# \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

OMB No. 1545-0047

<u>A</u>	For the	$\simeq$ 2023 calendar year, or tax year beginning $$ OCT $$ 1 , $$ $$ 2 $$ 2 $$ 3 $$ and endi	ling $S$	EP 30, 202	4
	Check if applicable	C Name of organization		D Employer ident	ification number
	Addres				
	Name change	CAL EARLEY'C		75-0808	768
	Initial return Final	P O BOX 1890	m/suite	E Telephone num 806-372	
	return/ termin- ated			G Gross receipts \$	59,879,784.
	Ameno	<b>3</b>	ŀ	H(a) Is this a group	
	Application	,		for subordinate	
	pendin	SAME AS C ABOVE		H(b) Are all subordinate	
$\overline{\Gamma}$	Tax-exe	empt status: $X = 501(c)(3) = 501(c)(3)$ (insert no.) 4947(a)(1) or	527		a list. See instructions
	Websit			H(c) Group exemp	
K	Form of	organization: X Corporation Trust Association Other	L Year o		M State of legal domicile; TX
P	art I	Summary			
	1	Briefly describe the organization's mission or most significant activities: CAL FAR	RLEY	'S PROVIDE	S
Governance		PROFESSIONAL PROGRAMS AND SERVICES IN A CHR	IST-	CENTERED A	TMOSPHERE
rna	2	Check this box if the organization discontinued its operations or disposed or	of more t	than 25% of its net	assets.
ove	3	Number of voting members of the governing body (Part VI, line 1a)			3 16
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 16
es se	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			5 347
ξ	6	Total number of volunteers (estimate if necessary)			6 16
Activities &	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			'a 0.
_	<u> b</u>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<u></u>		7b 0.
				Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)		46,930,845	
Revenue	9	Program service revenue (Part VIII, line 2g)		42,501	
Bev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		2,911,862	
_	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,804,702	
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		53,689,910	
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		15,556,958 0	
		Benefits paid to or for members (Part IX, column (A), line 4)			* '
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		6,709,237	
Expenses	loa	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  2,738,988.		0,105,251	•
ă	17	Total fundraising expenses (Part IX, column (D), line 25) 2,738,988.  Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		17,188,603	. 16,100,798.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		56,287,581	
		Revenue less expenses. Subtract line 18 from line 12		-2,597,671	
	<u></u>	Tovolido loco expensees. Cabinade inte la nom inte 12		inning of Current Yea	
Net Assets or	20	Total assets (Part X, line 16)		51,379,929	
Ass	21	Total liabilities (Part X, line 26)		10,237,067	9,213,840.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		41,142,862	
P	art II	Signature Block		· ·	<u>, , , , , , , , , , , , , , , , , , , </u>
Und	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and	stateme	nts, and to the best of	my knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which p	preparer h		
		nuant ron		03/11	/2025
Sig	ın	Signature of Officer  MEGAN JOHNSON, CFO		Date	
He					
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		ate Check	PTIN
Pai		PAMELA ALEXANDERSON PAMELA ALEXANDERSO	ON 0	3/11/25 self-em	
	parer	Firm's name MOSS ADAMS LLP		Firm's EIN	91-0189318
Use	Only	Firm's address 6565 AMERICAS PARKWAY NE STE 600			A. A
_		ALBUQUERQUE, NM 87110		Phone no. 5	05-878-7200
Ма	y the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No

Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	CAL FARLEY'S MISSION IS TO PROVIDE PROFESSIONAL PROGRAMS AND SERVICES
	IN A CHRIST-CENTERED ATMOSPHERE TO STRENGTHEN FAMILIES AND SUPPORT THE
	OVERALL DEVELOPMENT OF CHILDREN.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
_	
3	<u> </u>
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$30,191,058. including grants of \$5,903,372. ) (Revenue \$38,888. )
	BOYS RANCH: CAL FARLEY'S OFFERS A RESIDENTIAL COMMUNITY OPEN TO
	CHILDREN AGES 5 TO 18. EACH YEAR, WE WELCOME NEW RESIDENTS FROM ACROSS
	THE NATION. THE AVERAGE LENGTH OF STAY AT BOYS RANCH IS ABOUT TWO YEARS
	BEFORE CHILDREN ARE FULLY REUNITED WITH THEIR FAMILIES. WHILE THEY
	RESIDE AT BOYS RANCH, CHILDREN RECEIVE EVIDENCE-BASED, PROFESSIONAL
	THERAPEUTIC SERVICES AND WORK TOWARD HIGHLY INDIVIDUALIZED GOALS.
	OUR PRIMARY GOAL AT BOYS RANCH IS TO PROVIDE EVERY CHILD A SAFE
	ENVIRONMENT WHERE THEY CAN BUILD MEANINGFUL, TRUSTING RELATIONSHIPS
	WITH THEIR PEERS AND RESPONSIBLE ADULTS. HOUSE PARENTS, CASE WORKERS,
	EXPERIENTIAL LEARNING MENTORS, AND OTHER ADULT ROLE MODELS GUIDE OUR
	YOUTH TO DEVELOP THEIR POTENTIAL AND BECOME PRINCIPLED, CONTRIBUTING
	0.045.060
4b	
	COMMUNITY SERVICE PROGRAMS: IN ADDITION TO THE SERVICES OFFERED AT BOYS
	RANCH, WE EXTEND SERVICES TO OUR COMMUNITY AT LARGE. OUR COMMUNITY
	SERVICE PROGRAM PROVIDES THE CONTINUATION OF CARE FOR YOUNG ADULTS WHO
	MIGHT HAVE OR HAVE NOT GRADUATED FROM BOYS RANCH AND ARE ENTERING THE
	NEXT STAGE IN LIFE: DETERMINING HOW TO LIVE THEIR NEW, INDEPENDENT
	LIVES. COMMUNITY SERVICE PROGRAMS OFFERED INCLUDE INDEPENDENT LIVING
	PROGRAM, TRANSITIONAL AFTERCARE, FAMILY PRESERVATION, FAMILY
	ENGAGEMENT, ALUMNI CASE MANAGEMENT, AND COMMUNITY COUNSELING.
	WE SERVED 603 CHILDREN AND FAMILIES IN OUR COMMUNITY SERVICE PROGRAM
	DURING THE FISCAL YEAR 2023-2024.
4c	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 32,437,026.
	Form <b>990</b> (2023)

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# Form 990 (2023) CAL FARLEY'S BOYS RANCH 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		X
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 Rev. Proc. 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 for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		<u> X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		37	
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			.,
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			х
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		
a	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	11d	Х	
_	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	- 21	
'	the organization's separate of 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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		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		<u> X</u>
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	X	
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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_	v	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	

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Form	1 990 (2023) CAL FARLEY'S BOYS RANCH 75-	0808768	Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current	<b>I</b>		
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the organization have a tax-exempt bond issue with an outstanding principal amount of the organization have a tax-exempt bond issue with an outstanding principal amount of the organization have a tax-exempt below the organization of the organization have a tax-exempt below the organization of the organiz	ne		
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			<del> </del>
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i>	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee			<del></del>
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% contr			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II			x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,	/		
20				
_	instructions for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor?   If			
а		28a		x
h	"Yes," complete Schedule L, Part IV		Х	1
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200	21	
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	000		x
20	"Yes," complete Schedule L, Part IV		Х	<del>  ^</del>
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	22	$\vdash$
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	00		x
0.4	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			<b>₩</b>
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		Х	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	<u>33</u>		-
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		v	
	Part V, line 1		X	<del>                                     </del>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>	Х	<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		37	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization			
	If "Yes," complete Schedule R, Part V, line 2	36		X
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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
D-	Note: All Form 990 filers are required to complete Schedule O	38	X	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		Ш
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	74		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	0		

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c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Form **990** (2023)

Form 990 (2023) CAL FARLEY'S BOYS RANCH
Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return	2a	347					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х			
				За	Х			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b	Х			
	At any time during the calendar year, did the organization have an interest in, or a signature or other a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
b	If "Yes," enter the name of the foreign country							
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	its (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions.			5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	anization solicit					
	any contributions that were not tax deductible as charitable contributions?			6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ions o	r gifts					
	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).					37		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices	orovided to the payor?	7a		X		
b				7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			_	v			
	to file Form 8282?	1	1	7c	X			
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7-		Х		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr			7e 7f		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g				
h								
8								
Ū	sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.			8				
а	Did the annualization contribution makes any total distributions and an action 40000			9a				
b	Did the constraint and in the contract of the			9b				
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12	10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders	11a						
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	11b	•					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	1	12a				
	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				
h	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the							
ь	organization is licensed to issue qualified health plans	13b						
С	Enter the amount of reserves on hand	13c						
14a				14a		Х		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune							
	excess parachute payment(s) during the year?			15		х		
	If "Yes," see the instructions and file Form 4720, Schedule N.			=				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t inco	me?	16		Х		
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivitie	s					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17				
	If "Yes," complete Form 6069.							

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Form **990** (2023)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 16			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 16			
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	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		X
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		X
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on 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	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		77	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		37	
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Λ	
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?	45-	Х	
	The organization's CEO, Executive Director, or top management official	15a	X	
D	Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	15b	Λ	
160				
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х
h	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	10a		- 21
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filedAL, AR, CA, CT, FL, GA, HI, IL, KS	, KY	MA .	MD
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s			
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	MEGAN JOHNSON - 806-322-2581			
	600 WEST 11TH STREET, AMARILLO, TX 79101-3228			
	SEE SCHEDIILE O FOR FILL LIST OF STATES	Г	990	(0000)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	J		((	<u> </u>	ipoi	lour	(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
rano ana mo	hours per		(do not check more to box, unless person is				compensation	compensation	amount of	
	week					r/trus		from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dire	a a			ted		organization	(W-2/1099-MISC/	from the
	related	stee	ruste			seusa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al tru	onal t		ploye	l wo		1099-NEC)		and related
	below line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) RICHARD NEDELKOFF	40.00	믹	드	9	3	를 등	-Fc			
CEO	1.00	1		x				332,111.	0.	25,127.
(2) MARK STROTHER	40.00									•
EXEC. VP & COO	1.00			Х				206,735.	0.	18,929.
(3) MEGAN JOHNSON	40.00									
CFO	1.00			Х				174,654.	0.	17,439.
(4) MICHELLE MAIKOETTER, CHIEF	40.00								_	
PROGRAM OFFICER (THRU 5/17/2024)				Х				133,495.	0.	16,202.
(5) WENDY KRISTER-HOWARD	40.00	-								
VP FOR HUMAN RESOURCES	10.00			Х				116,063.	0.	5,974.
(6) AMY SPEARS	40.00	-				l		100 000		44 000
SENIOR DIRECTOR OF DIRECT MARKETING	40.00		_			X		108,876.	0.	11,975.
(7) MIKE PACINO	40.00	-				l		100 054		12 502
GIFT OFFICER	40.00					X		103,374.	0.	13,593.
(8) RANDY CARTER	40.00	-				٦,		100 105	0	12 740
VP INFORMATION TECHNOLOGY	1 00		_			X		102,195.	0.	13,748.
(9) LANCE PURCELL	1.00	v		₩.					0	_
CHAIRMAN OF THE BOARD	1.00	Х		Х				0.	0.	0.
(10) JULIE ATTEBURY	1.00	<b>.</b> ,		<b>37</b>					0	
VICE CHAIRMAN OF THE BOARD	1.00	Х	_	Х				0.	0.	0.
(11) JOSEPH PETERSON	1.00	3,7		,,					0	
SECRETARY	1 00	Х	_	Х				0.	0.	0.
(12) TANNER ALEXANDER DIRECTOR	1.00	v							0	_
(13) MICHELLE BONNER	1 00	Х						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(14) JANE KING	1.00	Λ						· ·	0.	· ·
DIRECTOR	1.00	Х						0.	0.	0.
(15) MIKE KING	1.00	Λ	$\vdash$					0.	0.	<u></u>
DIRECTOR		Х						0.	0.	0.
(16) JOE LOVELL	1.00							•		
DIRECTOR		х						0.	0.	0.
(17) JEFF MITCHELL	1.00	<u> </u>								
DIRECTOR		Х						0.	0.	0.
	•	•				•	•	•		Farm 990 (2022)

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75-0808768

Part VII Section A Officers Directors Trus	toos Kov F	alor:		one	LUIS	hoo	+ ^-	ampanastad Empleyee	20 (	<u> </u>		
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)  (A) (B) (C) (D) (E) (F)												
(A) Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		Position (do not check more than one box, unless person is both an		Position (do not check more than one box, unless person is both an			Reportable compensation from	(E)  Reportable  compensation  from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations		
(18) WALTER "FOUR" PRICE DIRECTOR	1.00	х						0.	0.	0.		
(19) J. AVERY RUSH, III DIRECTOR	1.00	х						0.	0.	0.		
(20) RODNEY RUTHART DIRECTOR	1.00	х						0.	0.	0.		
(21) ROD SCHRODER DIRECTOR	1.00	Х						0.	0.	0.		
(22) MALCOLM SHELTON DIRECTOR	1.00	Х						0.	0.	0.		
(23) CLAUDIA STUART DIRECTOR	1.00	Х						0.	0.	0.		
(24) TOL WARE DIRECTOR	1.00	х						0.	0.	0.		
1b Subtotal c Total from continuation sheets to Part V	II, Section A							1,277,503.	0.	122,987.		
d Total (add lines 1b and 1c)								1,277,503.	0.	122,987.		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Yes No

X

X

#### **Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

the organization. Report compensation for the calendar year ending with or with	Trano organización o tax your.	_
(A)	(B)	(C)
Name and business address	Description of services	Compensation
RR DONNELLEY	PRINT VENDOR FOR	
PO BOX 932721, CLEVELAND, OH 44193	MAIL PROGRAM	2,806,012.
INTERMOUNTAIN SLURRY SEAL	MICRO-SURFACING OF	
PO BOX 742298, LOS ANGELES, CA 90074	ROADS	972,481.
EMERGENCY SERVICES FOUNDATION OF TEXAS	EMS AMBULANCE	
PO BOX 134, BOYS RANCH, TX 79010	SERVICE	615,000.
HELLAS CONSTRUCTION, INC.	CONSTRUCTION	
12000 W. PARMER LANE, CEDAR PARK, TX 78613	CONTRACTOR	595,552.
A&S GENERAL CONTRACTORS, INC.	CONSTRUCTION	
PO BOX 7446, AMARILLO, TX 79114	CONTRACTOR	489,863.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization 15		
		= 000 (assa)

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8

		Check if Schedule O contains a response of	or note to any lin	e in this Part VIII			
		•	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
					function revenue	business revenue	sections 512 - 514
တ္ထ	1 :	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts		The second secon					
چ <u>ق</u>		Membership dues 1b 1c 1c	20,440.				
ffs,			983,354.				
<u>a</u>		• • • • • • • • • • • • • • • • • • • •	<del>505,554.</del>				
Sir.							
utic er	,	All other contributions, gifts, grants, and	3392480.				
들 된			964,600 <b>.</b>				
on			304,000.	41396274.			
<u>0</u> 8	r	Total. Add lines 1a-1f	D	41390274.			
		DOVE DANGII GIIGMODIAI H	Business Code	27 626	27 626		
<u>ic</u>		BOYS RANCH CUSTODIAL F	900099	37,636.	37,636.		
er v	k	ROUGHRIDER GRILL	900099	1,252.	1,252.		
n S	(	·					
e S	•						
Program Service Revenue	•						
Δ.		All other program service revenue		22 222			
	9	Total. Add lines 2a-2f		38,888.			
	3	Investment income (including dividends, interes	st, and				
		other similar amounts)		<u>4,323,363.</u>			4323363.
	4	Income from investment of tax-exempt bond pr					
	5	Royalties		3,009,001.			3009001.
		(i) Real	(ii) Personal				
	6 a	Gross rents 6a 116,041.					
	k	Less: rental expenses 6b 13,079.					
	(	Rental income or (loss) 6c 102,962.					
	(	Net rental income or (loss)		102,962.			102,962.
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 10347593	26,000.				
	k	Less: cost or other basis					
e		and sales expenses 76 10404584	11,528.				
her Revenue	(	Gain or (loss) 7c - 56,991.	14,472.				
Re		Net gain or (loss)		-42,519.			-42,519.
ē	8 8	Gross income from fundraising events (not					
퉏		including \$ 20,440. of					
		contributions reported on line 1c). See					
		Part IV, line 18 <b>8a</b>	0.				
	k	Less: direct expenses 8b	5,840.				
	(	Net income or (loss) from fundraising events		-5,840.			-5,840.
		Gross income from gaming activities. See					
		Part IV, line 199a					
	ŀ	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
			513,421.				
	ŀ		624,099.				
		Net income or (loss) from sales of inventory		-110,678.			-110,678.
			Business Code				
ns	11 :	DAYCARE	900099	68,616.			68,616.
Miscellaneous Revenue		INSURANCE CLAIM PROCEE	900099	10,926.			10,926.
er Ver							
Sce		All other revenue	900099	29,661.			29,661.
Ξ	,	• Total. Add lines 11a-11d		109,203.			
	12	Total revenue. See instructions		48820654.	38,888.	0.	7385492.
		TOTAL TOTOLING. OUG INSTRUCTIONS		, 100200310			

332009 12-21-23

Form **990** (2023)

75-0808768 Page **10** CAL FARLEY'S BOYS RANCH Form 990 (2023) 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) Check if Schedule O contains a response or note to any line in this Part IX (**D**)
Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 5,903,372. 5,903,372. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 481,056. 481,056. individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 ...... Benefits paid to or for members ..... Compensation of current officers, directors, 1,088,247. 830,531. 178,742. 78,974. trustees, and 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) 13,144,967. 10,019,638. 2,171,504. 953,825. Other salaries and wages 7 Pension plan accruals and contributions (include 551,514. 427,252. 84,184. 40,078. section 401(k) and 403(b) employer contributions) 1,862,241. 1,490,673. 243,460. 128,108. Other employee benefits 9 1,081,655. 837,947. 165,105. 78,603. 10 Payroll taxes 11 Fees for services (nonemployees): Management 64,292. 64,292. Legal 142,045. 142,045. Accounting Lobbying Professional fundraising services. See Part IV, line 17 123,567. 123,567. Investment management fees ..... Other. (If line 11g amount exceeds 10% of line 25, 168,259. 349,523. 901,350. 383,568. column (A), amount, list line 11g expenses on Sch O.) 55,555. 2,416. 53,139. Advertising and promotion 12 856,274. 75,899. 751,535. 683,708. Office expenses 13 Information technology 14 15 Royalties 1,106,537. 846,081. 260,456. 16 Occupancy 292,412. 350,153. 36,522. 21,219. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 18,651. 18,651. 20 Payments to affiliates 21 3,797,466. 3,525,239. 272,227. Depreciation, depletion, and amortization 22 1,958,378. 1,739,696. 215,249. 3,433. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),

Form 990 (2023)

267,518.

66,172.

2,738,988.

25

1,926,263.

1,139,796.

1,519,611.

40,213,850.

813,878.

499,548.

MEDICAL

d HOME LIFE

e All other expenses

Check here

DINING HALL

amount, list line 24e expenses on Schedule O.)

REPAIRS AND MAINTENANCE

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

369,636.

179,590.

5,037,836.

1,289,109.

1,139,796.

1,273,849.

32,437,026.

813,878.

499,548.

Par	<u>t X</u>	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	246,653.	1	217,284.
	2	Savings and temporary cash investments	20,283,650.	2	15,649,093.
	3	Pledges and grants receivable, net	16,876,646.	3	16,137,291.
	4	Accounts receivable, net	791,849.	4	734,142.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
က္က	7	Notes and loans receivable, net	23,946.	7	23,259
Assets	8	Inventories for sale or use	798,949.	8	675,706.
¥	9	Prepaid expenses and deferred charges	640,701.	9	737,383
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 108, 927, 703.			
	b	Less: accumulated depreciation 10b 84,207,036.	23,282,334.	10c	24,720,667
	11	Investments - publicly traded securities	21,518,257.	11	24,251,352
	12	Investments - other securities. See Part IV, line 11	10,000.	12	207,329
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	13,327,078.	14	8,561,680
	15	Other assets. See Part IV, line 11	53,579,866.	15	66,602,494
	16	Total assets. Add lines 1 through 15 (must equal line 33)	151,379,929.	16	158,517,680
	17	Accounts payable and accrued expenses	2,376,595.	17	2,520,873
	18	Grants payable		18	
	19	Deferred revenue		19	124,979
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X	7 060 470		C F C 7 000
		of Schedule D	7,860,472.		6,567,988.
	26	Total liabilities. Add lines 17 through 25	10,237,067.	26	9,213,840.
ဖွ		Organizations that follow FASB ASC 958, check here			
]   Se	07	and complete lines 27, 28, 32, and 33.	59,527,816.	07	64,505,249.
ala	27	Net assets without donor restrictions	81,615,046.	27	84,798,591.
d B	28	Net assets with donor restrictions	01,013,040.	28	04,730,331.
Ē.		Organizations that do not follow FASB ASC 958, check here			
P	00	and complete lines 29 through 33.		00	
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
1886	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
et A	31	Retained earnings, endowment, accumulated income, or other funds	141,142,862.	31 32	149,303,840.
ž	32	Total net assets or fund balances	151,379,929.		158,517,680.
	33	Total liabilities and net assets/fund balances	131,3/3,343.	33	[ 130,317,000 (

Par	t XI Reconciliation of Net Assets				•	
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12)  Total expenses (must equal Part IX, column (A), line 25)  Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Other changes in net assets or fund balances (explain on Schedule O)	1 2 3 4 5 6 7 8 9 9	48, 40, 8, 141, 2,	820 213 606 142 135	3,85 5,86 2,86 5,86	54. 50. 04.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,		1.40	201		4.0
Dar	column (B)) rt XIII Financial Statements and Reporting	10	149,	303	3,8	40.
Гаі						
	Check if Schedule O contains a response or note to any line in this Part XII				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.	- [			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis			2a	х	Х
b	b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis  X Consolidated basis  Both consolidated and separate basis					
С	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?  If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required.			За		X
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			<b>3b</b>	990 a	(2023)

#### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

CAL FARLEY'S BOYS RANCH

Employer identification number 75 – 0808768

Pa	rt I	Reason for Public (		(All organizations must c	omplete th	nis nart ) S		5 0000700			
_		ization is not a private found					ce mendenone.				
1	Corgan	A church, convention of ch	•	• .	•	,	IV A V:\				
	H					11 170(0)(1	(ДАДI) <b>.</b>				
2	H	A school described in <b>sect</b> i				/I. \/ <b>4</b> \/ <b>A</b> \/**	•1				
3	H	A hospital or a cooperative					•	Alan Iannaitalla mana			
4	Ш	A medical research organiza	ation operated in cor	njunction with a nospital	aescribea	in sectio	n 1/0(b)(1)(A)(III). Enter	the nospital's name,			
		city, and state:									
5	Ш	An organization operated for		llege or university owned	or operate	ed by a go	vernmental unit describe	ed in			
		section 170(b)(1)(A)(iv).									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7	X										
		section 170(b)(1)(A)(vi). (C	omplete Part II.)								
8	Щ	A community trust describe	ed in <b>section 170(b)(</b>	(1)(A)(vi). (Complete Part	: II.)						
9		An agricultural research org	anization described	in section 170(b)(1)(A)(i	x) operate	ed in conju	inction with a land-grant	college			
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of the college	or			
		university:									
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership fees, and	d gross receipts from			
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support f	rom gross investment			
		income and unrelated busing	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the organization a	after June 30, 1975.			
		See section 509(a)(2). (Cor	mplete Part III.)								
11	Ш	An organization organized a	and operated exclusi	vely to test for public saf	ety. See	section 50	)9(a)(4).				
12		An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne functio	ns of, or to carry out the	purposes of one or			
		more publicly supported org	ganizations describe	d in <b>section 509(a)(1)</b> o	r <b>section</b> \$	509(a)(2).	See <b>section 509(a)(3).</b> (	Check the box on			
		lines 12a through 12d that	describes the type of	f supporting organizatior	and com	plete lines	12e, 12f, and 12g.				
а		Type I. A supporting orga	anization operated, si	upervised, or controlled	by its supp	orted org	anization(s), typically by	giving			
		the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	f the direc	tors or trustees of the su	upporting			
		organization. You must o	complete Part IV, Se	ections A and B.							
b		Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	d organization(s), by hav	ving			
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported			
		organization(s). You mus			•						
c		Type III functionally inte	-		in connect	ion with, a	and functionally integrate	ed with,			
		its supported organization	-				• •	•			
d		Type III non-functionally		·				zation(s)			
		that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distri	ibution rec	uirement and an attentiv	/eness			
		requirement (see instructi									
е	, [	Check this box if the orga	•	-							
		functionally integrated, or					31 · 7 31 · 7 31 ·				
f	Ente	er the number of supported o	* *	, 3	5 5						
g		vide the following information	•	d organization(s).							
	(	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of monetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)			
				,							
Tota	al										

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(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	38475312.	42375067.	44613236.	46930845.	<u>41396274.</u>	213790734
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	38475312.	42375067.	44613236.	46930845.	<u>41396274.</u>	213790734
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						72761220.
6	Public support. Subtract line 5 from line 4.						141029514
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	38475312.	<u>42375067.</u>	<u>44613236.</u>	46930845.	<u>41396274.</u>	213790734
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	4596071.	6178303.	7199619.	6988018.	7448405.	32410416.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	29,012.	7,549.	38,941.	9,494.		125,583.
11	<b>Total support.</b> Add lines 7 through 10						246326733
	Gross receipts from related activities,	•	,				<u>,481,030.</u>
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax y	ear as a section 5	01(c)(3)	
0-	organization, check this box and stop						
	ction C. Computation of Publi					T T	F7 0F
	Public support percentage for 2023 (I			column (f))		14	57.25 %
	Public support percentage from 2022					15	53.00 %
16a	<b>33 1/3% support test - 2023.</b> If the o						7.7
	<b>stop here.</b> The organization qualifies		•		line 45 in 00 4 /00/		
D	33 1/3% support test - 2022. If the constitution was						
47.	and <b>stop here.</b> The organization qual						
17 a	10% -facts-and-circumstances test						
	and if the organization meets the fact		•	•		•	
h	meets the facts-and-circumstances te 10% -facts-and-circumstances test	-			-		
D	more, and if the organization meets the						10/0 01
	organization meets the facts-and-circle						
18	Private foundation. If the organization		-	•	• • •		······································
	are realisation in the organization	sia not oncon a	22.011 1110 10, 101	<u>., , . , . , . , . , . , . , . </u>	., chook and box a		(Form 990) 2023

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### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						_
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	: Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, f	fourth, or fifth tax y	year as a section 5	01(c)(3) organization	on,
	ction C. Computation of Publi					<del> </del>	
	Public support percentage for 2023 (I			column (f))		15	%
	Public support percentage from 2022					16	%
	ction D. Computation of Inves					T .= I	
	Investment income percentage for 20					17	%
	Investment income percentage from					0.1/00/	%
19a	33 1/3% support tests - 2023. If the						/ is not
	more than 33 1/3%, check this box ar						L
b	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	n did not check a	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	

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Schedule A (Form 990) 2023

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# Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	NO
	1		
	2		
	За		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
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	9a		
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	9b		
	9с		
	10a		
	10b		
_		~ 000)	

Schedule A (Form 990) 2023

Pai	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			l
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s)			l
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			l
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	_		l
_	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			l
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			l
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
	Type in cupporting organizations		Yes	Na
4	Were a majority of the examplation's directors or trustees during the tay year also a majority of the directors		res	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control			l
	or management of the supporting organization was vested in the same persons that controlled or managed			l
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			l
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			l
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			l
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			l
	significant voice in the organization's investment policies and in directing the use of the organization's			l
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).	ı		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			l
	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI</b> identify			l
	those supported organizations and explain how these activities directly furthered their exempt purposes,			l
	how the organization was responsive to those supported organizations, and how the organization determined	2a		
b	that these activities constituted substantially all of its activities.  Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,	Za		
D	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	217		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
u	trustees of each of the supported organizations? If "Yes" or "No" provide details in <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes " describe in <b>Part VI</b> the role played by the organization in this regard	3b		

of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*32025 12-21-23

320 Schedule A (Form 990) 2023

Schedule	A (Form	990)	2023

5

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

3 Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Enter greater of line 2 or line 3

instructions).

Income tax imposed in prior year

3

<u>4</u> 5

6

Schedule A (Form 990) 2023

c Excess from 2021 d Excess from 2022 e Excess from 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHE	DULE A,	PAR	T II,	LINE	10,	EXPL	ANATI	ON F	OR (	OTHER	II	NCOME:		
MISC	ELLANEO	US I	NCOME											
2019	AMOUNT	: \$	26,	545.										
2020	AMOUNT	: \$	4,4	28.										
2021	AMOUNT	: \$	25,	242.										
2022	AMOUNT	: \$	9,4	94.										
2023	AMOUNT	: \$	29,	661.										
INSU	RANCE P	ROCE	EDS											
	AMOUNT			67.										
2020	AMOUNT	: \$	3,1	21.										
2021	AMOUNT	: \$	12,	424.										
2023	AMOUNT	: \$	10,	926.										
CHAL	LENGE C	OURS	E											
2021	AMOUNT	: \$	1,2	75.										
-														

# Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Name of the organization **Employer identification number** CAL FARLEY'S BOYS RANCH 75-0808768 Organization type (check one): Filers of: Section: X 501(c)( 3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** ☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h;

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

religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box

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

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

"N/A" in column (b) instead of the contributor name and address), II, and III.

or (ii) Form 990-EZ, line 1. Complete Parts I and II.

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization Employer identification number

# CAL FARLEY'S BOYS RANCH

75-0808768

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 7,983,354.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$3,277,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,247,940.	Person X Payroll
(a)	(b)	(c)	(d)
No. 4	Name, address, and ZIP + 4	\$\frac{1,243,503.}{}	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 900,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3

Name of organization Employer identification number

# CAL FARLEY'S BOYS RANCH

75-0808768

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
323453 12-26.			Schedule B (Form 990) (2023)

Daga 4

Name of organization Employer identification number

	EY'S BOYS RANCH	Mana As assessed at the second	75-0808768
fron	n any one contributor. Complete columns (a	<ul> <li>a) through (e) and the following line entry. For</li> </ul>	501(c)(7), (8), or (10) that total more than \$1,000 for tor organizations
com Use	pleting Part III, enter the total of exclusively religious, e duplicate copies of Part III if additiona	charitable, etc., contributions of \$1,000 or less for space is needed.	or the year. (Enter this info. once.) \$
No.	·	İ	(d) December of the second
rt I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		-	-
_   _			-
-			-
		(e) Transfer of gift	
	Transferee's name, address,	and ZIP + 4	Relationship of transferor to transferee
-			
.			
No. om	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
art I			
_   _			
		(e) Transfer of gift	
	Transferee's name. address.		Relationship of transferor to transferee
	Transferee's name, address,		Relationship of transferor to transferee
	Transferee's name, address,		Relationship of transferor to transferee
	Transferee's name, address,		Relationship of transferor to transferee
  No.		and ZIP + 4	
No. om	Transferee's name, address,		Relationship of transferor to transferee  (d) Description of how gift is held
om		and ZIP + 4	
om		and ZIP + 4	
om		and ZIP + 4	
om		and ZIP + 4	
om	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
om		(c) Use of gift  (e) Transfer of gift	
om	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
om	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
om art I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
om art I	(b) Purpose of gift	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held
om art I	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee
om	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee
om art I	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee
om art I	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift  and ZIP + 4  (c) Use of gift  (c) Use of gift	(d) Description of how gift is held  Relationship of transferor to transferee
om art I	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee
om art I	(b) Purpose of gift  Transferee's name, address,	(c) Use of gift  (e) Transfer of gift  (c) Use of gift  (d) Use of gift  (e) Transfer of gift	(d) Description of how gift is held  Relationship of transferor to transferee

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

CAL FARLEY'S BOYS RANCH

**Employer identification number** 75-0808768

organization answered "Yes" on Form 990, Part IV, line 6.	
	and other accounts
	and other accounts
1 Total number at end of year	
2 Aggregate value of contributions to (during year)	
3 Aggregate value of 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 funds	
are the organization's property, subject to the organization's exclusive legal control?	Yes No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only	L 165 L 140
for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring	
impermissible private benefit?	Yes No
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
1 Purpose(s) of conservation easements held by the organization (check all that apply).	
Preservation of land for public use (for example, recreation or education) Preservation of a historically imp	portant land area
Protection of natural habitat Preservation of a certified histori	ric structure
Preservation of open space	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation	
day of the tax year.	eld at the End of the Tax Year
a Total number of conservation easements 2a	
b Total acreage restricted by conservation easements 2b	
c Number of conservation easements on a certified historic structure included on line 2a 2c	
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not	
on a historic structure listed in the National Register	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization duri	iring the tax
year	
Number of states where property subject to conservation easement is located	
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	Yes No
violations, and enforcement of the conservation easements it holds?  6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easement	—
Countries voluntees needed to membering, inepeeting, nationing of violations, and embering economication eacemen	onto during the your
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements di	during the year
8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i)	
and section 170(h)(4)(B)(ii)?	Yes No
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and	
balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describe	es the
organization's accounting for conservation easements.	
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar A	Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet	
of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of publ	blic
service, provide in Part XIII the text of the footnote to its financial statements that describes these items.	
<b>b</b> If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet wor	
art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public	c service,
provide the following amounts relating to these items.	
(i) Revenue included on Form 990, Part VIII, line 1	
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	
the following amounts required to be reported under FASB ASC 958 relating to these items:	
<ul> <li>a Revenue included on Form 990, Part VIII, line 1</li> <li>b Assets included in Form 990, Part X</li> </ul>	
	chedule D (Form 990) 2023

332051 09-28-23

Par	rt III Organizations Maintaining Co	ollections of Art	, Historio	al Tre	asures, o	r Other	Simila	ır Asset	s (contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check any	of the f	ollowing that	make si	gnificant	use of its			
	collection items (check all that apply).										
а	Public exhibition	d	Loa	n or excl	nange progra	am					
b	Scholarly research	е	Oth	er							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how they f	urther th	e organizatio	n's exen	npt purpo	ose in Par	t XIII.		
5	During the year, did the organization solicit or	receive donations of	f art, histori	cal treas	ures, or othe	er similar	assets				
	to be sold to raise funds rather than to be ma								Yes		No
Par	rt IV Escrow and Custodial Arrang	gements Complete	e if the orga	anization	answered "	Yes" on F	orm 990	), Part IV,	line 9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an, or other intermedi	ary for con	tribution	s or other as	sets not	included	_		_	_
	on Form 990, Part X?							[	Yes		No
b	If "Yes," explain the arrangement in Part XIII a										
									Amount		
С	Beginning balance						1c_				
d	Additions during the year						. 1d				
е	Distributions during the year						1e				
f	Ending balance						1f	L	_		
<b>2</b> a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for escr	ow or cu	stodial acco	unt liabili	ty?	L	Yes	느	No
	If "Yes," explain the arrangement in Part XIII.										
Par	rt V Endowment Funds Complete if								T		
	-	(a) Current year	(b) Prior		(c) Two yea		` '	years back	+ ` '		
	Beginning of year balance	22,439,952.		1,732.	20,716		<u>_</u>	281,355	<del> </del>	298,	
b	Contributions	158,672.		3,465.	969	9,530.		202,768	<u> </u>		
С	Net investment earnings, gains, and losses	1,819,175.		7,823.		4,246.	1,	656,887			
d	Grants or scholarships	8,805.	4	9,071.	4:	1,503.		77,891	. 124,108.		
е	Other expenditures for facilities										
	and programs	402,226.	39	3,997.	37	5,711.		346,949	•	355,	647.
f	Administrative expenses										
g	End of year balance	24,006,768.	22,43	9,952.	21,601	L,732.	20,7	716,170	. 19,	281,	355.
2	Provide the estimated percentage of the curre		(line 1g, co	olumn (a)	held as:						
а	Board designated or quasi-endowment	.0000	_%								
b		%									
С	Term endowment 25.4000	%									
	The percentages on lines 2a, 2b, and 2c should	ıld equal 100%.									
За	Are there endowment funds not in the posses	ssion of the organizat	ion that are	e held an	d administer	ed for th	е		г	1	
	organization by:									Yes	No
									3a(i)	$\longrightarrow$	<u>X</u>
	• • • • • • • • • • • • • • • • • • • •									$\longrightarrow$	_X_
b	If "Yes" on line 3a(ii), are the related organizat								<b>3</b> b		
4 Do:	Describe in Part XIII the intended uses of the		ment fund	S.							
Par	rt VI Land, Buildings, and Equipme		Dart IV II:a	- 11- 0	Faure 000	Dort V	line 10				
	Complete if the organization answered							.			
	Description of property	(a) Cost or ot		(b) Cost			ccumulat		(d) Bool	( value	€
		basis (investm		basis (		del	oreciation	1	4 705	7	40
	Land				7,841.	60 (	110 7	10	4,727		
	Buildings		/	/ <b>,</b> _ / .	1,175.	04,0	18,7	<u> </u>	15,152	1,45	• 0 0
	Leasehold improvements		1	0 40	C E00	16	274 2	O.F.	2 111	) 2(	22
	Equipment				6,588.		$\frac{374,2}{214}$		$\frac{3,112}{1,729}$		
	Other			-	2,391.	5,8	314,1		1,728 24,720		
ı otal	I. Add lines 1a through 1e. (Column (d) must ed	nual Form 990. Part X	line 10c	column i	'H))			1 4	1 <b>4,</b> /40	,, , ,	<i>J I</i> •

Schedule D (Form 990) 2023

Part VII	Investments -	Other Securities

Complete if the organization answered "Yes"	on Form 000 Part IV line	11h Soo Form 000 Part V line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
	(b) DOOK value	(c) Wethod of Valuation. Oost of end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		

_	(3)	
	(4)	
	(5)	
	(6)	
	(7)	
	(8)	
_	(9)	

Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))

# Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN PERPETUAL TRUSTS	40,410,862.
(2) COIN, JEWELRY, ETC.	31,387.
(3) FUNDS INVESTED WITH CAL FARLEY'S BOYS RANCH FOUNDATION	22,200,000.
(4) DUE FROM CAL FARLEY'S BOYS RANCH FOUNDATION	1,949,596.
(5) RIGHT OF USE ASSETS	335,710.
(6) CASH VALUE LIFE INSURANCE POLICIES	1,674,939.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	66,602,494.

#### Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITIES	349,988.
(3) PAYABLE TO CAL FARLEY'S BOYS RANCH	
(4) FOUNDATION	6,218,000.
(5)	
(6)	
(8)	
(9)	
Total. (Column (b) must equal Form 990. Part X. line 25. col. (B))	6,567,988.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2023

UNDER THE IRC SECTION 509(A), AND, AS SUCH, CONTRIBUTIONS TO CAL FARLEY'S

QUALIFY FOR DEDUCTION AS CHARITABLE CONTRIBUTIONS.

HOWEVER, INCOME GENERATED FROM ACTIVITIES UNRELATED TO CAL FARLEY'S EXEMPT
PURPOSE IS SUBJECT TO TAX UNDER IRC SECTION 511. TASCOSA ENTERPRISES, LLC
IS A WHOLLY OWNED SUBSIDIARY OF CAL FARLEY'S AND, THEREFORE, CONSIDERED A
DISREGARDED ENTITY FOR FEDERAL INCOME TAX PURPOSES. FINANCIAL ACCOUNTING
STANDARDS BOARD (FASB) PROVIDES GUIDANCE FOR HOW UNCERTAIN TAX POSITIONS
SHOULD BE RECOGNIZED, MEASURED, DISCLOSED, AND PRESENTED IN THE
CONSOLIDATED FINANCIAL STATEMENTS. THIS REQUIRES THE EVALUATION OF TAX
POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE CAL
FARLEY'S TAX RETURN TO DETERMINE WHETHER THE TAX POSITIONS ARE
MORE-LIKELY-THAN-NOT OF BEING SUSTAINED WHEN CHALLENGED OR WHEN EXAMINED
BY THE APPLICABLE TAX AUTHORITY. TAX POSITIONS NOT DEEMED TO MEET THE
MORE-LIKELY-THAN-NOT THRESHOLD WOULD BE RECORDED AS A TAX BENEFIT OR
EXPENSE AND LIABILITY IN THE CURRENT YEAR. MANAGEMENT HAS DETERMINED THAT
THERE ARE NO MATERIAL UNCERTAIN INCOME TAX POSITIONS.

### SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization  CAL FAR	LEY'S BOYS RANCH					Employer ide	ntification number 768
	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV, I	ine 17		
Indicate whether the organization rais     a	ed funds through any of the following  e Solicitat  f Solicitat  g Special  or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	ion of ion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contribi	ustody trol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total  3 List all states in which the organization	n is registered or licensed to solicit c		 utions	or has been notified	it is e	exempt from re	aistration
or licensing.  AK, AL, AZ, AR, CA, CO, CT, 1							
MO, MS, MT, NC, ND, NE, NH, I							
WI,WV,WY							

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

Schedule G (Form 990) 2023

Part II Fundraising Events. Complete if the organization answered "Yes" on 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

		of fundraising event contributions and gro				s greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
			JAUER EVENT	(avant typa)	(total number)	col. <b>(c)</b> )
Pe			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	20,440.			20,440.
	2	Less: Contributions	20,440.			20,440.
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
"0	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
Direct E	7	Food and beverages	3,975.			3,975.
٦		Entertainment				1 065
		Other direct expenses	· · · · · · · · · · · · · · · · · · ·			1,865. 5,840.
		Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from li	. ,			-5,840.
Pa	11 irt l	<b>Gaming.</b> Complete if the organization a			eported more than	3,040.
		\$15,000 on Form 990-EZ, line 6a.				
		,	( ) 5:	(b) Pull tabs/instant		(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
eve						
ď	1	Gross revenue				
Ø	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
irect E	4	Rent/facility costs				
Ω	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 through	ı 5 in column (d)			
		Makanaharina	Second the second second			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
9	En	ter the state(s) in which the organization condu	ucts gaming activities:			
а	ls t	the organization licensed to conduct gaming ac	ctivities in each of these s	states?		
a	ıı " —	No," explain:				
10a		ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax y	ear?	Yes No
b	lf "	Yes," explain:				
	_					

Schedule G (Form 990) 2023

332082 09-13-23

Sch	edule G (Form 990) 2023 CAL FARLEY'S BOYS RANCH 75	<u>-0808</u>	768	Page 3
11	Does the organization conduct gaming activities with nonmembers?	$\square$	Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:	. —		
	The organization's facility	13a		0/6
				<u>%</u>
	An outside facility	. 13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	olf "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 of the third party:			
	Too, onto hamo and address of the ania party.			
	Name			
	Address			
16	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 proceeds to			
	retain the state gaming license?		Yes	☐ No
r	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	—		
•	organization's own exempt activities during the tax year \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	Dort III. liv	200 0	2b 10b
		art III, III	165 9,	90, 100,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
_				

Schedule G	(Form 990)	CAL	FARLEY'S	BOYS	RANCH	75-0808768	Page 4
Part IV	(Form 990) Supplemental Inform	mation	(continued)				
<u> </u>							

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization  CAL FARLE	Y'S BOYS	RANCH					Employer identification number 75-0808768
Part I General Information on Grants a							
<ol> <li>Does the organization maintain records to criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's processing the control of the contro</li></ol>	stance?				-		
Part II Grants and Other Assistance to I recipient that received more than 9					anization answered "Y	es" on Form 990, Part	IV, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BOYS RANCH INDEPENDENT SCHOOL DISTRICT - P.O. BOX 219 - BOYS RANCH, TX 79010	75-6000229	GOV	3,501,000.	0.			GENERAL OPERATIONS SUPPORT
CAL FARLEY'S BOYS RANCH FOUNDATION P.O. BOX 1890 AMARILLO, TX 79174	75-1080987	501(C)(3)	2,402,372.	0.			GENERAL OPERATION SUPPORT - ENDOWMENTS
2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations	•	•	l e line 1 table				

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

Schedule I (Form 990) 2023

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
OCATIONAL & COLLEGE SCHOLARSHIPS	105	362,786.	0.		
OOD PANTRY FOR ALUMNI	489	0.	24,072.	FMV	VARIOUS FOOD ITEMS
ARIOUS ALUMNI SUPPORT (ASSISTANCE WITH UTILITIES,					
OOD, MEDICATIONS, FUEL, FEES FOR SCHOOL PPLICATIONS, BREAVEMENT COSTS)	98	46,343.	0.		
ARIOUS ALUMNI COUNSELING, THERAPY, ETC.	1	1,976.	0.		
ALUMNI HOUSING ASSISTANCE	12	12,591.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

#### PART I, LINE 2:

THE PERFORMANCE AND PROGRESS OF SCHOLARSHIP RECIPIENTS ARE CLOSELY

MONITORED BY COPIES OF GRADES FURNISHED BY THE RECIPIENTS EACH SEMESTER AND

ON-CAMPUS VISITS BY A MEMBER OF THE SCHOLARSHIP COMMITTEE. AMOUNTS PROVIDED

TO THE BOYS RANCH INDEPENDENT SCHOOL DISTRICT ARE MONITORED BY CAL FARLEY'S

THROUGH THE CHIEF OPERATING OFFICER, WHO SERVES ON THE BOARD OF BOYS RANCH

INDEPENDENT SCHOOL DISTRICT.

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
FAMILY PRESERVATION: INTENSIVE CASE MANAGEMENT TO YOUTH AND FAMILIES; MEALS, SNACKS, SUPPLIES, FINANCIAL ASSISTANCE	157.	9,377.	0.		
FAMILY ENGAGEMENT: INTERVENTION SERVICES TO CHILDREN AND FAMILIES; MEALS, SNACKS, SUPPLIES TRANSITIONAL AFTERCARE: SUPERVISION AND SUPPORT TO	65.	2,501.	0.		
BOYS RANCH GRADUATES; SUPPORT WITH UTILITIES, RENT, MEDICAL, VEHICLE, COMPUTERS, CLOTHING, AND THERAPY	47.	21,410.	0.		

## SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

2023

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

CAL FARLEY'S BOYS RANCH

**Questions Regarding Compensation** 

Employer identification number 75-0808768

la C				N
	Check the appropriate box(es) if the organization provided			
Р	Part VII, Section A, line 1a. Complete Part III to provide any			
	First-class or charter travel	Housing allowance or residence for personal use		
	Travel for companions	Payments for business use of personal residence		
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees		
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)		
b If	f any of the boxes on line 1a are checked, did the organiza	ation follow a written policy regarding payment or		
re	eimbursement or provision of all of the expenses describe	d above? If "No," complete Part III to explain	1b	
D	Did the organization require substantiation prior to reimbur	sing or allowing expenses incurred by all directors,		
tr	rustees, and officers, including the CEO/Executive Directo	r, regarding the items checked on line 1a?	2	
In	ndicate which, if any, of the following the organization use	d to establish the compensation of the organization's		
С	CEO/Executive Director. Check all that apply. Do not check	k any boxes for methods used by a related organization to		
e	establish compensation of the CEO/Executive Director, but	t explain in Part III.		
	Compensation committee	Written employment contract		
	Independent compensation consultant	X Compensation survey or study		
	Form 990 of other organizations	X Approval by the board or compensation committee	e	
D	During the year, did any person listed on Form 990, Part VI	I, Section A, line 1a, with respect to the filing		
	organization or a related organization:			
a R	Receive a severance payment or change-of-control paymen	nt?	4a	2
b P	Participate in or receive payment from a supplemental none		41.	2
	Participate in or receive payment from an equity-based con		4.	2
	f "Yes" to any of lines 4a-c, list the persons and provide the			
O	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ntions must complete lines 5-9.		
F	For persons listed on Form 990, Part VII, Section A, line 1a	, did the organization pay or accrue any compensation		1
C	contingent on the revenues of:			1
a T	he organization?		5a	2
				2
	f "Yes" on line 5a or 5b, describe in Part III.			
F	For persons listed on Form 990, Part VII, Section A, line 1a	, did the organization pay or accrue any compensation		
C	contingent on the net earnings of:			
a T	he organization?		6a	2
			01-	7
	f "Yes" on line 6a or 6b, describe in Part III.			
	For persons listed on Form 990, Part VII, Section A, line 1a	, did the organization provide any nonfixed payments		
		, , , , , , , , , , , , , , , , , , ,	7	2
	Vere any amounts reported on Form 990, Part VII, paid or			Π
	nitial contract exception described in Regulations section	·	8	2
	f "Yes" on line 8, did the organization also follow the rebut			
			9	

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

Schedule J (Form 990) 2023

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on 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 aren't 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, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) RICHARD NEDELKOFF	(i)	332,111.	0.	0.	16,943.	8,184.	357,238.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARK STROTHER	(i)	206,735.	0.	0.	10,430.	8,499.	225,664.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	174,654.	0.	0.	8,583.	8,856.	192,093.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
(	(ii)							
	(i)							
(	(ii)							
	(i)							
(	(ii)							
	(i)							
(	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

(Form 990)

# **Transactions With Interested Persons**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the	ne organization	CAL FARLE	V'S BOVS	! PA1	исн				-	rident 3087		on nu	mber
Part I						on 501(c)(4), and sec	ction 501(c)(29) orga				00		
1 diti						art IV, line 25a or 25b							
1		(b) F	Relationship bet				, OF 1 OHH 990-LZ, 1	ait v, i	V, line 40b.  ction  (d) Correct  Yes \$ \$  26; or if the organization				
• <b>(a)</b> Na	ame of disqualified p	person	person and o			(0	(c) Description of transaction						No
(1)											1		
(2)											$\top$		
(3)											$\top$		
(4)											$\top$		
(5)											$\top$		
(6)													
	the amount of tax i	incurred by the o	rganization mar	nagers	or disc	ualified persons duri	ng the vear under						
		-		_			•		\$	,			
						ganization							
		,,				,u			*				
Part II	Loans to and	d/or From Int	erested Per	sons									
	Complete if the	organization ansv	vered "Yes" on	Form 9	90-EZ	. Part V. line 38a. or l	Form 990. Part IV. li	ne 26:	or if th	he ora:	anizati	on	
	•	ount on Form 990				, ,,	,, .	,		3-			
		(b) Relationship	(c) Purpose	(d) Loan to or		(e) Original	(f) Balance due	(q	( <b>a</b> ) In				Vritten
•	rested person	with organization	of loan		n the zation?	principal amount	(1, 20.01.00 000		ult?	by bo	narn or i 😘		ement?
				То	From			Yes	No			Yes	No
(1)													
(2)										1			
(3)										1			
(4)										1			
(5)										1			
(6)													
(7)													
(8)													
(9)													
(10)													
Total		•				\$							
Part III	Grants or As	sistance Ber	efiting Inter	este	l Per								
	Complete if the	organization ansv	vered "Yes" on	Form 9	90, Pa	art IV, line 27.							
(a) N	Name of interested p		<b>(b)</b> Relationship interested per the organiz	betwe	en	(c) Amount of assistance	(d) Type assistar				e) Purp assista		f
(1)													
(2)													

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

Schedule L (Form 990) 2023

(3) (4) (5) (6) (7) (8) (9)

Part IV	Business Transactions Involvi	ing Interested Persons		75 0000	, , ,	r age z	
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 28a, 28	3b, or 28c.				
(;	a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
		f the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.  Iterested person (b) Relationship between interested person and the organization transaction			Yes	No	
	GENERAL CONTRACTORS	35% CONTROLLED ENTI	2,554,461.	CONSTRUCTIO		Х	
(2)							
(3)							
(4) (5)							
(6)							
(7)							
(8)							
(9)							
(10) Part V	Supplemental Information						
T art v	• •	onses to questions on Schedule I. See	instructions				
	1 Tovide additional information for respe	vises to questions on concade E. Gee	matructions.				
SCH L,	PART IV, BUSINESS T	RANSACTIONS INVOLVIN	G INTERESTE	D PERSONS:			
(A) NA	ME OF PERSON: A&S GE	NERAL CONTRACTORS					
(B) RE	LATIONSHIP BETWEEN II	NTERESTED PERSON AND	ORGANIZATI	ON:			
35% CC	NTROLLED ENTITY OF A	PERSON LISTED ON PA	RT VII				
(D) DE	SCRIPTION OF TRANSAC	TION: CONSTRUCTION A	ND REMODELS	OF BUILDING	GS		
ON CAM	IPUS.						

## **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

CAL FARLEY'S BOYS RANCH

Employer identification number 75-0808768

	CAL FARLEY S	БОТЪ	KANCH		/5-0808/68
Pa	rt I Types of Property				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d)  Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods	X		35,557.	FMV
6	Cars and other vehicles	X	1	28,146.	FMV
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	8	21,054.	FMV
10	Securities - Closely held stock			-	
11	Securities - Partnership, LLC, or				
-	trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution -				
	Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential	Х	1	230,000.	APPRAISAL
16	Real estate - Commercial	X	1		APPRAISAL
17	Real estate - Other		_	002,0707	
18	Collectibles				
19	Food inventory	X	1	480.	FMV
20	Drugs and medical supplies		<del>-</del>	1000	
21	Taxidermy				
22					
23	Historical artifacts				
	Scientific specimens				
24	Archeological artifacts Other (FISH FOR PONDS )	X	3	26,240.	EM77
25		X	2	14,020.	
26	T TITE CE O CIT	X	7	2,650.	
27	DDAGDIN GUDDI II	X	1	1,478.	
28					FMV
29	Number of Forms 8283 received by the organi	•			0
	for which the organization completed Form 82	83, Part V, L	onee Acknowledg	ement <b>29</b>	0
					Yes No
30a	During the year, did the organization receive b				
	must hold for at least 3 years from the date of		ntribution, and whi	ch isn't required to be used	
	exempt purposes for the entire holding period	?			30a X
b	If "Yes," describe the arrangement in Part II.				
31	Does the organization have a gift acceptance	•	•	•	tions? 31 X
32a	Does the organization hire or use third parties	or related or	ganizations to solid	cit, process, or sell noncash	
	contributions?				32a X
b	If "Yes," describe in Part II.				
33	If the organization didn't report an amount in o	olumn (c) fo	r a type of property	for which column (a) is che	cked,
	describe in Part II.				

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

Schedule M (Form 990) 2023

Schedule M (Form 990) 2023

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
PART I, OTHER TYPES OF PROPERTY:
GIFT CARDS
(A) CHECK IF APPLICABLE = X
(B) NUMBER OF CONTRIBUTIONS = 6
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 102.
(D) METHOD OF DETERMINING REVENUE: FMV

## SCHEDULE O (Form 990)

Department of the Treasury

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 Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

2023
Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

CAL FARLEY'S BOYS RANCH

Employer identification number 75-0808768

•
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
TO STRENGTHEN FAMILIES AND SUPPORT THE OVERALL DEVELOPMENT OF CHILDREN.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
MEMBERS OF SOCIETY.
CHILDREN ATTEND ONE OF THREE ON-CAMPUS SCHOOLS (ELEMENTARY, MIDDLE, AND
HIGH SCHOOL) AND LIVE IN GROUP HOMES WITH SUPPORTIVE HOUSE PARENTS. WE
ARE PROUD TO OFFER A VARIETY OF ACADEMIC, VOCATIONAL, SPIRITUAL, AND
EXTRA-CURRICULAR ACTIVITIES TO HELP OUR CHILDREN BECOME RESPONSIBLE,
CONFIDENT, RESILIENT YOUNG ADULTS.
COM IDENT, MEDIETENT TOUNG IDENTS.
WE SERVED 147 CHILDREN AT THE RANCH DURING THE FISCAL YEAR 2023-2024.
FORM 990, PART VI, SECTION A, LINE 2:
WALTER "FOUR" PRICE AND TOL WARE, BUSINESS RELATIONSHIP. RODNEY RUTHART AND
MALCOLM SHELTON, BUSINESS RELATIONSHIP.
FORM 990, PART VI, SECTION A, LINE 4:
THE CHANGES TO THE BYLAWS INCLUDED AN UPDATE TO ENTITY NAMES, AN INCREASE
IN THE PERCENTAGE REQUIRED FOR A QUORUM AND A REMOVAL OF IN PERSON
ATTENDENCE LANGUAGE, A REMOVAL OF THE AGE QUALIFICATION OF OFFICERS, AND A
CHANGE IN GOVERNANCE AND COMMITTEE TERM LENGTH.
FORM 990, PART VI, SECTION B, LINE 11B:

LHA 332211 11-14-23

THE 990 IS PRESENTED BY THE AUDITORS AT THE MARCH BOARD MEETING. A COPY OF

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

Schedule O (Form 990) 2023

Schedule O (Form 990) 2023 Page 2

Name of the organization

CAL FARLEY'S BOYS RANCH

Employer identification number 75-0808768

THE 990 IS GIVEN TO THE BOARD MEMBERS FOR REVIEW PRIOR TO THE BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST QUESTIONNAIRE IS SENT TO DIRECTORS AND OFFICERS

ANNUALLY. THE PRESIDENT/CEO ENSURES THAT ALL ARE COMPLETED AND MAINTAINED

ON FILE IN THE OFFICE. IF A CONFLICT ARISES, THE PERSON WITH THE CONFLICT

IS NOT ALLOWED TO VOTE ON THE TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15:

A COMPENSATION STUDY IS PERFORMED ANNUALLY REGARDING CEO SALARY. THE

RESULTS ARE PRESENTED TO THE BOARD FOR DELIBERATION AND ULTIMATE SALARY

DETERMINATION AS PART OF THE CEO'S ANNUAL EVALUATION. COMPARABLE DATA IS

USED IN THE STUDY. THIS PROCESS IS DOCUMENTED AND HAS NOT CHANGED FROM THE

PRIOR YEAR.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AR,CA,CT,FL,GA,HI,IL,KS,KY,MA,MD,ME,MI,MN,MS,NC,ND,NH,NJ,NM,NY,OR,PA,RI

SC,TN,UT,VA,WI,WV

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE

AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION'S FINANCIAL

STATEMENTS AND ANNUAL REPORT ARE AVAILABLE TO THE PUBLIC THROUGH ITS

WEBSITE WWW.CALFARLEY.ORG.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE-PROMISES TO GIVE

-2,933,831.

628552 1

Schedule O (Form 990) 2023	Page 2
Name of the organization  CAL FARLEY'S BOYS RANCH	Employer identification number $75-0808768$
CHANGE IN VALUE-MINERAL INTERESTS	-4,765,397.
CHANGE IN VALUE IN BENEFICIAL INTEREST IN PERPETUAL TRUSTS	5,117,523.
TOTAL TO FORM 990, PART XI, LINE 9	-2,581,705.

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

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

CAL FARLEY'S	BOYS RANCH					75-08087	68	
Part I Identification of Disregarded Entities. Comple	ete if the organization answered "Yes	on Form 990, Part IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state of foreign country)	or Total inco	me End-of-yea		(f) Direct controlli entity		9
TASCOSA ENTERPRISES, LLC 46-2347447								
600 SW 11TH STREET								
AMARILLO, TX 79101	PROVIDES INFRASTRUCTURE	TEXAS		0. 19	97,329.	329. CAL FARLEY'S BOYS RA		
Part II Identification of Related Tax-Exempt Organizations during the tax year.	cations. Complete if the organization	answered "Yes" on Form 990	D, Part IV, line 34, t	pecause it had one	or more	related tax-exen	npt	
(a)	(b)	(c)	(d)	(e)		(f)	. (	<b>g)</b> 512(b)(13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Dire	ect controlling		512(b)(13) rolled
of related organization		foreign country)	section	status (if section		entity	1	tity?
				501(c)(3))			Yes	No
CAL FARLEY'S BOYS RANCH FOUNDATION -								
75-1080987, P.O. BOX 1890, AMARILLO, TX					CAL FA	ARLEY'S BOYS		
79174-1890	CHILD & FAMILY SERVICES	TEXAS	501(C)(3)	LINE 12A,I	RANCH		Х	
	$\dashv$							
	-							

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

Schedule R (Form 990) 2023

Page 2

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. Part III

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	g Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproporti allocation		Code V-UBI amount in box 20 of Schedule	General of managin partner?	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
											1
	I	l .	l	1			<u> </u>				

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) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total income	end-of-year	(h) Percentage ownership	512(b	tion b)(13) rolled tity?
		country)		or trust)		assets		Yes	Т
TRUST UNDER WILL OF FAYE MCINTIRE -	]		CAL FARLEY'S						
75-6112086, PO BOX 1, AMARILLO, TX 79105	PERPETUAL TRUST	TX	BOYS RANCH	TRUST	96,575.	2,353,836.	100%		X
PEELER CHARITABLE TRUST - 75-6599973									
PO BOX 1			CAL FARLEY'S						
AMARILLO, TX 79105	PERPETUAL TRUST	TX	BOYS RANCH	TRUST	185,617.	10,248,403.	100%		Х
MARION F. VAN STREAIN PERPERTUAL CHARITABLE									
TRUST F/B/O CAL FARLEY'S BOYS RA, PO BOX 1,	1		CAL FARLEY'S						
AMARILLO, TX 79105	PERPETUAL TRUST	TX	BOYS RANCH	TRUST	115,200.	2,591,176.	100%		X
DUNSTON, LEROY AND PATRICIA									
PO BOX 1	1		CAL FARLEY'S						
AMARILLO, TX 79105	UNITRUST	TX	BOYS RANCH	TRUST	0.	325,081.	100%		Х
CHARITABLE REMAINDER TRUSTS (1)									
PO BOX 1	CHARITABLE REMAINDER								
AMARILLO, TX 79105	TRUST	TX	N/A	TRUST					X

Page 3

Yes No

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

(4) CAL FARLEY'S BOYS RANCH FOUNDATION

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?								
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity								
		ift, grant, or capital contribution to related organization(s)							
	Gift, grant, or capital contribution from related organization(s)								
d	d Loans or loan guarantees to or for related organization(s)								
	Loans or loan guarantees by related organization(s)				1e	X			
f	f Dividends from related organization(s)								
	g Sale of assets to related organization(s)								
h	Purchase of assets from related organization(s)				1h		X		
i	i Exchange of assets with related organization(s)								
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X		
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X		
- 1	I Performance of services or membership or fundraising solicitations for related organization(s)								
m	m Performance of services or membership or fundraising solicitations by related organization(s)								
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	on(s)			1n	X			
0	Sharing of paid employees with related organization(s)				10	X			
							Х		
р	p Reimbursement paid to related organization(s) for expenses								
q Reimbursement paid by related organization(s) for expenses							X		
							Х		
r	r Other transfer of cash or property to related organization(s)								
s	s Other transfer of cash or property from related organization(s)								
_2_	If the answer to any of the above is "Yes," see the instructions for information on w	ho must complete th	is line, including covered r	elationships and transaction thresholds.					
	(a) Name of related organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount ir					
(1)	(1) CAL FARLEY'S BOYS RANCH FOUNDATION B 2,402,372. ACTUAL AMOUNT TRANSFER								
(2)	L FARLEY'S BOYS RANCH FOUNDATION C 7,983,354. ACTUAL AMOUNT TRANSFERRED								
(3) (	CAL FARLEY'S BOYS RANCH FOUNDATION	E	6,218,000.	FMV					

(5)

D

1,949,596.FMV

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) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec 501(c)(3) orgs.?	(g) Share of end-of-year assets	Dispretion allocat	opor- late tions?	General manage partner	(k) al or Percentage ging ownership
									+
									-
									000) 0000

Schedule R (Form 990) 2023