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Form **990** 

Department of the Treasury Internal Revenue Service

### **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)

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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 10-01-2011 and ending 09-30-2012 D Employer identification number B Check if applicable National Cattlemen's Beef Association Inc 84-0738973 Address change Doing Business As E Telephone number Name change (303)694-0305 Initial return umber and street (or P O box if mail is not delivered to street address) **G** Gross receipts \$ 60,090,118 9110 E Nichols Avenue Terminated Amended return City or town, state or country, and ZIP + 4 Centennial, CO 801123425 Application pending Name and address of principal officer **H(a)** Is this a group return for Forrest Roberts □Yes ☑No affiliates? 9110 E Nichols Ave Ste 300 Centennial, CO 80112 H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 H(c) Website: ► www beef org K Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ M State of legal domicile DE L Year of formation 1996 Part I Summary Briefly describe the organization's mission or most significant activities National Cattlemen's Beef Association, Inc. works to increase profit opportunities for cattle and beef producers by enhancing the business climate and building consumer demand Activities & Governance 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . . . 4 Number of independent voting members of the governing body (Part VI, line 1b) . 8 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . 193 6 287 **6** Total number of volunteers (estimate if necessary) . . . . 7a Total unrelated business revenue from Part VIII, column (C), line 12 . 7a 658,045 **b** Net unrelated business taxable income from Form 990-T, line 34 . **7**b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 0 0 Program service revenue (Part VIII, line 2g) . 57,401,350 58,932,367 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 4.302 2.373 10 825,894 489,812 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 58,231,546 59,424,552 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 13 0 0 Benefits paid to or for members (Part IX, column (A), line 4) . . . 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines **15** 14,063,825 15,156,820 Expenses 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . b Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright$ **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . 41,728,977 43,248,773 58,405,593 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 55.792.802 19 Revenue less expenses Subtract line 18 from line 12 . 2,438,744 1,018,959 (Assets or | d Balances | **Beginning of Current End of Year** Year 23,665,282 24,430,094 20 Total assets (Part X, line 16) . End A 21 Total liabilities (Part X, line 26) . . . . . . 10,589,343 10,335,196 22 Net assets or fund balances Subtract line 21 from line 20 13,075,939 14,094,898

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including acco knowledge and belief, it is true, correct, and complete. Declaration of preparer (other knowledge. Signature of officer Sign Here DOUG EVANS CFO Type or print name and title Kımberly Temple sıgnature **Paid** Preparer's GRANT THORNTON LLP Firm's name (or yours if self-employed), address, and ZIP + 4 **Use Only** 8300 THORN DRIVE SUITE 300

May the IRS discuss this return with the preparer shown above? (see instruction

WICHITA, KS 672262708

Par	t III			Accomplishments se to any question in this Part	III	F
1	Brief	y describe the orga	nızatıon's mıssıon			
				INC WORKS TO INCREASE IMATE AND BUILDING CON	PROFIT OPPORTUNITIES FO SUMER DEMAND	R CATTLE AND BEEF
2				program services during the		「Yes ▼ No
			new services on Sche			, 135 , 115
3	Did th		se conducting, or mak	e significant changes in how i	t conducts, any program	┌ Yes ┌ No
	If "Ye	s," describe these o	changes on Schedule	0		
4	exper	ises Section 501(c	:)(3) and 501(c)(4) o	rganizations and section 4947	s three largest program service ?(a)(1) trusts are required to re each program service reported	port the amount of
	(Code	e	) (Expenses \$	including grants of \$	) (Revenue \$	)
		nal Cattlemen's Beef Ass mer demand		crease profit opportunities for cattle a	and beef producers by enhancing the b	ousiness climate and building
4b	(Code	2	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
4c	(Code	2	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
			(Danamha - C. I. I.	ul. 0.)		_
4d		er program services enses \$	(Describe in Schedi includi	ng grants of \$	) (Revenue \$	)
4e	Tota	l program service ex	xpenses <b>)</b>			

Part IV	Checklist o	of Rec	uired	Sche	dules

	•		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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "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	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
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 U S? If "Yes," complete Schedule F, Part II and IV.	15		No
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 U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
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		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	The Checklist of Required Schedules (continued)			
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		No
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Part V	Statements	Regarding	Other IRS	Filings and	Tax Comp	oliance

	Check if Schedule O contains a response to any question in this Part V		.୮	
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	<b>1a</b> 196			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
_	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	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 or securities account)?	4a		No
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			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
-		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	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	7a		
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<b>-</b>		
L	required?	7g		
n	Form 1098-C?	7h		
1	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. DId			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
	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			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter  Grees uncome from members or shareholders			
	Gross income from members or shareholders			
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
_	· · · · · · · · · · · · · · · · · · ·			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
Þ	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate 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 aggregate amount of reserves on hand 13c			
1-		14-		NI ~
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
D)	THE TREST HAS ILLINED A FORD 7.70 TO LEDON TRESE DAVIDENTS ( IT "NO " DIOVIGE AN EXPLANATION IN SCREAME ()	140		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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 . . . . . . . . . . . . . .

36	ection 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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
ке	evenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	162	No.
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100		
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990	11a	Yes	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	11a	Yes	
12a				
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	Yes	
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	Yes Yes	
12a b c	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c	Yes Yes Yes	
12a b c	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13	Yes Yes Yes	
12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13	Yes Yes Yes	
12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes	
12a b c 13 14 15	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
12a b c 13 14 15 a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
12a b c c 13 14 15 a b b 16a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
12a b c c 13 14 15 a b b See See 17	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

Own website Another's website V Upon request

- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 DOUG EVANS

9110 E NICHOLS AVE STE 300 Centennial, CO 801123425 (303)694-0305

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

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

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

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

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

◆ 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

(A)  Name and Title	(B) Average hours per week (describe hours	Position more unless	on (de than	C) o not n one son er ar	t che e box is bo nd a tee)	eck K, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	fo.,,	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	organizations
(1) JD Alexander President	1 0	х		Х				0	0	0
(2) Scott George President Elect	1 0	х		Х				0	0	0
(3) Bob McCan Vice President	1 0	х		Х				0	0	0
(4) Don Pemberton Chair Policy	1 0	х		Х				0	0	0
(5) Phillip Ellis Vice Chair Policy	1 0	х		Х				0	0	0
(6) Craig Uden Chair Federation	1 0	Х		Х				0	0	0
(7) Richard Gephart Vice Chair Federation	1 0	х		Х				0	0	0
(8) Dave True Treasurer	1 0	х		Х				0	0	0
(9) Forrest LRoberts CEO	40 0			Х				478,354	0	38,344
(10) Doug Evans CFO	40 0			Х				222,924	0	36,725
(11) Kendal S Frazier EVP Org Comm , Plan, G&L	40 0				Х			240,666	0	32,476
(12) James O Reagan Sr VP, REI	40 0				Х			184,030	0	28,928
(13) Marvin L Kokes VP, Assoc Marketing	40 0				Х			160,435	0	32,370
(14) Richard Husted VP, Strategic Planning	40 0					х		174,346	0	30,385
(15) Rick H McCarty VP, Issues Analysis & Strategy	40 0					х		152,108	0	24,728
(16) Nancy L Rudzek Executive Director, HR	40 0					х		149,362	0	21,163
(17) Elizabeth Parker Chief Veterinarian	40 0					х		149,394	0	18,936

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(B) Average hours per week (describe	unles an	on (d e tha	n on son er a	e bo ıs b nd a	x, oth		(D) Report compens from to	able sation the ion (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estima amount o compens from f organizat	ated f other sation the ion and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza	
	Thomas G Field Dir , Producer Education	40 0					х			143,260		0		30,381
(19)	J Burton Eller er SVP Member Services	0.0						×	1	232,105		0		14,878
	Sub-Total	to Part VII, Sec						<b>P</b>		286,984		0		309,314
2	Total number of individuals (incl \$100,000 of reportable compen						above	) who	o received i	more tha	n			
													Yes	No
3	Did the organization list any <b>for</b> on line 1a? <i>If</i> "Yes," complete Sci				ee, k	ey e	mploy •	ee, d	or highest c	ompens	ated employee	3	Yes	
4	For any individual listed on line organization and related organiz											4	Yes	
5	Did any person listed on line 1a services rendered to the organiz								_	ization o	r individual for •	5	103	No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	n the organizatio												
	-	(A) me and business ad	dress							Descr	(B) uption of services		(C Comper	
PO Bo	Burnett Company Inc ox 91451 AGO, IL 60693	222,7335 44							Ad	vertising	,			,771,851
US M PO Bo	eat Export Federation px 5722								Ex	port			9	,202,441

Form 99		*						Page <b>9</b>
Part \	<u>/##1</u>	Statement o	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 cam	paıgns 1a					
	b	Membership du	es <b>1b</b>					
S, Ç	c	Fundraising eve	ents <b>1c</b>					
<u>ağ</u> ≝	d	Related organiz	zations 1d					
E, S	e	Government grants	s (contributions) <b>1e</b>					
rio er s	f	All other contribution	ons, gifts, grants, and <b>1f</b> ot included above					
ĕ€	g		butions included in					
Contributions, gifts, grants and other similar amounts	١.		- 4 - 4 6		ol			
<u>O 46</u>	h	Iotal. Add lines	s 1a-1f		0			
e⊒	22	BDOC CONTRACT		Business Code	26 470 470	26 470 470		
Program Service Revenue	2a	BPOC CONTRACT	CIL	900099	36,170,178	36,170,178		
	b   с	STATE BEEF COUN SPONSORSHIP/MEI		900099	10,226,763	10,226,763		
Š	d	MEMBERSHIP DUES		900099	5,951,728	5,951,728		
æ	e e	ADVERTISING		541900	4,336,258 658,045	4,336,258	658,045	
ran E	f		am service revenue	341900	1,589,395	1,589,395	636,043	
ړ ړ	•				1,309,393	1,369,393		
	g		s 2a – 2f		58,932,367			
	3		ome (including dividen ar amounts)	· · · · · · · · · · · · · · · · · · ·	2,373			2,373
	4		stment of tax-exempt bond	· · ·	0			2,0.0
	5			· · · · · · · · · · · · · · · · · · ·	0			
			(ı) Real	(II) Personal				
	6a	Gross rents	85,722					
	b	Less rental expenses	81,186					
	c	Rental income or (loss)	4,536					
	d	• •	me or (loss)		4,536			4,536
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of						
		assets other than inventory						
	b	Less cost or other basis and						
	   c	sales expenses Gain or (loss)						
	d	Net gain or (los	[		o			
	8a	Gross income f		ı				
Other Revenue		events (not inc \$	luding  reported on line 1c)					
Вě		See Part IV, lin	ne 18					
<u>u</u>	Ь	Loca direction	penses b	<u> </u>				
듄	c		penses <b>b</b> (loss) from fundraising	events 🕨	o			
_	9a		rom gaming activities ne 19					
	b c		a penses b (loss) from gaming acti	vities	ol			
		Gross sales of returns and allo	inventory, less					
	ь		a oods sold b (loss) from sales of invo	1,069,656 584,380	485,276	485,276		
	С	Miscellaneous		Business Code	705,270	703,270		
	11a	, nocchaneou:		Dadiness code				
	b							
	c							
	d	All other reven	ue					
	е		s 11a-11d		0			
	12	Total revenue.	See Instructions .		59,424,552	58,759,598	658,045	6,909

#### 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) ✓ Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 0 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and 1,455,252 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 10,616,385 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . 0 Other employee benefits . . . . . . 3,085,183 10 0 Fees for services (non-employees) 11 Management . . . . . 407,960 Legal . . . . . . . . . . Accounting . . . . . . . . . . . . 4,334 0 Lobbying . . . . . . . . . . . . Professional fundraising See Part IV, line 17 . . 0 Investment management fees . . . . . . 0 8,326,714 g 12 Advertising and promotion . . . 27,250,482 Office expenses . . . . . . 13 527,469 Information technology . . . . . 14 252,427 15 Royalties . . 0 1,152,482 16 2,225,208 17 Payments of travel or entertainment expenses for any federal. 18 state, or local public officials . . . . . . 0 19 Conferences, conventions, and meetings . . . . 2,268,967 15,742 20 Payments to affiliates . . . . 21 22 Depreciation, depletion, and amortization . . . . . 211,856 144,021 23 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) MISCELLANEOUS EXPENSE 461,111 b d е All other expenses 25 Total functional expenses. Add lines 1 through 24f 58,405,593 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

Pa	rt X	Balance Sheet					
					(A) Beginning of year		<b>(B)</b> End of year
	1	${\sf Cash-non-interest-bearing} \ . \ . \ . \ . \ . \ . \ . \ . \ . \ $			4,032,130	1	2,514,215
	2	Savings and temporary cash investments			8,083,586	2	11,629,199
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net			9,057,350	4	7,590,465
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key	employees, and			
		Schedule L			150,000	5	120,000
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$ Complete Part II o		4958(f)(1)) and			
		Schedule L			0	6	0
ssets	7	Notes and loans receivable, net			0	7	0
- SS	8	Inventories for sale or use		0	8	0	
⋖	9	Prepaid expenses and deferred charges			324,943	9	464,143
	10a	and, buildings, and equipment cost or other basis Complete art VI of Schedule D  3,589,243					
	b	Less accumulated depreciation	10b	2,976,907	443,333	10c	612,336
	11	Investments—publicly traded securities			0	11	0
	12	Investments—other securities See Part IV, line 11		0	12	0	
	13	Investments—program-related See Part IV, line 11		0	13	0	
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11			1,573,940	15	1,499,736
	16	Total assets. Add lines 1 through 15 (must equal line 34)			23,665,282	16	24,430,094
	17	Accounts payable and accrued expenses .			8,220,878	17	6,559,009
	18	Grants payable	0	18	0		
	19	Deferred revenue	2,153,614	19	3,385,577		
	20	Tax-exempt bond liabilities			0	20	0
ا م	21	Escrow or custodial account liability Complete Part IV of Schedule	₽D.	_	0		0
iabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		·			
홅		persons Complete Part II of Schedule L			0	22	0
۱	23	Secured mortgages and notes payable to unrelated third parties		-	195,583	23	388,943
	24	Unsecured notes and loans payable to unrelated third parties			0		0
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Part	d thir	d parties,			
		D			19,268		1,667
$\rightarrow$	26	Total liabilities. Add lines 17 through 25			10,589,343	26	10,335,196
S ⊕ Q		Organizations that follow SFAS 117, check here ► 🔽 and comp through 29, and lines 33 and 34.	lete li	nes 27			
ᇤ	27	Unrestricted net assets			13,075,939	27	14,094,898
ည	28	Temporarily restricted net assets			0	28	0
됩	29	Permanently restricted net assets			0	29	0
or Fund Balances		Organizations that do not follow SFAS 117, check here ►  an lines 30 through 34.	d com	plete			
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31		
¥	32	Retained earnings, endowment, accumulated income, or other fu			32		
Net	33	Total net assets or fund balances			13,075,939	33	14,094,898
2	34	Total liabilities and net assets/fund balances			23,665,282	34	24,430,094

Pa	Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI	•			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		59,4	424,55
2	Total expenses (must equal Part IX, column (A), line 25)	2		58,4	405,59
3	Revenue less expenses Subtract line 2 from line 1	3			018,95
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		13,0	075,93
5	Other changes in net assets or fund balances (explain in Schedule O)	5			-
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		14,0	094,89
Pai	rt XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response to any question in this Part XII			୮	•
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain i				
	Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the laudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

DLN: 93493225030383

OMB No 1545-0047

☐ Yes

☐ Yes

### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

3

Was a correction made?

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.

Political Campaign and Lobbying Activities

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

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

If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

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

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

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

If the organization answered "Yes." to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

	ection 501(c)(4), (5), or (6) organizations. Complete Part III	2 000 (1 10x)	, ruxy, then
Na		mployer idei	ntification number
	8	4-0738973	
ar	rt I-A Complete if the organization is exempt under section 501(c) or is a se	ection 527	7 organization.
L	Provide a description of the organization's direct and indirect political campaign activities on behain opposition to candidates for public office in Part IV	alfofor	
2	Political expenditures	<b>&gt;</b>	\$
3	Volunteer hours		
ar	rt I-B Complete if the organization is exempt under section 501(c)(3).		
L	Enter the amount of any excise tax incurred by the organization under section 4955	<b>-</b>	\$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	<b>.</b>	\$

#### If "Yes," describe in Part IV h Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

Did the filing organization file Form 1120-POL for this year? ┌ Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the

amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	( <b>b)</b> Address	<b>(c)</b> EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

**f** Grassroots lobbying expenditures

ch	nedule C (Form 990 or 990-EZ) 2011					Page <b>2</b>
Pa	cart II-A Complete if the organization in under section 501(h)).	is exempt under	section 501(	c)(3) and fi	led Form 5768	(election
<u> </u>	Check   If the filing organization belongs to an	affiliated group (and	lıst ın Part IV ea	ch affiliated gro	oup member's name	e, address, EIN,
	expenses, and share of excess lobby					
<u> </u>	Check I if the filing organization checked box	A and "limited contro	l" provisions app	ly		
	Limits on Lobbying Ex	penditures			(a) Filing	(b) Affiliated
	(The term "expenditures" means amo		.)		O rganızatıon's Totals	Group Totals
la	Total lobbying expenditures to influence public op	inion (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legislat	tive body (direct lobby	yıng)			
C	Total lobbying expenditures (add lines 1a and 1b)	)				
d	Other exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	and 1d)				
f	Lobbying nontaxable amount Enter the amount fro	om the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of line	: 1f)				
h	Subtract line 1g from line 1a If zero or less, enter	r-0-				
	Subtract line 1f from line 1c If zero or less, enter					
	If there is an amount other than zero on either line section 4911 tax for this year?		organization file	Form 4720 rep	porting	┌ Yes ┌ No
	(Some organizations that made a s columns below. See the	e instructions fo	ection do not r lines 2a thr	have to co ough 2f on	page 4.)	e five
_	Lobbying Expe	nditures During	4-Year Avera	ging Period	<u> </u>	
	Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	(d) 2011	<b>(e)</b> Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
С	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has	NOT filed Fo	rm 5768
	(election under section 501(h)).		

	(election under section 501(n)).			
		(a	1)	(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)?			
c	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 lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
Ь	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	501(c	)(5), o	r section

# Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		Νo
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	Yes	

# Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	4,336,25	8
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	2a	247,34	3
b	Carryover from last year	2b	228,56	0
С	Total	2c	475,90	3
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	867,25	2
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 (see instructions)	5	-391,34	9

### Part IV Supplemental Information

Complete 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, line 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493225030383

OMB No 1545-0047

Open to Public Inspection

### **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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

► Attach to Form 990. ► See separate instructions.

	e of the organization nal Cattlemen's Beef Association Inc	Employer identification number				
Nau	nal Cathemen's been Association inc		84-0738973			
Pa	Organizations Maintaining Donor A organization answered "Yes" to Form 99		unds or Accounts. Complete if the			
		(a) Donor advised funds	(b) Funds and other accounts			
L	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 adv funds are the organization's property, subject to the	_	or advised Yes No			
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the beiconferring impermissible private benefit					
Par	Conservation Easements. Complete	ıf the organization answered "Yes" to	Form 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat  Preservation of open space  Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	cion or pleasure) Preservation of an Preservation of a c	ertified historic structure			
	easement on the last day of the tax year	Г	Held at the End of the Year			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements	5	2b			
c	Number of conservation easements on a certified his		2c			
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d			
3	Number of conservation easements modified, transf the taxable year -	erred, released, extinguished, or terminate	d by the organization during			
4	Number of states where property subject to conserv	ation easement is located ►	<u> </u>			
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		lling of violations, and  Yes No			
5	Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation easem	ents during the year ▶			
7	A mount of expenses incurred in monitoring, inspect  \$\mathbb{F}\$\$	ing, and enforcing conservation easements	during the year			
В	Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion Yes No			
9	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial	·			
ar	Organizations Maintaining Collection Complete if the organization answered		or Other Similar Assets.			
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi	d for public exhibition, education or researc	h in furtherance of public service,			
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research in				
	(i) Revenues included in Form 990, Part VIII, line 3	L	<b>▶</b> \$			
	(ii) Assets included in Form 990, Part X		<b>►</b> \$			
2	If the organization received or held works of art, his following amounts required to be reported under SFA		r financial gain, provide the			

Revenues included in Form 990, Part VIII, line 1

**b** Assets included in Form 990, Part X

	Organizations Maintaining Co		•				•				ontınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e foll	owing tl	hat are	e a significa	ant us	se of its collec	tion	
а	Public exhibition		d	Γ	Loan o	rexch	nange prog	rams			
b	Scholarly research		e	Γ	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	un how	thev	/ furthei	r the o	rganizatior	ı's ex	empt purpose	ın	
•	Part XIV	onections and expla		, circ	rareirei		rgamzatioi	, 5 CX	empe purpose		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									┌ Yes	┌ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Ye	es" to Form 9	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	ian or other interme	ediary	for c	ontribut	tions o	or other ass	ets n		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng ta	able		г				
							-	_	An	nount	
С.	Beginning balance						-	1c			
d	Additions during the year						-	1d			
e	Distributions during the year						-	1e			
f	Ending balance						L	1f			
2a	Did the organization include an amount on Fo		e 21?							│ Yes	No
b	If "Yes," explain the arrangement in Part XIV				1 1157		- 000				
Pa	rt V Endowment Funds. Complete	the organization (a)Current Year		were Prior \			- <b>orm 990,</b> o Years Back		t IV, line 10. Three Years Back	(a)Four	ears Back
1a	Beginning of year balance	(a)Curient fear	(D)	PHOL	rear	(C)TW	o rears back	(a)	illee fears back	(e)roui	ears back
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities							+			
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment 🕨										
c	Term endowment ▶										
За	Are there endowment funds not in the posse	ssion of the organiz	atıon t	hat a	re held	and a	dmınıstere	d for	the		
	organization by									Yes	No
	(i) unrelated organizations			•				•	3a		<del>                                     </del>
	(ii) related organizations								3a(	<del> </del>	<del>                                     </del>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second secon							•	3	<b>D</b>	<u> </u>
-	Describe in Fait XIV the intellued uses of th	e organization s en		iiit iu	iius						
Dar	TVI Land Buildings and Equipme	nt Soo Form 90	ı∩ D∍	rt V	lino 1	Λ					
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	0, Pa				(h)C+	_ 41	(-)		
Par	Description of property	ent. See Form 99	90, Pa	(a)	, line 1 ) Cost or is (invest	other	(b)Cost or basis (oth		(c) Accumulate depreciation	ed (d)	3ook value
		ent. See Form 99	00, Pa	(a)	) Cost or	other				ed <b>(d)</b> I	3ook value
1a	Description of property	e <b>nt.</b> See Form 99	90, Pa	(a)	) Cost or	other				ed (d)	Book value
1a   b	Description of property	e <b>nt.</b> See Form 99	00, Pa	(a)	) Cost or	other	basis (oth		depreciation	(a)	300k value 170,788
1a b	Description of property  Land	ent. See Form 99	00, Pa	(a)	) Cost or	other	basis (oth	er)	depreciation	346	
1a b c d	Description of property  Land		· · ·	(a) bas	) Cost or is (investi	other ment)	1,06 79	5,134 2,165	894,3 590,0	346	170,788

Part VII Investments—Other Securities. S	See Form 990, Part X, line 17	2.
(a) Description of security or category	( <b>b)</b> Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1) Financial derivatives	<del>-  </del>	
(2)Closely-held equity interests Other	· ·	
o their		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	·	
Part VIII Investments—Program Related.	See Form 990, Part X, line :	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Social situation for the situation of th
	<del></del>	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	) <b>*</b>	
Part IX Other Assets. See Form 990, Part X		
<b>(a)</b> Des	scription	(b) Book value
(1) INVESTMENT IN SUBSIDIARY		1,402,065
(2) OTHER ASSETS		97,671
Total. (Column (b) should equal Form 990, Part X, col.(B) II	ne 15.)	1,499,736
Part X Other Liabilities. See Form 990, Pa		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
CAPITAL LEASE	1,667	
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	1,667	
2. Fin 48 (ASC 740) Footnote In Part XIV, provide the	text of the footnote to the organ	nization's financial statements that reports the

$\cdot$	text Reconcination of change in Net Assets from Form 990 to Financial Statement	ILS	
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 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p		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		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	3	
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per R	eturn
1	Total expenses and losses per audited financial	<sub>1</sub>	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses	1	
d	Other (Describe in Part XIV) 2d		
e	Add lines <b>2a</b> through <b>2d</b>	2e	
3	Subtract line <b>2e</b> from line <b>1</b>	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)		
C	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 18)	5	
	t XIV Supplemental Information		
Com	iplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	irt IV , lii	nes 1b and 2b,

Complete 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 and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
FIN 48 (ASC 740) FOOTNOTE		National Cattlemen's Beef Association (NCBA) is exempt from income taxation under Section 501(c)(6) of the Internal Revenue Code NCBA had no significant unrelated business income during the years ended September 30, 2012 or 2011 NCBA applies a more-likely-than-not measurement methodology to reflect the financial statement impact of uncertain tax positions taken or expected to be taken in a tax return After evaluating the tax positions taken, none are considered to be uncertain, therefore, no amounts have been recognized as of September 30, 2012 and 2011 If incurred, interest and penalties associated with tax positions are recorded in the period assessed as general services and administration expense No interest or penalties have been assessed as of September 30, 2012 and 2011 Tax years that remain subject to examination include 2008 through 2012

DLN: 93493225030383

OMB No 1545-0047

**Schedule J** (Form 990)

Department of the Treasury Internal Revenue Service

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

National Cattlemen's Beef Association Inc

**Employer identification number** 

84-0738973

Pa	rt I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	$\Gamma$	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org reimbursement orprovision of all the expenses descri			1b		
2	Did the organization require substantiation prior to re					
	officers, directors, trustees, and the CEO/Executive I	Directo	or, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all tha		у			
	Compensation committee	<u> </u>	Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Poor a related organization	art VII	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymen	nt?	4a		Νo
b	Participate in, or receive payment from, a supplement	al non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-bas	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro-	vide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t com	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, li compensation contingent on the revenues of	ne 1a,	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, li compensation contingent on the net earnings of	ne 1a,	, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in in Part III			8		
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	rebutt	able presumption procedure described in Regulations	9		

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		<b>(B)</b> Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) Forrest LRoberts	(I) (II)	356,672 0	0 0	121,682 0	19,600 0	18,744 0	516,698 0	0
(2) Doug Evans	(I) (II)	222,924 0	0	0	17,984 0	18,741 0	259,649 0	0
(3) Kendal S Frazier	(ı) (ıı)	240,666 0	0 0	0 0	19,600 0	12,876 0	273,142 0	0
(4) James O Reagan	(I) (II)	184,030 0	0 0	0 0	15,074 0	13,854 0	212,958 0	0
(5) Marvin L Kokes	(I) (II)	160,435 0	0 0	0 0	13,420 0	18,950 0	192,805 0	0
(6) Richard Husted	(I) (II)	174,346 0	0 0	0 0	11,785 0	18,600 0	204,731 0	0
(7) Rick H McCarty	(I) (II)	152,108 0	0 0	0 0	12,383 0	12,345 0	176,836 0	0
(8) Nancy L Rudzek	(I) (II)	149,362 0	0 0	0 0	12,341 0	8,822 0	170,525 0	0
(9) Elizabeth Parker	(ı) (ıı)	148,769 0	0 0	625 0	12,042 0	6,894 0	168,330 0	0
(10) Thomas G Field	(ı) (ıı)	143,260 0	0 0	0 0	11,801 0	18,580 0	173,641 0	0
(11) J Burton Eller	(I) (II)	172,821 0	19,055 0	40,229 0	12,830 0	2,048 0	246,983 0	0

Schedule J (Form 990) 2011 Page **3** 

### Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier Return Reference Explanation

Schedule J (Form 990) 2011

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OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions with Interested Persons**

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

2011

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<b>Name of the organization</b> National Cattlemen's Beef Association Inc										tion numbe	er	
Part I Excess Benefit Tra	 nsacti	ons (s	ection 501	′c)(3) a	and section 501	(c)(4)		<u>4-07389</u> zations (				
Complete if the organiza										ıne 40b		
1 (a) Name of disc	jualified	person			<b>(b)</b> Desc	ription	of trans	action		Cor	(c) rected?	
										Yes	No	
<ul><li>2 Enter the amount of tax impossection 4958</li><li>3 Enter the amount of tax, if any</li></ul>								vear unde <b>F</b>	r · \$ · \$			
Part II Loans to and/or					Dowt IV June 26	0 × F0 × m		-7 Dowt W	lina 20	_		
(a) Name of interested person and or fr		oan to m the zation?	(c)Orig	ınal	(d)Balance due	(e) I defau	n lt?	(f) Approved by board or committee?		<b>(g)</b> Writi	(g)Written agreement?	
(1) Forrest L Roberts	То	From				Yes	No	Yes	No	Yes	No	
Employment A greement		Х	1	50,000	120,000		No	Yes		Yes		
	$\vdash$											
Total	· ·		 : T	<b>P</b> \$	120,000	<u> </u>						
Complete if the orga			9		U. UUU.	, line 2	7.					
(a) Name of interested pers	on	(1	•	•	en interested per ganization	son	<b>(c)</b> A m	nount of g	rant or ty	pe of assi	stance	

Part IV Business Transactions I Complete if the organization			ne 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No

### Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493225030383

OMB No 1545-0047

2011

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Name of the organization
National Cattlemen's Beef Association Inc

Employer identification number

84-0738973

ldentifier	Return Reference	Explanation
Executive Committee	Part VI, Section A, Line 1a	Per the organization's bylaws, the Board of Directors shall have an Executive committee of such number as the Board sets from time to time and composed of a Policy Section and a Federation Section Members of the Board are determined in accordance with the bylaws. Subject to restrictions imposed by law and by provision of said bylaws, the Executive Committee shall exercise the authority of the Board of Directors when the Board is not in session and exercise the authority of the Policy Division and the Federation Division respectively when they are not in session.

ldentifier	Return Reference	Explanation
Members or Stockholders	Part VI, Section A, Lines 6, 7a, & 7b	The organization has six classes of membership regular members, allied industry members, product council members, state and national industry organization members, beef breed organization members, and supporting members. The association members and registrants shall elect the President, President-Elect, and a Vice President at the Stakeholders Congress. Decisions of the governing body are subject to approval by the Board of Directors. Amendments to repeal the bylaws require a two-thirds affirmative vote of the Board of Directors.

Identifier	Return Reference	Explanation
Form 990 Review Process	Part VI, Section B, Line 11b	The Form 990 is prepared by the organization's professional tax preparer and reviewed in detail by the organization's CFO and Controller. The Form 990 is presented to the organization's finance and audit committee by the professional tax preparer. A complete copy of the Form 990 is provided to the governing body before it is filed.

ldentifier	Return Reference	Explanation
Conflict of Interest Policy	Part VI, Section B, Line 12c	The organization requires all employees and board members to sign a conflict of interest policy upon hire and annually thereafter. The statements are reviewed by the Chief Executive Officer. Board members, when encountering potiential conflicts of interest, shall identify the potential conflict and, as required, remove themselves from all discussion and voting on the matter. Should an employee conflict of interest arise, the CEO, in conjunction with the Executive Management Team and legal counsel, if necessary, will investigate the situation. Depending on the evidence and the seriousness of the situation disciplinary action up to and including termination may occur.

ldentifier	Return Reference	Explanation
Process for Determining Compensation	Part VI, Section B, Lines 15a & 15b	CEO compensation is reviewed and approved by the volunteer officer group. All other Senior Executive compensation is reviewed and approved by the CEO. Employee compensation is compared against comparability data as provided by a third party compensation consultant. Compensation decisions are documented in each employee's personnel file.

ldentifier	Return Reference	Explanation
Governing Documents	Part VI, Section C, Line 19	The organization does not make its governing documents or financial statements available to the public

ldentifier	Return Reference	Explanation
Pension Plan, Employee Benefits, & Payroll Tax Expenses	9, & 10	The organization does not have a method in place of differentiating amounts expended for employee benefits from amounts expended for payroll taxes and pension plan accruals. The total amount expended on these three items is listed in Part IX, line 9, Other employee benefits.

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DLN: 93493225030383

2011

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### **SCHEDULE R** (Form 990)

### **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization National Cattlemen's Beef Association Inc				<b>Employer iden</b> 84-0738973	tification number		
Part I Identification of Disregarded Entities (Comp	lete if the organizatio	n answered "Yes"	on Form 990, Part				
<b>(a)</b> Name, address, and EIN of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income En	(e) d-of-year assets	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during		f the organization	answered "Yes" o	n Form 990, Par	t IV, line 34 becaus	e it had	one
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		(e) Public charity status (if section 501(c)(3))	<b>(f)</b> Direct controlling entity	(g) Section 512(b)(1 controlled organization	
(1) National Cattlemen's Building Corp						Yes	No
9110 E Nichols Ave Ste 300 Centennial, CO 801123425	Land Inv	CO	501(c)(2)	N/A	NCBA	Yes	
74-2200677 (2) CATL Fund						+	+
9110 E Nichols Ave Ste 300 Centennial, CO 801123425	Fundraising	со	501(c)(3)	7	NA		No
84-1256522 (3) National Cattlemen's Foundation Inc							+
9110 E Nichols Ave Ste 300 Centennial, CO 801123425	Fundraising	со	501(c)(3)	9	NA		No
23-7259504 (4) National Cattlemen's Association PAC						+	+
9110 E Nichols Ave Ste 300  Centennial, CO 801123425 84-0622929	Lobbying	со	527	n/a	na		No

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.)		

(a) ddress, and EIN of l organization	Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)			(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total Income	(g) Share of end-of-year assets	<b>(h)</b> Percentage ownership

Par	Transactions With Related Organizations (Complete if the organization answered "Ye	es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)								
	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Yes	S No						
<b>1</b> Du	ring the tax year, did the orgranization engage in any of the following transactions with one or more related orga	nızatıons lısted ın Part	s II-IV?			1						
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			14	•	No						
b	Gift, grant, or capital contribution to related organization(s)			11	,	No						
c	Gift, grant, or capital contribution from related organization(s)			10	-	No						
d	d Loans or loan guarantees to or for related organization(s)											
e	e Loans or loan guarantees by related organization(s)											
f	Sale of assets to related organization(s)			11	-	No						
g												
h	Exchange of assets with related organization(s)			11	1	No						
i l	Lease of facilities, equipment, or other assets to related organization(s)			1	1	No						
j	Lease of facilities, equipment, or other assets from related organization(s)			1:	_	No						
k	Performance of services or membership or fundraising solicitations for related organization(s)			11	·	No						
L	Performance of services or membership or fundraising solicitations by related organization(s)			1	1	No						
m												
n	n Sharing of paid employees with related organization(s)											
o	Reimbursement paid to related organization(s) for expenses			10	o Yes	;						
р												
q	Other transfer of cash or property to related organization(s)			10	1	No						
r	Other transfer of cash or property from related organization(s)			1		No						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, i	including covered relat	ionships and transact	on thresholds								
	<b>(a)</b> Name of other organization	<b>(b)</b> Transaction type(a-r)	(c) Amount involved	(d) Method of detem Involv	nınıng ai	mount						
	tional Cattlemen's Building Corporation	d	384,845	FMV								
(2)												
(3)												
(4)												
(5)												
(6)												

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

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)		(e) Are all partners section 501(c)(3) janizations?	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	(h) Dispropitionate allocations?		Share of Disproprtionate allocations? Code V—UBI amount in box		Code V—UBI amount in box 20 of Schedule K-1	V—UBI General nt in box managii nedule K-1 partner		General or managing		(k) Percentage ownership
			311/	Yes	No			Yes	No		Yes	No	ĺ				
												<u> </u>					

Schedule R (Form 990) 2011

### Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011