | • • | 4 | | | |
| 5 | Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) · · · · · · · · · · · · · · · · · · | • • | 5 | | | |
| Pai | rt IV Supplemental Information | | | | | |
| om | plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, lin | e 1i. | | | | |
| | , complete this part for any additional information. | | | | | |
| , | | | | | | |
| | | | | | *************************************** | |
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| | | | | *************************************** | ***** | |
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answers "to Form 990, Part IV

lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

2008

Open to Public Inspection

Employer identification number

Name of the organization IDAHO CATTLE ASSOCIATION, INC. 82-0384167 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants a Mail solicitations f Solicitation of government grants Email solicitations Phone solicitations g X Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees X No or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities? 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. Form 990-EZ filers are not required to complete this table. (vi) Amount paid to (iii) Did fundraiser have (iv) Gross receipts (v) Amount paid to (i) Name of individual (ii) Activity custody or control of from activity (or retained by) (or retained by) or entity (fundraiser) fundraiser listed in organization contributions? col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. Idaho,

| | rt II | Fundraising Events. Cor more than \$15,000 on Form 99 | nplete if the organization and organizat | answered "Yes" to Form 9 with gross receipts greate | 90, Part IV, line 18, or reported than \$5.000. | orted |
|------------------|--------|---|--|---|---|--|
| | | | (a) Event #1 CONVENTION | (b) Event #2 GOLF TOURNAM | (c) Other Events | (d) Total Events Add col. (a) through |
| R | | | (event type) | (event type) | (total number) | col. (c) |
| e v | 1 | Gross receipts · · · · · · · · | 60,114 | 19,807 | | 79,921 |
| e n | 2 | Less: Charitable | | , | | · · · · · · · · · · · · · · · · · · · |
| u e | _ | contributions · · · · · · · | | | | |
| | 3 | Gross revenue (line 1 | | | | |
| | | minus line 2) · · · · · · · · | 60,114 | 19,807 | | 79,921 |
| D i r e | 4 | Cash prizes · · · · · · · · · | | | | |
| c t | 5 | Non-cash prizes · · · · · · | | | | |
| E x | 6 | Rent/facility costs • • • • • • • • | | | | |
| p e n | 7 | Other direct expenses · · · · · [| 61,475 | 11,108 | | 72,583 |
| s [| 8 | Direct expenses summary Add line | e 4 through 7 column (d) | | | (72,583) |
| e s | 9 | Net income summary Combine line | | | | 7,338 |
| Pa | rt III | | | | | <u> </u> |
| | | than \$15,000 on Form 990-EZ | | | | |
| R e v | | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (Add col. (a) through col. (c)) |
| Revenue | 1 | Gross revenue | | | | |
| D r e c | 2 | Cash prizes · · · · · · · · · | | | | |
| t E | 3 | Non-cash prizes · · · · · · | | | | |
| rect Expenses | 4 | Rent/facility costs | | | | |
| ě | 5 | Other direct expenses | | | | |
| | 6 | Volunteer labor · · · · · · | Yes % No | Yes % | Yes % | |
| Ì | 7 | Direct expense summary Add lines | 2 through 5 in column (d) | | • | () |
| | 8 | Net gaming income summary Com | bine lines 1 and 7 in colun | nn (d) | | |
| 9 | Ent | er the state(s) in which the organiza | tion operates gaming activ | vities: | | Yes No |
| a | | he organization licensed to operate | | | * * * * * * * * * * * * | • • • 9a |
| b | | No," Explain: | | | | |
| 10a | We | re any of the organization's gaming | licenses revoked, suspen | ded or terminated during t | he tax year? • • • • • | · · · · 10a |
| | | fes," Explain: | | | | |
| 11 12 | | es the organization operate gaming and the organization a grantor, beneficiar | | | or other entity | · · · · 11 X |

12

formed to administer charitable gaming?

| Sched | tule G (Form 990 or 990-EZ) 2008 IDAHO CATTLE ASSOCIATION, INC. | 02-0304107 | μ, | age 3 |
|-------|---|-----------------|-----|-------|
| | | | Yes | No |
| 13 | Indicate the percentage of gaming activity operated in: | | | |
| а | The organization's facility | % | | |
| b | An outside facility • • • • • • • • • • • • • • • • • • • | % | | |
| 14 | Provide the name and address of the person who prepares the organization's gaming/special events books | | | |
| | and records: | | | |
| | | | | |
| | Name ▶ IDAHO CATTLE ASSOCIATION | | | |
| | | | | |
| | Address ▶ PO BOX 15397 BOISE, ID 83715 | | | |
| | | | | |
| 15a | Does the organization have a contract with a third party from whom the organization receives gaming | | | |
| | revenue? • • • • • • • • • • • • • • • • • • • | 15a | | |
| þ | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the | | | |
| | amount of gaming revenue retained by the third party ▶ \$ | | | |
| C | If "Yes," enter name and address: | | | |
| | | | | |
| | Name • | | | |
| | | | | |
| 40 | Address • | | | |
| 16 | Gaming manager information: | | | |
| | Name▶ | | | |
| | Name | | | |
| | Gaming manager compensation ▶ \$ | | | |
| | Carning manager compensations | | | |
| | Description of services provided | | | |
| | | | | |
| | Director/officer Employee Independent contractor | | | |
| | | | | |
| 17 | Mandatory distributions | | | |
| а | Is the organization required under state law to make charitable distributions from the gaming proceeds to | | | |
| | retain the state gaming license? • • • • • • • • • • • • • • • • • • • | • • • • • • 17a | | |
| b | Enter the amount of distributions required under state law distributed to other exempt organizations or spent | | | |
| | in the organization's own exempt activities during the tax year ▶ \$ | | | |
| | | | | |

Federal Supporting Statements 2008 Name(s) as shown on return FEIN

FORM 990EZ, PART I, LINE 16 OTHER EXPENSES SCHEDULE 2

| DESCRIPTION | AMOUNT |
|----------------------------|---------|
| NATIONAL DUES | 21,820 |
| OFFICE EXPENSE | 22,470 |
| EQUIPMENT RENT AND REPAIRS | 6,079 |
| DUES AND SUBSCRIPTIONS | 961 |
| MEMBERSHIP RECRUITMENT | 1,097 |
| DEPRECIATION | 126 |
| PROGRAMS | 87,631 |
| TOTAL | 140,184 |

FORM 990EZ, PART II, LINE 24 OTHER ASSETS SCHEDULE 3

| | BEGINNING | |
|--------------------------------------|--------------|-------------|
| DESCRIPTION | OF YEAR | END OF YEAR |
| ACCOUNTS RECEIVABLE PREPAID EXPENSES | 23,335 29 | 501 |
| TOTAL | 23,364 | 501 |

FORM 990EZ, PART II, LINE 26 OTHER LIABILITIES SCHEDULE 3

| | BEGINNING | |
|------------------|-----------|-------------|
| DESCRIPTION | OF YEAR | END OF YEAR |
| ACCOUNTS PAYABLE | 34,530 | 3,907 |
| TOTAL | 34,530 | 3,907 |

| | Federal Supporting Statements | 2008 |
|----------------------------|-------------------------------|------|
| Name(s) as shown on return | | FEIN |

FORM 990EZ, PART I, LINE 8 OTHER REVENUES SCHEDULE 2

| DESCRIPTION | AMOUNT |
|-------------------------|--------|
| RENT | 14,498 |
| PUBLICATION ADVERTISING | 47,887 |
| MISCELLANEOUS | 5,085 |
| TOTAL | 67,470 |

FORM 990EZ, PART I, LINE 20 OTHER CHANGES IN NET ASSETS SCHEDULE

| I | DESCRIPTION | AMOUNT |
|---|-------------------------|--------|
| | PRIOR PERIOD ADJUSTMENT | (853) |
| | TOTAL | (853) |

Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

OMB No. 1545-1150

2009

Open to Public Inspection

| Department of the Treasury Internal Revenue Service Inspection The organization may have to use a copy of this return to satisfy state reporting requirements. | | | | | | inspection | | | | | | | |
|--|---|------------------|----------------------|------------------------------|-------------------------------|------------------|---------------|-----------|---|---------------------|---------------------------------|---------------------|--|
| | | | vear. o | r tax year beginning | | | , 2009, ar | | | | 09-30 | ,2010 | |
| _ | | | ,, | C Name of organization | | <u> </u> | <u> </u> | | | DEmploy | DEmployer identification number | | |
| | Address change | | | | | | | | | 82- | -0384 | 167 | |
| == | me char | | use IRS label or | Number and street (or P.0 | D, box, if mail is not delive | ared to street a | ddress) | Room/s | suite | E Teleph | one nur | nber | |
| \equiv | tial retun | | print or type. | | | | | | | | | | |
| | rminated | | See | PO BOX 15397 | | | | | | (20 | 208) 343-1615 | | |
| Common Co | nended r | 1 | Specific Instruc- | City or town, state or cour | ntryand ZIP + 4 | | | | | F Group | Exemp | tion | |
| | | pending | tions. | BOISE, ID 83715 | 5 | | | | | Numbe | er 🕨 | | |
| | Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach G Accounting | | | | | | | | ccounting M | ethod: | Cash X Accrual | | |
| • | | (- /(- / | | mpleted Schedul& (F | | | | | 0 | ther (specify |) > | | |
| | | | | | | | | | н с | heck ► X | if the | organization is not | |
| ı w | ebsite | : ▶ | | | | | | | re | equired to att | ach Scl | hedule B (Form 990, | |
| | | | check o | nly one) - X 501(c) (| 6) ◀ (insert no.) |) 4947(| a)(1) or | 527 | 9 | 90-EZ, or 99 | 0-PF). | | |
| K C | neck D | if the or | ganizat | ion is not a section 50 | 9(a)(3) supporting or | rganization a | and its gro | ss recei | pts are | normally no | t more | than \$25,000. A | |
| Fo | orm 990 | 0-EZ or Form | 990 re | turn is not required, bu | it if the organization | chooses to f | file a returr | ı, be su | re to file | e a complete | return. | | |
| L A | dd lines | s 5b. 6b. and | 7b, to I | ine 9 to determine gro | ss receipts; if \$500,0 | 000 or more, | file Form | 990 inst | ead of | Form 990-E | z ▶ \$ | 393,653 | |
| 20002250200000 | rt I | Revenue | e Eyr | enses, and Char | nges in Net Ass | ets or Fu | nd Bala | nces | (See | the instructi | ons for | Part I.) | |
| 3 (4) | 1 | Contributions | s. aifts. | grants, and similar an | nounts received • • | | | | | | 1 | 7,148 | |
| | 2 | Program ser | vice rev | venue including govern | nment fees and conti | racts • • • | | | | | 2 | 11,303 | |
| | 3 | Membership | dues a | ind assessments • • | | . . | | | | | 3 | 218,374 | |
| | 4 | Investment is | | | | . . | | | | | 4 | 2,881 | |
| | | Gross amou | nt from | sale of assets other th | nan inventory | | 5 | a | | | | | |
| | | | | basis and sales expen | | | | | | | | | |
| R | С | Gain or (loss |) from | sale of assets other th | an inventory (Subtra | ct line 5b fro | m line 5a) | | | | 5c | | |
| e | 6 | | | ities (complete applicable p | | | | | | | | | |
| e e | | | | including \$ | _ | ntributions | • - | | | | | | |
| n | | reported on I | line 1) | | | . . | 6 | a | | 86,157 | | | |
| u e | b | | | es other than fundrais | | | | b | | 82,690 | | | |
| | C | Net income | or (loss |) from special events a | and activities (Subtra | act line 6b fro | om line 6a) |) (| | | 6c | 3,467 | |
| 1 | | | | ntory, less returns and | | | | | | | | | |
| | b | Less: cost of | f aoods | sold · · · · · · | | . . | 71 | b | | | | | |
| | C | Gross profit | or (loss |) from sales of invento | ory (Subtract line 7b | from line 7a |) • • • • • | | | | 7c | | |
| ļ | 8 | Other revenu | ue (des | cribe > STM141 | | | | | |) | 8 | 67,790 | |
| | 9 | Total revenu | ue. Ad | d lines 1, 2, 3, 4, 5c, 6 | c, 7c, and 8 • • • • | | | | | • • • • | 9 | 310,963 | |
| | 10 | Grants and s | similar a | amounts paid (attach s | chedule) | | | | | | 10 | | |
| _ | 11 | Benefits paid | d to or f | or members · · · · | | . . | | | | | 11 | | |
| E | 12 | Salaries, oth | er com | pensation, and employ | yee benefits · · · · | | | | | | 12 | 110,296 | |
| p e | 13 | Professional | fees a | nd other payments to i | independent contract | tors · · · | | | | | 13 | 5,348 | |
| n | 14 | Occupancy | rent. uti | ilities, and maintenanc | æ | | | | | | 14 | 33,196 | |
| s e | 15 | Printing, pub | lication | s, postage, and shippi | ing • • • • • • • | . . | | | | | 15 | 48,353 | |
| s | 16 | | | | | | | | | | 16 | 106,413 | |
| | 17 | Total expen | ses. A | escribe | 3 | | | | | • • • • | 17 | 303,606 | |
| | 18 | Excess or (d | leficit) f | or the year (Subtract li | ine 17 from line 9) • | | | | | | 18 | 7,35 | |
| A Ns e e t t | 19 | Net assets of | r fund l | balances at beginning | of year (from line 27 | ', column (A) |) (must ag | ree with | 1 | | | | |
| e s | | end-of-vear | figure r | eported on prior year's | return) • • • • • | | | | | | 19 | 209,091 | |
| tt | 20 | Other chang | es in no | et assets or fund balar | nces (attach explana | tion) • • • • | | | , | STM104 | 20 | 12: | |
| s | 21 | Net assets o | r fund l | balances at end of yea | ar. Combine lines 18 | through 20 | | | | · · · · > | 21 | 216,570 | |
| Pa | rt II | Balance | | | on line 25, column (E | 3) are \$1,250 | 0,000 or m | ore, file | Form 9 | 990 instead | of Form | 990-EZ. | |
| | | | | (See the instructions | for Part II.) | | | | | Beginning of ye | ar | (B) End of year | |
| 22 | Cash | , savings, and | d invest | tments · · · · · · | | | | | | 147, | 199 22 | | |
| 23 | 1 65 | | | | | 298 23 | | | | | | | |
| 24 | 24 Other assets (describe ► STM131) 212,9 | | | | | | 501 24 | | | | | | |
| 25 | | | | | | <u>1</u> | | | | | | | |
| 26 | | l liabilities (d | | | | | |) | *************************************** | | 907 26 | | |
| 27 | | | | nces (line 27 of colum | n (B) must agree wit | th line 21) | | | | 209, | 091 27 | 216,570 | |

| Wh De: ma | art III Statement of Program Service Act at is the organization's primary exempt purpose? PROP scribe what was achieved in carrying out the organizationer, describe the services provided, the number of petch program title. | Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; option for others.) | | | | |
|--|--|---|------------------------|--|---------------|--|
| 28 | PROMOTE THE CATTLE INDUSTRY | | | | | |
| 29 | (Grants \$) If this | amount includes foreign gran | ts, check here · · · · | •••• | 28a | 227,201 |
| | (Grants \$) If this | amount includes foreign grant | ts, check here • • • • | •••• | 29a | |
| 30 | | | | | | |
| 31 | Other program services (attach schedule) · · · · · | | | | 30a | |
| | | amount includes foreign grant | | | 31a | 227 201 |
| * | Total program service expenses (add lines 28a thro | | | | 32 | 227,201 |
| | List of Officers, Directors, Trustees, and (a) Name and address | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions employee benefit pl deferred compens | s to ans & | (e) Expense account and other allowances |
| THO | OMAS MCDONNELL | EXEC DIRECTOR | Unit V., | dojerioù comporto | | |
| | BOX 15397 BOISE ID, 83715 | 40 | 17,628 | | O | 0 |
| LA | URA SECHLER | ACCOUNTING | | | | _ |
| | BOX 15397 BOISE ID, 83715 | 40 | 28,228 | | 0 | 0 |
| | ATT PRESCOTT | EXECUTIVE DIREC | 30,000 | | , | 0 |
| | BOX 15397 BOISE ID, 83715 | EXECUTIVE DIREC | 28,000 | | | |
| | RL GLEED BOX 15397 BOISE ID, 83715 | 0 | 10,000 | | d | o |
| - Marie Mari | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| Pa | Other Information (Note the statement requirements in the instructions for Part V.) | | Yes | No |
|------------|--|----------|--|----|
| 33 | Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed | | | |
| 33 | description of each activity | 33 | | х |
| 34 | Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of | <u> </u> | | |
| 0-1 | the changes · · · · · · · · · · · · · · · · · · · | 34 | | Х |
| 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 why the organization did not report the income on Form 990-T. | | | |
| а | Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section | | THE STATE OF THE S | |
| | 6033(e) notice, reporting, and proxy tax requirements? | 35a | Х | |
| ь | If "Yes," has it filed a tax return on Form 990-T for this year? | 35b | Х | |
| 36 | Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets | | | |
| | during the year? If "Yes," complete applicable parts of Schedule N | 36 | | Х |
| 37 a | Enter amount of political expenditures, direct or indirect, as described in the instructions · · · · ▶ 37a | | | |
| ь | Did the organization file Form 1120-POL for this year? | 37b | | Х |
| 38 a | Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were | | | |
| | any such loans made in a prior year and still outstanding at the end of the period covered by this return? | 38a | | X |
| ь | If "Yes," complete Schedule L, Part II and enter the total amount involved | | | |
| 39 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on line 9 · · · · · · · · · · · · · · · · · · | | | - |
| | Gross receipts, included on line 9, for public use of club facilities | | | |
| 40 a | Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: | | | |
| | section 4911 ▶; section 4912 ▶; section 4955 ▶ | | | |
| b | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit | | | |
| | transaction during the year or is it 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 | 40b | | L |
| С | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on | | | |
| | organization managers or disqualified persons during the year under sections 4912, | | | |
| _ | 4955, and 4958 | | | |
| d | Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c | | | |
| | reimbursed by the organization | | | |
| е | All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter | 40e | | Х |
| | transaction? If "Yes," complete Form 8886-T | 400 | <u> </u> | |
| 41 42 - | List the states with which a copy of this return is filed. ► The organization's books are in care of ► LAURA SECHLER Telephone no. ► 208-3 | 43-1 | 615 | |
| 42 a | The organization's books are in care of ► LAURA SECHLER Located at ► PO BOX 15397 BOISE, ID Telephone no. ► 208-3 ZIP + 4 ■ 837 | | | |
| | At any time during the calendar year did the organization have an interest in or a signature or other authority | | | |
| D | over a financial account in a foreign country (such as a bank account, securities account, or other financial | | Yes | No |
| | account)? | 42b | | Х |
| | If "Yes," enter the name of the foreign country: | | - | |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank | | | |
| | and FinancialAccounts. | | | |
| c | At any time during the calendar year, did the organization maintain an office outside of the U.S.? • • • • • • • • • • • • • • • • • • • | 42c | -23729450999455 | Х |
| J | If "Yes," enter the name of the foreign country: | | | |
| 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 • • • • • • • • • • • • • • • • • • • | | | |
| | | ,, | | |
| | | | Yes | No |
| 44 | Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of | | | |
| | Form 990-EZ | 44 | | X |
| 45 | Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If | | | |
| | "Yes," Form 990 must be completed instead of Form 990-EZ | 45 | <u> </u> | X |

Form 990-EZ (2009)

| Part VI | 501(c)(3) organizations and section 4947(a)(| nd section 4947(a)(1 1) nonexempt charitable tr |) nonexempt ch usts must answer qu | aritable trusts only . estions 46-49b | All section | |
|------------------------|---|--|---------------------------------------|---|--|----------|
| 46 Did t | and complete the tables for lines 50 and 51. the organization engage in direct or indirect politically. | ical campaign activities or | hehalf of or in oppor | sition to | Yes | No |
| | lidates for public office? If "Yes," complete Sch | | | | - 46 | + |
| 47 Did t | the organization engage in lobbying activities? | If "Yes " complete Schedu | le C. Part II - · · · | | . 47 | |
| | e organization a school as described in section | | | | - 48 | |
| | the organization make any transfers to an exem | | | | - 49a | 1 |
| | es," was the related organization a section 527 | | | | - 49b | 1 |
| | plete this table for the organization's five highes | | | directors, trustees and key | / | |
| empl | loyees) who each received more than \$100,000 | of compensation from the | organization. If ther | e is none, enter "None." | | |
| | Name and address of each employee paid more than \$100,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans & deferred compensation | (e)Expens account an other allowan | d |
| | | | · | : | | |
| | | | | | | |
| 51 Com \$100 | I number of other employees paid over \$100,00 plete this table for the organization's five highes 0,000 of compensation from the organization. If (a) Name and address of each independent contractor pairs | st compensated independe there is none, enter "Non | e." | ach received more than | (c) Compensation | <u> </u> |
| | | | | | | |
| d Total | I number of other independent contractors each | | companying schedules an | d statements, and to the best of r | ny knowledge | |
| Sign Here | and belief, it is true, correct, and complete. Declar Signature of officer | radion of preparer (other than of | ficer) is based on all inform | ation of which preparer has any | knowledge. | |
| | WYATT PRESCOTT, EXECUTIVE D Type or print name and title | IRECTOR | | | | |
| Paid | Preparer's signature | | | Check if self- employed Preparer's to | lentifying No. (See | inst.) |
| Preparer's | Firm's name (or yours WILSON HARI | RIS AND COMPANY | | EIN • | | |
| Use Only | if self-employed), 1602 W FRAI | NKLIN STREET | | ************************************** | | |
| | address, and ZIP+ 4 BOISE, ID. (| 33702 | | Filolie IIO. F | 44-1355 | |
| May the IP | C discuss this return with the preparer shown a | hove? See instructions | | | X Yes | No |

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Incomest Under section 501(c) and section 527 ► Complete if the organization is described below.

Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-Aand C below. Do not complete Part I-B.

Section 501(c)(3) organizations: Complete Parts I-Aand B, Do not complete Part I-C.

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

Section 527 organizations: Complete Part I-Aonly.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

Schedule C (Form 990 or 990-EZ) 2009

EEA

2009

Open to Public Inspection If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

| | e organization answered "Yes," to Forn | | | | |
|--------|---|---|-----------------------|---|--|
| • | Section 501(c)(3) organizations that have | filed Form 5768 (election under sec | ion 501(h)): Comple | ete Part II-A. Do not compl | ete Part II-B. |
| | Section 501(c)(3) organizations that have | | | omplete Part II-B. Do not o | complete Part II-A. |
| | e organization answered "Yes," to Form | | en | | |
| • | Section 501(c)(4), (5), or (6) organizations | s: Complete Part III. | | | |
| Na | me of organization | | | 1 | lentification number |
| II | DAHO CATTLE ASSOCIATION INC | | | 82-038 | |
| Pa | rt I-A Complete if the organ | <u>ization is exempt under sec</u> | tion 501(c) or is | s a section 527 orga | nization. |
| 1 | Provide a description of the organization | 's direct and indirect political campai | gn activities in Part | IV. | |
| 2 | Political expenditures • • • • • • • | | | • • • • • • • • • • • • • • • • • • • | |
| 3 | Volunteer hours · · · · · · · · · | | | | |
| | | | | | |
| | rt I-B Complete if the organ | <u>ization is exempt under sec</u> | tion 501(c)(3). | | |
| 1 | Enter the amount of any excise tax incur | red by the organization under section | 14955 | | |
| 2 | Enter the amount of any excise tax incur | red by organization managers under | section 4955 · · · | | · Yes No |
| 3 | If the organization incurred a section 495 Was a correction made? | 55 tax, did it file Form 4/20 for this ye | ar? • • • • • • | | · Tyes No |
| 4a | | | | | |
| b | | | | 1 11 12 | |
| | rt I-C Complete if the organ | ization is exempt under sec | tion 507(c), exc | <u>ept section 501(c)(c)</u> | <u> </u> |
| 1 | Enter the amount directly expended by tactivities | ne filing organization for section 527 | exempt function | > \$ | |
| _ | Enter the amount of the filing organization | | | | |
| 2 | 527 exempt function activities • • • • • | on's lunds commoded to other organi | Zations to: Section | > \$ | |
| • | Total exempt function expenditures. Add | | | | |
| 3 | line 17b | | | > s | |
| | Did the filing organization file Form 1120 | LPOI for this year? | | | · Yes No |
| 4 5 | State the names, addresses and employ | er identification number (FIN) of all s | ection 527 political | organizations to which pay | ments |
| J | were made. For each organization listed | | | | |
| | contributions received that were prompti | | | | |
| | fund or a political action committee (PAC | | | | , |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, anter -0 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization, if none, enter -0 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| 331323555 ³ | TILA Complete if the organization | is exempt u | nder section 501 | (c)(3) and filed | Form 5768 (elect | ion |
|------------------------|--|---------------------|---|--------------------|-----------------------|-----------------------|
| | under section 501(h)). | | | | | |
| C | theck if the filing organization belongs to | an affiliated grou | p. | | | |
| 3 C | check 🕨 🔲 if the filing organization checked bo | x A and "limited | control" provisions ap | ply. | | |
| | Limits on Lobby | ying Expenditur | es | | (a) Filing | (b) Affiliated |
| | (The term "expenditures" m | | | | organization's totals | group totals |
| | Total lobbying expenditures to influence public or | | | | | |
| b | Total lobbying expenditures to influence a legislation | tive body (direct | lobbying) • • • • • | | | |
| C | Total lobbying expenditures (add lines 1a and 1b) | , | | | | |
| d | Other exempt purpose expenditures • • • • • | | | | | |
| е | Total exempt purpose expenditures (add lines 1c | and 1d) • • • • | | | | |
| f | Lobbying nontaxable amount. Enter the amount f | rom the following | table in both | | | |
| | columns. | | | | | |
| Γ | If the amount on line 1e, column (a) or (b) is: | The lobbying | g nontaxable amoun | t is: | | |
| | Not over \$500,000 | | mount on line 1e. | | | |
| ľ | Over \$500,000 but not over \$1,000,000 | | s 15% of the excess | | | |
| | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plu | s 10% of the excess of | over \$1,000,000. | | |
| - | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plu | s 5% of the excess or | er \$1,500,000. | | |
| | Over \$17,000,000 | \$1,000,000. | | | | |
| g | Grassroots nontaxable amount (enter 25% of line | : 1f) • • • • • • | | | | |
| h | Subtract line 1g from line 1a. If zero or less, ente | r-0- • • • • • | | • • • • • • • • | | |
| i | Subtract line 1f from line 1c. If zero or less, enter | | | | | |
| j | If there is an amount other than zero on either line | e 1h or line 1i, di | d the organization file | Form 4720 reportin | g | |
| | section 4911 tax for this year? | | | | | Yes No |
| | (Some organizations that r | nade a section : | Period Under Section 501(h) election do no ctions for lines 2a th | t have to complete | e all of the five | |
| | | | | | <i>-</i> | |
| | Lobbyi | ng Expenditure | s During 4e¥ar Averag | ing Period | <u></u> | |
| | Calendar year (or fiscal year beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) Total |
| 2 a | Lobbying non-taxable amount | | | | | |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | |
| С | Total lobbying expenditures | | | | | |
| d | Grassroots nontaxable amount | | | | | |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | |
| f | Grassroots lobbying expenditures | | | | | |
| | | | EE/ | 4 | Schedule C (For | m 990 or 990-EZ) 2009 |

| e year, did the filing organization attempt to influence foreign, national, state or local, including any attempt to influence public opinion on a legislative matter or m, through the use of: or management (include compensation in expenses reported on lines 1c through 1i)? or management (include compensation in expenses reported on lines 1c through 1i)? or members, legislators, or the public? ons, or published or broadcast statements? other organizations for lobbying purposes? tact with legislators, their staffs, government officials, or a legislative body? emonstrations, seminars, conventions, speeches, lectures, or any other means? vities? If "Yes," describe in Part IV lines 1c through 1i tivities in line 1 cause the organization to be not described in section 501(c)(3)? neter the amount of any tax incurred under section 4912 organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | No Dr Se | | Amou | nt |
|--|--|--|--------------|---|--|
| including any attempt to influence public opinion on a legislative matter or m, through the use of: including any attempt to influence public opinion on a legislative matter or m, through the use of: including any attempt to influence public opinion on a legislative matter or m, through the use of: incretisements? or members, legislators, or the public? ons, or published or broadcast statements? other organizations for lobbying purposes? tact with legislators, their staffs, government officials, or a legislative body? commonstrations, seminars, conventions, speeches, lectures, or any other means? vilities? If "Yes," describe in Part IV vilities in line 1 cause the organization to be not described in section 501(c)(3)? inter the amount of any tax incurred under section 4912 organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | or se | | | |
| including any attempt to influence public opinion on a legislative matter or m, through the use of: including any attempt to influence public opinion on a legislative matter or m, through the use of: including any attempt to influence public opinion on a legislative matter or m, through the use of: incretisements? or members, legislators, or the public? ons, or published or broadcast statements? other organizations for lobbying purposes? tact with legislators, their staffs, government officials, or a legislative body? commonstrations, seminars, conventions, speeches, lectures, or any other means? vilities? If "Yes," describe in Part IV vilities in line 1 cause the organization to be not described in section 501(c)(3)? inter the amount of any tax incurred under section 4912 organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | or se | | | |
| m, through the use of: for management (include compensation in expenses reported on lines 1c through 1i)? for management (include compensation in expenses reported on lines 1c through 1i)? for members, legislators, or the public? for members, legislators, or the public? for published or broadcast statements? for the organizations for lobbying purposes? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or an equiple to the memory. fract with legislators, their staffs, government officials, or an equiple to the memory. fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, their staffs, government officials, or a legislative body? fract with legislators, or alegislative body? fract with legislators, or alegislative body? fract with legislators, or alegislator body? fract with legislators, or alegislator body? fract with legislators, or alegislator body? fract with legislators, or alegislator body? fract with legislators, or alegislator body? frac | | or se | | | |
| or management (include compensation in expenses reported on lines 1c through 1i)? pertisements? members, legislators, or the public? ms, or published or broadcast statements? other organizations for lobbying purposes? tact with legislators, their staffs, government officials, or a legislative body? monostrations, seminars, conventions, speeches, lectures, or any other means? wities? If "Yes," describe in Part IV lines 1c through 1i tivities in line 1 cause the organization to be not described in section 501(c)(3)? Inter the amount of any tax incurred under section 4912 organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | or se | | | |
| or management (include compensation in expenses reported on lines 1c through 1i)? pertisements? members, legislators, or the public? ns, or published or broadcast statements? other organizations for lobbying purposes? ttact with legislators, their staffs, government officials, or a legislative body? emonstrations, seminars, conventions, speeches, lectures, or any other means? vities? If "Yes," describe in Part IV lines 1c through 1i tivities in line 1 cause the organization to be not described in section 501(c)(3)? nter the amount of any tax incurred under section 4912 organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | or se | | | |
| retrisements? | | or se | | | |
| other organizations for lobbying purposes? tact with legislators, their staffs, government officials, or a legislative body? emonstrations, seminars, conventions, speeches, lectures, or any other means? vities? If "Yes," describe in Part IV lines 1c through 1i tivities in line 1 cause the organization to be not described in section 501(c)(3)? nter the amount of any tax incurred under section 4912 organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | or se | | | |
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| other organizations for lobbying purposes? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government officials, or a legislative body? Itact with legislators, their staffs, government of any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Itact with legislators, or any other means? Ita | | or se | | | 32 32 32 32 32 32 32 32 32 32 32 32 32 3 |
| emonstrations, seminars, conventions, speeches, lectures, or any other means? vities? If "Yes," describe in Part IV | | or se | | | |
| vities? If "Yes," describe in Part IV lines 1c through 1i citivities in line 1 cause the organization to be not described in section 501(c)(3)? Inter the amount of any tax incurred under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred under section 4912 Inter the amount of any tax incurred under section 4912 Inter the amount of any tax incurred under section 4912 Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6)) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under sec | | or se | | | |
| lines 1c through 1i | | or se | | 2 (0 3 5 0 0 | |
| civities in line 1 cause the organization to be not described in section 501(c)(3)? Inter the amount of any tax incurred under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred by organization managers under section 4912 Inter the amount of any tax incurred under section 4912 Inter the amount of any tax incurred under section 4912 Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(4), section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c)(6) Inter the amount of any tax incurred under section 501(c | | or se | | | |
| nter the amount of any tax incurred under section 4912 nter the amount of any tax incurred by organization managers under section 4912 organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | or se | | | |
| nter the amount of any tax incurred by organization managers under section 4912 | | or se | | | |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | or se | | | |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6). stantially all (90% or more) dues received nondeductible by members? | | or se | | | |
| stantially all (90% or more) dues received nondeductible by members? | |)r se | -ti | | |
| stantially all (90% or more) dues received nondeductible by members? | | | SHOII | | |
| ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6)) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | | | Yes | N- |
| ganization make only in-house lobbying expenditures of \$2,000 or less? ganization agree to carryover lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6)) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | | 1 | | λ |
| ganization agree to carryover lobbying and political expenditures from the prior year? | | | 2 | | 2 |
| Complete if the organization is exempt under section 501(c)(4), section 501(c)(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, lines | | | 3 | | |
| 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line | (5), (| or se | ction | | |
| | e 3 i | is an: | swere | b€ | |
| "Yes." | | | | | |
| iessments and similar amounts from members · · · · · · · · · · · · · · · · · · · | • • | 1 | | | |
| 62(e) nondeductible lobbying and political expenditures (do not include amounts of political | | | | | |
| for which the section 527(f) tax was paid). | | - | | | |
| ear | • • | | | | |
| from last year | | | | | |
| | • • | | | | |
| e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues | | | | | |
| | | | | | |
| ses the organization agree to carryover to the reasonable estimate of hondeductible robbying | | 4 | | | |
| an expenditure next year? | | | | | |
| monnt of topoving and political experimitates (see instructions) | | | L | | |
| ear fro e ar we ses | mount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues re sent and the amount on line 2c exceeds the amount on line 3, what portion of the the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? bunt of lobbying and political expenditures (see instructions) | mount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues re sent and the amount on line 2c exceeds the amount on line 3, what portion of the the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? bunt of lobbying and political expenditures (see instructions) | am last year | mount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues re sent and the amount on line 2c exceeds the amount on line 3, what portion of the the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? 4 5 count of lobbying and political expenditures (see instructions) | mount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues re sent and the amount on line 2c exceeds the amount on line 3, what portion of the the organization agree to carryover to the reasonable estimate of nondeductible lobbying expenditure next year? bunt of lobbying and political expenditures (see instructions) polemental information |

SCHEDULE G (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization 82-0384167 IDAHO CATTLE ASSOCIATION INC **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Part I Indicate whether the organization raised funds through any of the following activities. Check all that apply. Solicitation of non-government grants Mail solicitations Solicitation of government grants Internet and email solicitations Phone solicitations g | X | Special fundraising events In-person solicitations 2a 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? X No Ye**s** 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. (vi) Amount paid to (iii) Did fundraiser have (iv) Gross receipts (v) Amount paid to (i) Name of individual (ii) Activity custody or control of from activity (or retained by) (or retained by) or entity (fundraiser) contributions? fundraiser listed in organization col. (i) No Yes 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing. Idaho,

| | rt (1 | (1 0)111 930 01 930-LZ/ 2000 | nplete if the organization and 0-EZ, line 6a. List events | answered "Yes" to Form 99 | 0, Part IV, line 18, or repo | orted |
|------------------|----------------------|--|---|--|---------------------------------------|--|
| | | · · · · · · · · · · · · · · · · · · · | (a) Event #1 CONVENTION | (b) Event #2 GOLF TOURNAM | (c) Other Events | (d) Total Events Add col. (a) through |
| R | | | (event type) | (event type) | (total number) | col. (c) |
| e v e n | 1 | Gross receipts · · · · · · | 60,346 | 14,282 | | 74,628 |
| u e | | Less: Charitable contributions Gross revenue (line 1 | 60,346 | 14,282 | | 74,628 |
| | | minus line 2) · · · · · · · | 00,340 | 14,202 | | , |
| D | 4 | Cash prizes · · · · · · · · · | | | | |
| i r e | 5 | Non-cash prizes · · · · · · | | | | |
| c t | | Rent/facility costs • • • • • • • | | | | |
| Expe | 8 | Food and beverages • • • • • • • • Entertainment • • • • • • • • | | | | |
| n s e | 9 | Other direct expenses · · · · | 51,230 | 7,403 | | 58,633 |
| S | | - | | | | FD (22) |
| | 10 | Direct expense summary Add lines Net income summary Combine line | 4 through 9 in column (d) | | • | (58,633) 15,995 |
| Da | 11 irt | 2007 | ganization answered "Yes | s" to Form 990, Part IV, line | 19, or reported more | |
| W 1995 | i se de la constanti | than \$15,000 on Form 990-EZ | | | | <u></u> |
| Revenue | | | (a) Bingo | (b) Puli tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (Add col. (a) through col. (c)) |
| n | 1 | Gross revenue · · · · · · · · | | *************************************** | | |
| | | Ologgic College | | | | |
| Drect | 2 | Cash prizes · · · · · · · · · | | | | |
| E | 3 | Non-cash prizes | | | | |
| penses | 4 | Rent/facility costs | | | | |
| e s | 5 | Other direct expenses • • • • • | | | Yes % | |
| | 6 | Volunteer labor • • • • • • • • | Yes % | Yes% No | No No | |
| | 7 | Direct expense summary Add lines | 2 through 5 in column (d) | | | () |
| | 8 | Net gaming income summary Com | bine line 1, column (d), ar | d line 7 · · · · · · · | | Yes No |
| 9 a | ls t | ter the state(s) in which the organizathe organization licensed to operate | | | | 99 |
| i: |) f" | No," Explain: | | | | |
| 10a | | ere any of the organization's gaming Yes," Explain: | licenses revoked, suspen | ded or terminated during th | e tax year? • • • • • | · · · · 10a |
| 11 | | es the organization operate gaming | | | · · · · · · · · · · · · · · · · · · · | · · · · 11 X |

X

formed to administer charitable gaming?

| Scher | ule G (Form 990 or 990-EZ) 2009 IDAHO CATTLE ASSOCIATION INC | | 92-0364107 | Р | age 🐱 |
|--------|---|----------|------------------------|---------|-------|
| SOLICE | die O (1 9111 000 91 000 EL / 2000 | | | Yes | No |
| 13 | Indicate the percentage of gaming activity operated in: | | | | |
| а | The organization's facility | 13a | % | | |
| b | An outside facility | 13b | % | | |
| 14 | Provide the name and address of the person who prepares the organization's gaming/special events | s books | | | |
| | and records: | | | | |
| | | | | | |
| | Name Laura Sechler | | | | |
| | | | | | |
| | Address ▶ PO BOX 15397 BOISE, ID 83715 | | | | |
| | | | | | |
| 15a | Does the organization have a contract with a third party from whom the organization receives gamin | ıg | | | |
| | revenue? · · · · · · · · · · · · · · · · · · · | | 15a | | |
| b | If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ | and the | | | |
| | amount of gaming revenue retained by the third party ▶ \$ | | | | |
| С | If "Yes," enter name and address: | | | | |
| | | | | | |
| | Name > | | | | |
| | Address ► | | | | |
| 16 | Gaming manager information: | | | | |
| 10 | Gaming manager information. | | | | |
| | Name ▶ | | | | |
| | | | | | |
| | Gaming manager compensation ▶ \$ | | | | |
| | | | | | |
| | Description of services provided | | | | |
| | | | | | |
| | Director/officer Employee Independent contractor | | | | |
| | | | | | |
| 17 | Mandatory distributions: | | | | |
| а | Is the organization required under state law to make charitable distributions from the gaming proceed | eds to | 47- | | |
| | retain the state gaming license? | | • • • • • • 17a | | |
| b | Enter the amount of distributions required under state law distributed to other exempt organizations | or spent | | | |
| | in the organization's own exempt activities during the tax year ▶ \$ | | | ~~~ | 2000 |
| | CCA | | chedule G (Form 990 or | 208HT/1 | ZULCH |

Comment of the Commen

one or one of the contract the state of the

Federal Supporting Statements 2009 Name(s) as shown on return FEIN

FORM 990EZ, PART I, LINE 16 OTHER EXPENSES SCHEDULE 2

| DESCRIPTION | AMOUNT |
|----------------------------|---------|
| NATIONAL DUES | 25,162 |
| INFORMATION TECHNOLOGY | 1,986 |
| PROMOTIONS AND ADVERTISING | 1,781 |
| DUES AND SUBSCRIPTIONS | 1,180 |
| MEMBERSHIP RECRUITMENT | 1,131 |
| PROGRAMS | 75,173 |
| TOTAL | 106,413 |

FORM 990EZ, PART II, LINE 24 OTHER ASSETS SCHEDULE 3

| | BEGINNING | |
|---------------------|-----------|-------------|
| DESCRIPTION | OF YEAR | END OF YEAR |
| ACCOUNTS RECEIVABLE | 501 | 1,018 |
| TOTAL | 501 | 1,018 |

FORM 990EZ, PART II, LINE 26 OTHER LIABILITIES SCHEDULE 3

| | BEGINNING | |
|------------------|-----------|-------------|
| DESCRIPTION | OF YEAR | END OF YEAR |
| ACCOUNTS PAYABLE | 3,907 | 3,423 |
| DEFERRED REVENUE | | 6,200 |
| | | |
| TOTAL | 3,907 | 9,623 |
| | | |

| | Federal Supporting Statements | 2009 |
|----------------------------|-------------------------------|------|
| Name(s) as shown on return | | FEIN |
| | | |

FORM 990EZ, PART I, LINE 8 OTHER REVENUES SCHEDULE 2

| RENT PUBLICATION | ADVERTISING | AMOUNT 14,643 53,147 |
|---------------------|-------------|----------------------|
| TOTAL | | 67,790 |

FORM 990EZ, PART I, LINE 20 OTHER CHANGES IN NET ASSETS SCHEDULE

| DESCRIPTION | AMOUNT |
|-------------------------|--------|
| PRIOR PERIOD ADJUSTMENT | 122 |
| | |
| TOTAL | 122 |
| 201112 | |

${\color{blue} COMMITTEE\ ON\ NATURAL\ RESOURCES} \\ {\color{blue} 113^{th}\ Congress\ Disclosure\ Form} \\ As\ required\ by\ and\ provided\ for\ in\ House\ Rule\ XI,\ clause\ 2(g)\ and}$ the Rules of the Committee on Natural Resources

Legislative hearing on H.R. 657 (Labrador), the "Grazing Improvement Act"

| For Individuals: |
|--|
| 1. Name: |
| 2. Address: |
| 3. Email Address: |
| 4. Phone Number: |
| * * * * * |
| For Witnesses Representing Organizations: 1. Name: Brenda Richards |
| 2. Name of Organization(s) You are Representing at the Hearing: Public Lands Council (PLC) Idaho Cattle Association (ICA) |
| 3. Business Address: PLC: 1301 Pennsylvania Ave. NW, STE 300, Washington, DC 20004 ICA: 2120 Airport Way Boise, ID 83705 |
| 4. Business Email Address: PLC: Dustin Van Liew: dvanliew@beef.org ICA: Wyatt Prescott: wyatt@idahocattle.org |
| 5. Business Phone Number: |

PLC: 202-879-9126 ICA: 208-343-1615

For all Witnesses

Name/Organization: Brenda Richards/Public Lands Council Title/Date of Hearing: Legislative hearing on H.R. 657 (Labrador), the "*Grazing Improvement Act*." April 16, 2013.

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.

Degree in business accounting; range management seminars; various training via natural resource seminars

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 of the Boise District Bureau of Land Management Resource Advisory Council for 6 years; member of the Owyhee Natural Resource Committee; member of the liaison advisory committee for the USDA Reynolds Creek Watershed; member of the BLM Resource Advisory Council Resource Management Planning subcommittee, and the Sage Grouse subcommittee; served as Board member of the Idaho Cattle Association, Chairman of the Idaho Cattle Association Federal Lands Committee and the Idaho Public Land Users; served as Idaho representative on the National Cattlemen's Beef Association Federal Lands Committee and the National Public Lands Council; past member of the Nevada Cattle Association board of directors.

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.

Actively involved in a family owned and operated cow-calf ranching business. Business runs on a combination of private and federal lands. Actively involved in public lands issues for the over 15 years, many of the meetings, seminars, hearings, etc. attended on a volunteer basis to help assure the viability of our business and the success for it to pass on to our children who will be 5th generation ranchers.

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>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.

None

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.

None

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

None

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

Witnesses Representing Organizations

Name/Organization: Brenda Richards/Public Lands Council

Title/Date of Hearing: Legislative hearing on H.R. 657 (Labrador), the "Grazing Improvement Act." April 16, 2013.

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

Vice President and Board Member Public Lands Council
Idaho Cattle Association Federal Lands Committee Chairman
Idaho Public Land Users Chairman
Representative on the National Cattlemen's Beef Association Federal Lands Committee
Member of the Idaho Cattle Association Board of Directors

i. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>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).

None

j. 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).

ICA - None

PLC -

USFS Planning Rule:

Federal Forest Resource Coalition et al v. Vilsack

(DC District Court)

Federal Statues at Issue: OAA, NFMA, MUSYA, APA

USFS Payette Plan:

Idaho Wool Growers Association et al v. Vilsack et al

(Idaho District Court)

Federal Statues at Issue: NEPA, FACA, APA

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

None

l. 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)).

Committee has PLC/ICA 990s