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### Form **990**

Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

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

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

2008
Open to Public

A F	or the	2008 calendar year, or tax year beginning and ending	<del></del>	mspection
	heck if	C Name of organization	D Employer identifi	nation number
D C	neck if pplicabl	_   Please	D Employer Identific	cation number
	∏Addre	use IRS THE FARMERS EDUCATIONAL AND COOPERATIVE		
<u> </u>	_lchang	print or UNION OF AMERICA	4	
<u></u>	Name chang	Doing Business As	84-0	200555
	Initial return	See Number and street (or P.O. box if mail is not delivered to street address) Room/suite	E Telephone number	r
	Termir	Specific Instruct 400 NORTH CAPITAL STREET N.W 790	(202	)554-1600
$\overline{}$	Amen		G Gross receipts \$	3,885,799
	⊒return ∏Applic			
_	⊥tion pendii		H(a) Is this a group re	Yes X N
		F Name and address of principal officer	for affiliates?	
			H(b) Are all affiliates inc	
		empt status. X 501(c) ( 5 ) ◀ (insert no ) 4947(a)(1) or 527	If "No," attach a	list (see instructions)
		e: ▶ N/A	H(c) Group exemption	
K T	ype of	organization: X Corporation	of formation: 1902 N	State of legal domicile: C
Pa	rt I	Summary		
4	1	Briefly describe the organization's mission or most significant activities TO PROTECT	AND ENHANC	E THE
ဦ		ECONOMIC WELL-BEING AND QUALITY OF LIFE FOR FA		
<u>na</u>		Check this box  if the organization discontinued its operations or disposed of mor		
Activities & Governance				
ပ္ပို		Number of voting members of the governing body (Part VI, line 1a)	3	2
∞ಶ		Number of independent voting members of the governing body (Part VI, line 1b)	4	
ies	5	Total number of employees (Part V, line 2a)	5	2
₹	6	Total number of volunteers (estimate if necessary) RECEIVED	6	
5	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	<172,123
_	b	Net unrelated business taxable income from Form 990 T line 34	7b	<172,123
		AU 1071. 10 90 70000 1 1 2	Prior Year	Current Year
اہا	8	Contributions and grants (Part VIII, line 1h)	11101 1001	1,150,557
Revenue		Program service revenue (Part VIII, line 2g) OGDEN, UT	1,267,019.	227,512
ě				
8		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	890,698.	981,729
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,233,053.	1,272,145
$\dashv$	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,504,918.	<u>3,631,943</u>
ĺ	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	220,481.	<u>136,366</u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
တ္က	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,743,972.	2,122,201
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
8	b.	Fotal fundraising expenses (Part IX, column (D), line 25)		
ŭΙ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,727,406.	1,672,171
			3,691,859.	3,930,738
		Fotal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		
- 8	19	Revenue less expenses Subtract line 18 from line 12	<186,941.	
ts or			Beginning of Year	End of Year
asset Raset	20	Total assets (Part X, line 16)	21,878,968.	<u> 18,940,750</u>
뙻	21	Total liabilities (Part X, line 26)	1,742,853.	2,241,732
됦	22	Net assets or fund balances Subtract line 21 from line 20	20,136,115.	16,699,018
Pa	rt II	Signature Block		
		Under penalties of perpty) I declare that have stammed this return, including accompanying schedules and statements, and complete Declaration of preparer (other then officer) is based on all information of which preparer has any knowledge	and to the best of my knowledg	e and belief, it is true, correct,
		and complete Declaration of preparer (other then officer) is based on all information of which preparer has any knowledge	. •	•
O:		Koral Mun	/ -	1_09
Sign		Signature of officer		1-09
Here	•		Dale	
		Koger Johnson, President		
		Type or print name and title	<u> </u>	
		Preparer's A - 1 1 - COA Date Ch		's identifying number
Paid		Self and Sel	f- ployed $\blacktriangleright$ (see inst	ructions)
repa	arer's	Firm's name (or BONDT & CO T.T.C		
Use C	Only	yours ir	EIN ►	<del> </del>
		address, and		2 500 5005
		ZIP+4 ENGLEWOOD, CO 80112	Phone no. ► 30	<u> 13-799-6826                                   </u>
May	the IA	S discuss this return with the preparer shown above? (see instructions)		X Yes No

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Form **990** (2008)

	n 990 (2008) UNION OF AMERICA	84-02005	55 Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission		
	TO PROTECT AND ENHANCE THE ECONOMIC WELL-BEING AND QUA	LITY OF LI	FE FOR
	FAMILY FARMERS AND RANCHERS AND THEIR RURAL COMMUNITIE	S	
		<u> </u>	<u> </u>
2	Did the organization undertake any significant program services during the year which were not listed on	<b>-</b>	. —
	the prior Form 990 or 990-EZ?		Yes X No
	If "Yes", describe these new services on Schedule O.		. —
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service if "Yes", describe these changes on Schedule O	s?	Yes X No
4	Describe the exempt purpose achievements for each of the organization's three largest program services by	avnancac	
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	-	
	allocations to others, the total expenses, and revenue, if any, for each program service reported	or grants and	
	and data to data to the total disposition, and so to		
4a	(Code ) (Expenses \$ 482,206. including grants of \$ )	(Revenue \$	
-	GOVERNMENT RELATIONS-NFU'S GOVERNMENT RELATIONS OFFICE		EIR
	MEMBERS DIRECT LINK TO CONGRESS, THE US DEPT OF AGRICU		
	KEY ADMINISTRATION AGENCIES. THE OFFICE ADVOCATES POLI		
	PROMOTES LEGISLATION, RESPONDS TO PROPOSED RULES AND R		
	BRINGS MATTERS TO THE ATTENTION OF TOP OFFICIALS THROU		
	MEETINGS, LETTERS, ISSUE BRIEFINGS AND OTHER MEANS.		
4b		(Revenue \$	)
	MEMBERSHIP SERVICES-PROVIDING MEMBERSHIP SERVICES TO F.		
	STATES AND KEEPING THEM CONNECTED TO THE FARMING INDUS	TRY AND PRO	DVIDING
	A SUPPORT SYSTEM.		<del></del>
4c	(Code ) (Expenses \$ 374,439. including grants of \$ )(	Revenue \$	)
	EDUCATION & COOPERATIVE DEVELOPMENT-EDUCATION OF ITS M		THE
	TECHNIQUES OF FARMING, PRODUCTION, DISTRIBUTION AND TH	E PROCESS (	F
	PURCHASING AND MARKETING AGRICULTURAL PRODUCTS.		
			<u> </u>
			<del></del>
			<u></u>
4d	,		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
<u>4e</u>	Total program service expenses ▶\$ 1,316,351. (Must equal Part IX, Line 25, column (B)	<u>'</u>	

Form 990 (2008) UNION OF AMERICA
Part IV Checklist of Required Schedules

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		_		
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1		
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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? If "Yes," complete Schedule C, Part II	4	_X	ļ
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	_9_		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	_X_	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was			
	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		_ X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			••
45	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity	1 1		
46	located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			7.7
17	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
18	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I  Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	18	+	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19 20	+	X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
 22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	X	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20	*	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K		ĺ	
	If "No", go to question 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	]	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			· <del>-</del>
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X

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			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	j	x
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Х	L.
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		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 nathership for federal income tay purposes? If "Ves." complete Schedule R. Part VI	27		Y

Form 990 (2008) Part V

008) UNION OF AMERICA
Statements Regarding Other IRS Filings and Tax Compliance

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			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns Enter 0 if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		X
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 21			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	<u>3a</u>	Х	<u> </u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<u>3b</u>	X	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<u>4a</u>	_	X
D	If "Yes," enter the name of the foreign country			1
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			1
<b>E</b> ~	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>.</b>		v
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<u>5a</u> 5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	ວນ		
Ŭ	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		<u> </u>
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			ı
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		v
	benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		X
-	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7 <u>9</u> 7h		X
	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3)			
_	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
	excess business holdings at any time during the year?	8	ŀ	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter: N/A			
	Initiation fees and capital contributions included on Part VIII, line 12	İ		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter N/A			
	Gross income from members or shareholders  11a			
D	Gross income from other sources (Do not net amounts due or paid to other sources against			
22	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts, is the organization filing Form 990 in lieu of Form 10412	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b	12a	-	—
	1 1001 CHEST THE BRIDGHT OF TAX EXCHIPT INTEREST TECEIVED OF ACCIDED DUILING THE YEAR 11/10 120	<u></u>	990 (	

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Form 990 (2008) UNION OF AMERICA 84-0200555 Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			1
	processes, or changes in Schedule O. See instructions	İ	İ	
1a	Enter the number of voting members of the governing body  1a 23	2		
b	Enter the number of voting members that are independent	<u>)</u>		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	_	Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9a	Does the organization have local chapters, branches, or affiliates?	9a		_X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		_X
<u>Sec</u>	tion B. Policies			
			Yes	_No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c_		
13	Does the organization have a written whistleblower policy?	13		_ <u>X</u> _
14	Does the organization have a written document retention and destruction policy?	14	-	_X_
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a		<u> </u>
b	Other officers or key employees of the organization?	15b		<u> </u>
	Describe the process in Schedule O (see instructions)		ľ	
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			7.7
	taxable entity during the year?	16a		<u> </u>
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's		-	
<u></u>	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE	_		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	tor		
	public inspection. Indicate how you make these available. Check all that apply			
	Own website			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public	_		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion.		
	THE ORGANIZATION - (202)554-1600			
832006	400 NORTH CAPITAL STREET N.W, NO. 790, WASHINGTON, DC 20001			

Form 990 (2008) UNION OF AMERICA

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

### Section A. Officer's, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

Check this box if the organization did not compensate any officer, director, trustee, or key employee

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

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

(A)	(B)	y officer, director, trusto (C)						(D)	(E)	(F)
Name and Title	Average hours	(c	Position (check all that appl				ıly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	director	Institutional trustee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ROB WELLS										•
TRUSTEE/PART-TIME		╁	├		-	-	_	0.	0.	0.
DAVID COKER TRUSTEE/PART-TIME								0.	0	0
JOAQUIN CONTENTE		$\vdash$	┢	_	-	<del> </del>		U.	0.	0.
TRUSTEE/PART-TIME						Ì		0.	0.	0.
GARY TURNER			_	$\vdash$				•	<u> </u>	
TRUSTEE/PART-TIME								o.	0.	0.
BRYAN SHARP										
TRUSTEE/PART-TIME								0.	0.	0.
JIM BENHAM										
TRUSTEE/PART-TIME								0.	0.	0.
CHRIS PETERSON	İ									
TRUSTEE/PART-TIME	_	ļ			L			0.	0.	0.
DONN TESKE								_	_	
TRUSTEE/PART-TIME			_					0.	0.	0.
MARILYNN MOMBER										•
TRUSTEE/PART-TIME DOUG PETERSON				_				0.		0.
TRUSTEE/PART-TIME_								0.	ا ۱	0
RUSS KREMER	<del>-  </del>	<del>                                     </del>		$\neg$		-	-	0.	0.	0.
TRUSTEE/PART-TIME_							i	0.	0.	0.
ALAN MERRILL		-			_			0.		
TRUSTEE/PART-TIME								0.	0.	0.
JOHN HANSEN										
TRUSTEE/PART-TIME								0.	0.	0.
JEFF LAFLEUR										
TRUSTEE/PART-TIME								0.	0.	0.
ROBERT CARLSON										
TRUSTEE/PART-TIME	_	Щ	ļ					0.	0.	0.
ROGER WISE							ł			
TRUSTEE/PART-TIME								0.	0.	0.
RAY WULF										•
TRUSTEE/PART-TIME	i							0.	0.	0. Form <b>990</b> (2008)

Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

0

from the organization

			N OF AMER	ICA	<del></del> -		84-0200	)555 Page 9
Pa	rt V	III Statement of Reve	nue					
		; :;			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts ats	1 a	a Federated campaigns	. 1a		İ			
gifts, gran	t	Membership dues	1b	1,009,827.				
	C	Fundraising events	1c					
ig i	C	d Related organizations	10					
sin,	•	e Government grants (contribut	tions) 1e					
Contributions, gifts, grants and other similar amounts	f	f All other contributions, gifts, gran						
		similar amounts not included abo	ove 11 1	<u>40,730.</u>				i
Ϋ́	_	Moncash contributions included in lines	s 1a-1f \$		1150557			
<u> </u>		Total. Add lines 1a-1f		D O. d.	<u> 1150557.</u>			
	•	CONVENTION		Business Code	206,700.	206 700		}
Š	2 a	NEWSLETTER			20,812.	206,700. 20,812.		
Ser					20,012.	20,012.		
Program Service Revenue							-	
ğœ	•	· · · · · · · · · · · · · · · · · · ·	•					
<u>r</u>		All other program service reve	enue					
		Total. Add lines 2a-2f	•	<b></b>	227,512.	·		
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		<b>•</b>	982,704.			982,704.
	4	Income from investment of ta	x-exempt bond p	roceeds		-		
	5	Royalties		<b>_</b>				
			(ı) Real	(II) Personal				
	6 a		81,733.					
	b	Less: rental expenses	253856.					
İ		Rental income or (loss)	<172,123.	<u> </u>	150 100		150100	
		Net rental income or (loss)			<172,123.	<u> </u>	<172123.	<u> </u>
İ	7 a	Gross amount from sales of	(i) Securities <975.	(II) Other				
		assets other than inventory  Less cost or other basis	<u> </u>	<u> </u>				
İ	L.	and sales expenses						
	c	Gain or (loss)	<975.	>				
		Net gain or (loss)	1375	<b>•</b>	<975.	> <975.	<b>,</b>	
6		Gross income from fundraisin	g events (not			3,00		
Other Revenue		including \$	of					
ě		contributions reported on line	1c) See					
<u>بر</u>		Part IV, line 18	a					
ŧ۱	b	Less direct expenses	b					
	С	: Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming ac	tivities See					
		Part IV, line 19	a					
ŀ		Less. direct expenses	ьl					
i		Net income or (loss) from gam	-	<u> </u>				
	10 a	Gross sales of inventory, less						
	_	and allowances	a					
		Less: cost of goods sold	b   a of inventors					
	<u> </u>	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
-	11 2	USE OF NAME FEE		Business Code	1365431.			1 2/5 424
		OTHER REVENUE			68,052.	68,052.		1,365,431.
		LIFE MEMBERSHIP			9,300.	9,300.		
		All other revenue	<del></del>		1,485.	1,485.		
		Total, Add lines 11a-11d		<b>•</b>	1444268.			
1	10	Total Revenue Add total to 20 2	4 = 04 74 0- 0		3631943	305 374	<b>172122</b>	2 240 125

Form **990** (2008)

UNION OF AMERICA Part IX | Statement of Functional Expenses

Form 990 (2008)

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (C) Management and (A) Total expenses (B) Program service (**D**) Fundraising Do not include amounts reported on lines 6b. 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 136,366 the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 711,002. 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) 1,109,165 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 302,034 Other employee benefits 9 Payroll taxes 10 Fees for services (non-employees) Management 31,279. b Legal 23,051. Accounting C 9,623 Lobbying Professional fundraising services. See Part IV, line 17 e Investment management fees q Advertising and promotion 12 36,363 Office expenses 13 Information technology 14 Royalties 15 375,825 Occupancy 16 <u>134,558</u> Travel 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 110,664 Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 <u> 27,675.</u> Depreciation, depletion, and amortization 22 Insurance 23 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) a MISC 212,141 b SPECIAL PROJECTS 122,846. 106,975. c DUES <u>84,8</u>09 d DIRECTORS FEES & EXPENS 66,841 e ALL STATES CAMP 329,521 f All other expenses 930,738 Total functional expenses. Add lines 1 through 24f 25 Joint Costs. Check here 
\_\_\_\_\_ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

84-0200555 Page 10

THE FARMERS EDUCATIONAL AND COOPERATIVE Form 990 (2008) UNION OF AMERICA 84-0200555 Page 11 Part X Balance Sheet (A) (B) Beginning of year End of year 171,352. 306,421 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 279,030 377,085. 4 Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L. 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 18,298. 27.584 Inventories for sale or use 8 189,450. 159,169. Prepaid expenses and deferred charges 9 1,251,681. 10a Land, buildings, and equipment; cost basis 10a b Less accumulated depreciation. Complete 732,401 490,263. Part VI of Schedule D 10b 10c 519,280. 11 Investments - publicly traded securities 11 20,554,845. 17,509,417. 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 Intangible assets 14 166,444 51,080. 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 878,968 18,940,750. 16 16 234.348. 168,487. 17 Accounts payable and accrued expenses 17 18 Grants payable 18 41,904 145,583. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow account liability Complete Part IV of Schedule D 21 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 146,025. 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable 60,000. 24 24 1,386,437. 1,801,801. Other liabilities. Complete Part X of Schedule D 25 25 1,742,853. 2,241,732. Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here 

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 20,136,115. 16,699,018. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here 
and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32

Financial Statements and Reporting Yes No X Accrual Other Accounting method used to prepare the Form 990 Cash 2a Were the organization's financial statements compiled or reviewed by an independent accountant? X 2a Х b Were the organization's financial statements audited by an independent accountant? 2b c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Х Act and OMB Circular A-133? За b If "Yes," did the organization undergo the required audit or audits?

20,136,115

21,878,968.

33

16,699,018.

18,940,750.

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

### SCHEDULE C

(Form 990 or 990-EZ)

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

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

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ.

Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

• Secti	on 501(c)(4), (5), or (6) organiza	ations Complete Part III			
		MERS EDUCATIONA	L AND COOPER	RATIVE Emp	loyer identification number
	UNION C	F AMERICA			84-0200555
Part I-	A To be completed b	y all organizations exer	npt under sectior	1 501(c) and section 5	27 organizations.
	See the instructions for S	Schedule C for details			
1 Prov	ride a description of the organi	zation's direct and indirect polit	ical campaign activities	s in Part IV	
2 Polit	ical expenditures			▶ :	B
3 Volu	nteer hours				
					,
Part I-	B To be completed b	y all organizations exer	npt under section	1 501(c)(3).	
	See the instructions for S	Schedule C for details.			
1 Ente	r the amount of any excise tax	incurred by the organization ur	nder section 4955	▶ 5	S
2 Ente	r the amount of any excise tax	incurred by organization mana-	gers under section 495	55 <b>▶</b> 9	Yes No
3 If the	e organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a Was	a correction made?				Yes No
	es," describe in Part IV				
Part I-	C To be completed b	y all organizations exen	npt under section	i 501(c), except section	on 501(c)(3).
	See the instructions for S	Schedule C for details			· · · · · · · · · · · · · · · · · · ·
1 Ente	r the amount directly expende	d by the filing organization for s	ection 527 exempt fun	ction activities	S
2 Ente	r the amount of the filing orgar	nization's funds contributed to o	ther organizations for		
exer	npt function activities			▶ \$	S
3 Tota	of direct and indirect exempt	function expenditures Add line	s 1 and 2 and enter he	ere and on	
	n 1120-POL, line 17b			▶ \$	Yes No
	he filing organization file Form				
		nployer identification number (E			
		of the amount was paid from the		•	
		separate political organization,	, such as a separate se	egregated fund or a political	action committee (PAC)
II au	ditional space is needed, provi				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
				filing organization's funds If none, enter -0-	contributions received and promptly and directly
				idido il none, enter o	delivered to a separate
					political organization. If none, enter -0-
	<del></del>				ii none, enter -o-
	<del></del>		<del></del>	<del></del>	
		<del></del>	-		<del>                                     </del>
					<del> </del>
	<del></del>			<del>-</del>	<del> </del>

Schedule C (Form 990 or 990-EZ) 2008				84-0	200555 Page 2
Part II-A To be completed b				t filed Form 5768	3
(election under sec			chedule C for details		
	ition belongs to an aff	- ·			
B Check ▶ if the filing organiza	ition checked box A a	nd "limited control" p	rovisions apply		<del></del>
	ts on Lobbying Expe ditures" means amo	nditures unts paid or incurred	I.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion	(grassroots lobbying)	-		
<b>b</b> Total lobbying expenditures to infl	uence a legislative bo	dy (direct lobbying)		8,909.	
c Total lobbying expenditures (add I	ines 1a and 1b)		<u> </u>	8,909.	
d Other exempt purpose expenditure	es		ļ		
e Total exempt purpose expenditure	•	•		<u> </u>	
f Lobbying nontaxable amount Ent	er the amount from th	e following table in bo	oth columns	1,782.	
If the amount on line 1e, column (a) o	or (b) is: The lot	bying nontaxable ar	nount is:		
Not over \$500,000		the amount on line 1			
Over \$500,000 but not over \$1,00		00 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5			cess over \$1,000,000.		
Over \$1,500,000 but not over \$17		00 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000		000.			
g Grassroots nontaxable amount (er	nter 25% of line 1f)			446.	<del></del>
h Subtract line 1g from line 1a Enter	,	an line a		1101	
i Subtract line 1f from line 1c Enter	=		Ī	7,127.	
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organi	zation file Form 4720	. ,,==,,	
reporting section 4911 tax for this					Yes X No
	ations that made a s		r Section 501(h) on do not have to comp a through 2f of the inst		
			ear Averaging Period	10010113.7	
Calendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) Total
2a Lobbying non-taxable amount				1,782.	1,782.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,673.
c Total lobbying expenditures	<del></del>			8,909.	8,909.
d Grassroots non-taxable amount				446.	446.
e Grassroots ceiling amount					
(150% of line 2d, column (e))					669.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2008

Schedule C (Form 990 or 990-EZ) 2008 <u>UNION OF AMERICA</u> 84-020<u>0555 Page</u> 3 To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details (a) (b) Yes Nο Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of. a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? a Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? Other activities? If "Yes," describe in Part IV j Total lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details Yes No Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prior year? Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details Dues, assessments and similar amounts from members 1 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a b Carryover from last year 2b c Total 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) Part IV Supplemental Information Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information

### Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

THE FARMERS EDUCATIONAL AND COOPERATIVE UNION OF AMERICA

Employer identification number

Pa	rt! Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	o at a to control complete if the	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
_	are the organization's property, subject to the organization's	•	Yes No
6	Did the organization inform all grantees, donors, and donor a	_	
•	for charitable purposes and not for the benefit of the donor of		
Pa	rt II Conservation Easements. Complete if the org		
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or p	·	storically important land area
	Protection of natural habitat	· —	ied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a cor	servation easement on the last day
	of the tax year		,
	•		Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by th	e organization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, violations, a	nd
	enforcement of the conservation easements it holds?		Yes No
6	Staff or volunteer hours devoted to monitoring, inspecting, ar	nd enforcing easements during the year i	<b></b>
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing easements during the year ► 🕏	S
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
Da	conservation easements	Ant Minterior I Transcruss and	Alban Oineilan Assaula
Pai	t III Organizations Maintaining Collections of	· · · · · · · · · · · · · · · · · · ·	tner Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 6	
	If the consequent of the total of the consequent of the consequent of the consequence of		
та	If the organization elected, as permitted under SFAS 116, not		
	treasures, or other similar assets held for public exhibition, ed		blic service, provide, in Part XIV, the text of
•.	the footnote to its financial statements that describes these if		
ь	If the organization elected, as permitted under SFAS 116, to i		
	or other similar assets held for public exhibition, education, or	r research in furtherance of public service	e, provide the following amounts relating to
	these items		<b>.</b> .
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical trea		l gain, provide
	the following amounts required to be reported under SFAS 11	to relating to these items	<b>.</b> .
a	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

		F AMERICA	<del>.</del>				<u>84-02</u>	<u> 00555</u>	Page 2
Pa	rt III Organizations Maintaining C	ollections of A	rt, Historic	al Treasure	s, or Oth	er Simil	ar Asse	ts (contin	ued)
3	Using the organization's accession and other	records, check any	y of the followi	ng that are a s	ignificant us	e of its co	lection ite	ms (check	all
	that apply)								
а	Public exhibition	(	d Loan e	r exchange p	rograms				
ь	Scholarly research	•	e Other		•				
c	Preservation for future generations								
4	Provide a description of the organization's co	llections and expla	ın how they fur	ther the organ	nization's exe	empt purp	ose in Par	t XIV	
5	During the year, did the organization solicit or			_					
	to be sold to raise funds rather than to be ma						Г	Yes	☐ No
Pa	rt IV Trust, Escrow and Custodial					es" to Forn	n 990. Par		
	reported an amount on Form 990, Part		•	3.				, ,	<b>.</b>
1a	Is the organization an agent, trustee, custodia	an or other interme	diary for contril	outions or oth	er assets no	t included		<del></del>	
	on Form 990, Part X?		,					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the fo	ollowing table.						
	. , . ,		<b>g</b>					Amount	
С	Beginning balance					1c		7 4110 4111	
d						1d			
e	<b>B</b>					1e			
f	Ending balance					1f			
-	Did the organization include an amount on Fo	rm 990 Part X line	212					Yes	□ No
	If "Yes," explain the arrangement in Part XIV						<u> </u>	] 163	140
	rt V Endowment Funds. Complete if	organization answ	ered "Yes" to F	orm 990. Part	IV. line 10	-			
		(a) Current year	(b) Prior ye		years back	(d) Three y	ears hack	(e) Four y	ears hack
1a	Beginning of year balance	(6)	(2)	(0)	youro buon	(4) 111100	CUID DUON	(e) roury	cars back
b									
c	Investment earnings or losses								
d					_				
e	-a								<del></del>
•	and programs								
f	Administrative expenses								
g						<u>.                                    </u>			
2	Provide the estimated percentage of the year	end balance held a	ie.						<del></del>
– a	Board designated or quasi-endowment	ond balance note	%						
b	Permanent endowment		^*						
c	Term endowment ▶ %								
	Are there endowment funds not in the posses	-	ation that are h	eld and admir	nistered for t	he organiz	ation		
-	by	olott of the organiz	anon mar aro r	old alle admin		organiz	ation	V	es No
	(i) unrelated organizations							3a(i)	63 110
	(ii) related organizations							3a(ii)	
h	if "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule Ri	ı				3b	
4	Describe in Part XIV the intended uses of the							<u> </u>	<del></del>
	rt VI Investments - Land, Buildings			990. Part X	line 10				
	Description of investment	(a) Cost or o		Cost or other		epreciatio	n	(d) Book v	
	Description of investment	basis (investr	, , ,	asis (other)	(6)	epi ecialio	''	(u) BOOK V	alue
10	Land	320,			+		+	330	,330.
	Buildings	931,			<del>-</del>	732,40	71		, <u>330.</u> , <u>950.</u>
	Leasehold improvements	3311	271.		_	124,41	<u>- +</u>		930.
	Equipment	-							
	Other		<del></del>	<u>-</u>	<del></del>		<del></del>		
	Other  Add lines 1a-1e (Column (d) should equal For	m 000 Port V acti	mn (P) has 10	(c) 1	l		<del>_                                     </del>	E10	280

Schedule D (Form 990) 2008

Schedule D (Form 990) 2008 UNION OF AM	ERICA		84-0200555 Page <b>3</b>
Part VII Investments - Other Securities. Se	e Form 990, Part X, line 12		
(a) Description of security or category (including name of security)	(b) Book value		od of valuation of-year market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other INVESTMENTS	17,509,417.	END-OF-YEAR M	ARKET VALUE
		·	
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. Se	17,509,417.	<u> </u>	
(a) Description of investment type	(b) Book value	(c) Metho	od of valuation
		Cost or end-c	of-year market value
Total (Col (b) should equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line			(b) Book value
(a) I	Description	<del></del>	(b) Book value
	<u> </u>		
Total. (Column (b) should equal Form 990, Part X, col (B) lin  Part X Other Liabilities. See Form 990, Part X, I		·	<u> </u>
(a) Description of liability	ille 25	(b) Amount	
Federal income taxes		1 140 711	
ACCRUED PENSION COSTS LIFE MEMBERS PAYABLE	<del>-</del>	1,148,711. 653,090.	
		001 001	
Total. (Column (b) should equal Form 990, Part X, col (B) lin		L , 801 , 801 .	liability for uncertain tay positions

Sche	dule D (Form 990) 2008 UNION OF AMERICA	D CC	OF E	IVELT A	نا	0.4	0200555	Dona 4
_	rt XI Reconciliation of Change in Net Assets from Form 990 to	Final	ncial	Stateme	ents	04-	0200555	Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1			3,631	943
2	Total expenses (Form 990, Part IX, column (A), line 25)			2			3,930	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	<del>                                     </del>		<298	
4	Net unrealized gains (losses) on investments			4	+		\250	, , , , , .
5	Donated services and use of facilities			5				
6	Investment expenses			6	$\top$	•		
7	Prior period adjustments			7	-	<u>-</u>		
8	Other (Describe in Part XIV)			8	+	-	<2,718	170.
9	Total adjustments (net) Add lines 4-8			9			$\frac{1}{2},718$	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	<del>-</del>		<3,016	
	t XII Reconciliation of Revenue per Audited Financial Stateme	ents W	/ith F	Revenue	per F	Returi		
1	Total revenue, gains, and other support per audited financial statements					1	3,885	799.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12							_
а	Net unrealized gains on investments	2a						
b	Donated services and use of facilities	2b						
С	Recoveries of prior year grants	2c						
d	Other (Describe in Part XIV)	2d		253,	856.			
е	Add lines 2a through 2d					2e		856.
3	Subtract line 2e from line 1					3	3,631,	943.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1							
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a						
b	Other (Describe in Part XIV)	4b	<u> </u>			1 1		
С	Add lines 4a and 4b					4c		0.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			_		5	3,631,	<u>943.</u>
Pai	t XIII Reconciliation of Expenses per Audited Financial Statem	ents v	Vith	Expense	s per	Retu		
1	Total expenses and losses per audited financial statements					1	4,184,	594.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1 .	1					
a	Donated services and use of facilities	2a	<u> </u>			+	1	
b	Prior year adjustments	2b				- 1	ı	
С	Losses reported on Form 990, Part IX, line 25	2c		252	0.5.6	1 1	ı	
d	Other (Describe in Part XIV)	2d		253,	<u> </u>	$\left\{ \begin{array}{c} 1 \\ 1 \end{array} \right\}$	252	0.5.6
_	Add lines 2a through 2d Subtract line 2e from line 1					2e		856.
3						3	<u>3,930,</u>	/30.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b	المما	l					
	Other (Describe in Part XIV)	4a				- 1		
	Add lines 4a and 4b	4b				1 . 1		Λ
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)					4c   5	3,930,	738
	t XIV Supplemental Information					<u> </u>	3,330,	730.
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	L lines 1	la and	4 Part IV	lines 1	b and 2	2b: Part V line	4 Part
	rt XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b	.,		.,,				.,
•								
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	<del></del>							
							<del></del>	

SCHEDULE I		,					NO	OMB No 1545-0047
(Form 990)		Grants and	Grants and Other Assistance to Organizations,	e to Organization	·5			8000
			Governments, and Individuals in the U.S.	tuals in the U.S.				9007
Department of the Treasury Internal Revenue Service	_	► Complete if the organizatio	on answered "Yes," on F  ➤ Attach to Form 990.	," on Form 990, Po m 990.	ganization answered "Yes," on Form 990, Part IV, lines 21 or 22.  Attach to Form 990.		<u>.                                    </u>	Open to Public Inspection
Name of the organization THE FARMERS UNION OF AMI	IERS EDUCATIONAL PAMERICA	AND	COOPERATIVE	Ħ			Employer identi	Employer identification number 84-0500555
Part I General Information on Grants and Assistance	s and Assistance							
1 Does the organization maintain records to substantiate the amount of	is to substantiate the		s or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	tion	
criteria used to award the grants or assistance?	ssistance?		: :	G				Yes X No
	procedures for moni	toring the use of grant	runds in the Unite	d States				
7	to Governments an	d Organizations in the	e United States. C	omplete if the orga	anization answered "Y	es" on Form 990, Part	: IV, line 21, for ar	[ ≥
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed	In \$5,000 Check this	s box if no one recipier	nt received more th	ian \$5,000. Use Pa	Irt IV and Schedule I-1	(Form 990) if addition	al space is neede	<b>▲</b>
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpo or ass	(h) Purpose of grant or assistance
CALIFORNIA FARMERS INTON								
2881 GEER RD STE D	-							
TURLOCK, CA 95381			19,500	0			MEMBER SERVICE GRANTS	CE GRANTS
IOWA FARMERS UNION								
~	-							
AMES IN 50014			10 000.	0			MEMBER SERVICE GRANTS	E GRANTS
								-
	and government or	ganizations						
٦,	ons						<b>^</b>	2.
LAA FOR Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Juction Act Notice,	see the Instructions	for Form 990.				Schedule I	Schedule I (Form 990) 2008

Schedule I (Form 990) 2008

Part III

(Form 990) 2008 UNION OF AMERICA Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed

Page 2

84-0200555

(f) Description of non-cash assistance (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance 31,900, 64,966 (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance DISASTER ASSISTANCE MEMBERSHIP REBATES

Schedule I (Form 990) 2008

832102 12-18-08

### SCHEDULE J (Form 990)

### **Compensation Information**

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

2008

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury .
Internal Revenue Service

Name of the organization

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

THE FARMERS EDUCATIONAL AND COOPERATIVE

UNION OF AMERICA

Employer identification number 84-0200555

Part I **Questions Regarding Compensation** Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990. Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items 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 (e.g., maid, chauffeur, chef) b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? X 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a a Receive a severance payment or change of control payment? 4a X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X c Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of. a The organization? 5a b Any related organization? 5b If "Yes," to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. a The organization? b Any related organization? 6b If "Yes" to line 6a or 6b, describe in Part III. 7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53 4958-4(a)(3)? If "Yes," describe in Part III

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

Schedule J (Form 990) 2008

84-0200555

Schedule J (Form 990) 2008

UNION OF AMERICA

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

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

Page 2

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(Q)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	Compensation	Nontaxable benefits	(B)(I)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	<u> </u>	214,510.	0.	0	0	0	214,510.	0.
ROGER JOHNSON	<u> </u>		0.	0	0	0	0	0
	Ξ	150,01	0.	0	0	0	150,010.	0
KATY ZIEGLER THOMAS	(E)			0	0.	0	0	0
	Ξ	150,010.		0	0	0	150,010.	0.
CLAY PEDERSON	Ξ	0	0.	0	0	0	0	0
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### SCHEDULE J-2 (Form 990)

### **Continuation Sheet for Form 990**

2008
Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

Name of the Organization THE FARMERS EDUCATIONAL AND COOPERATIVE Employer Identification number UNION OF AMERICA 84-0200555

- UNION OF	AMERICA	<u>A.</u>							84-020	<u> </u>
Part I Continuation of Officers, D	irectors, Tı	rus	tee	s, t	(ey	En	npl	oyees, and Highes	t Compensated	Emplovees
(A)	(B)		_		C)			(D)	(E)	(F)
						_				
Name and Title	Average	١.		Pos				Reportable	Reportable	Estimated
	hours	(c	hec	k all	that	app	oly)	compensation	compensation	amount of
	per							from	from related	other
	week	1				활	]	the	organizations	compensation
		Individual trustee or director				Highest compensated employee	İ	organization	(W-2/1099-MISC)	from the
		=				, ii	l	(W-2/1099-MISC)	,	organization
		5	뢇	1	i	l š	l	1 ` ′		and related
		Į Š	Institutional trustee	1	8	를	İ	i		organizations
		햩	ig ig		Key employee	5		]		organizations
		100	慧	Officer	틆	] <u>E</u>	Богшег			
		Ĕ	Ĕ	₹	32	₹	횬			
KATY ZIEGLER THOMAS			Ι							
	40.00					$ \mathbf{x} $		150 010	0	•
VP-GOVT RELATIONS	40.00	⊢	⊢	<b>├</b> ─		A	ļ	150,010.	0.	0.
CLAY PEDERSON					ŀ					
<u>VP-ADMINISTRATION</u>	40.00		1	ĺ		X		150,010.	0.	0.
DAVID VELDE				T	1	1	$\vdash$			
	40.00					l	l			
LEGAL COUNSEL	40.00	ļ	_	_		X	<u> </u>	112,549.	0.	0.
JIM MILLER		1			ľ	1	]	]		
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### **SCHEDULE O**

(Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Information to Form 990**

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization

THE FARMERS EDUCATIONAL AND COOPERATIVE UNION OF AMERICA

Employer identification number 84-0200555

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
RANCHERS AND THEIR RURAL COMMUNITIES
FORM 990, PART VI, SECTION A, LINE 10: A COPY OF THE FORM 990 WAS PROVIDED TO THE ORGANIZATION'S GOVERNING BODY BEFORE IT WAS FILED.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS  GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIALS STATEMENTS
AVAILABLE UPON REQUEST.
FORM 990, PART XI, LINE 2C  THE BOARD OF DIRECTORS OF THE ORGANIZATION ASSUMES RESPONSIBILTY FOR  OVERSIGHT OF THE AUDIT.
··· <del>·</del>

Employer identification number Open to Public OMB No 1545-0047 Inspection Direct controlling Direct controlling 84-0200555 entity End-of-year assets status (if section 501(c)(3)) 3082190 Public charity Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. E 92,817 Total income Exempt Code section 9 9 Related Organizations and Unrelated Partnerships Legal domicile (state or Legal domicile (state or foreign country) foreign country) ▶ See separate instructions. THE FARMERS EDUCATIONAL AND COOPERATIVE DUALITY OF LIFE OF FARMERS PROTECT AND EHHANCE THE SCONOMIC WELL-BEING AND Primary activity Primary activity <u>@</u> Identification of Related Tax-Exempt Organizations UNION OF AMERICA NATIONAL FARMERS UNION SERVICE - 84-1502516 Identification of Disregarded Entities Name, address, and EIN Name, address, and EIN of related organization of disregarded entity 11900 EAST CORNELL AVENUE Name of the organization CO 80014 Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) AURORA Part II Part

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

Schedule R (Form 990) 2008

Page 2

84-0200555

Schedule R (Form 990) 2008 UNION OF AMERICA

Part III Identification of Related Organizations Taxable as a Partnership

≘	General or managing partner?	Yes No	_		_×					_	_	_	L			-
-	2 × 2	2 (S)	_	 		-				+					_	 $\frac{1}{1}$
_	Oisproportion-  Code V.UBI General amount in box managin ate allocations?	3 E														
	Code	2.E														
	non	ة ج			×	$\vdash$				<u> </u>			 -			 $\frac{1}{2}$
E	sproport allocate	es					_			-			 -			 ł
	<u>ā</u> #				c	╁							╁			 1
(9)	Share of end-of-year	assers														
	<u>a</u>				-	Ť	-	_							_	
Œ	Share of total income															
	Predominant income (related, investment,															]
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)	domin ated, ii															
	Pre (Tel															
	trolling /															
<u>©</u>	ct conf entity															
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<u>(</u>	Legal domicile Direct controlling (state or foreign	untry)														
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_	Primary activity															
<u>(B</u>	mary															
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	Name, address, and EIN of related organization															
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(A) Name, address, and EIN	(B) Primary activity	(C)	(D)	(E)	(F) Share of total		(H)
ızation		(state or foreign country)	(state or foreign country)	(C corp, S corp, or trust)	income	end-of-year assets	ownership
			•				
					c	c	<b>6</b>
-							
							_
							_

Schedule R (Form 990) 2008

832162 12-23-08

# Schedule R (Form 990) 2008 UNION OF AMERICA

Page 3

84-0200555

Organizations
With Related
Transactions \
Part V

<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV.		Yes No	No No
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?	<u> </u>		
a Receipt of (I) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			×
<b>b</b> Gift, grant, or capital contribution to other organization(s)		q.	×
c Gift, grant, or capital contribution from other organization(s)		<u>ئ</u>	×
d Loans or loan guarantees to or for other organization(s)		19	×
e Loans or loan guarantees by other organization(s)		1e	×
f Sale of assets to other organization(s)		#	×
g Purchase of assets from other organization(s)		1g	×
h Exchange of assets		ŧ	×
i Lease of facilities, equipment, or other assets to other organization(s)	1_	;=	×
i Lease of facilities, equipment, or other assets from other organization(s)	<u> </u>	  -	×
k Performance of services or membership or fundraising solicitations for other organization(s)	1,	     *	×
l Performance of services or membership or fundraising solicitations by other organization(s)		=	×
m Sharing of facilities, equipment, mailing lists, or other assets	•	Ē	×
n Sharing of paid employees	<u> </u>	£	×
o Reimbursement paid to other organization for expenses	1-1	10	×
p Reimbursement paid by other organization for expenses	<u> </u>	4	×
<ul> <li>q Other transfer of cash or property to other organization(s)</li> </ul>		19	×
r Other transfer of cash or property from other organization(s)		+	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	thresholds		
(A)		و	
Name of other organization(s) type	Transaction Amou type (a-r)	Amount involved	ا
(1)			
(3)			
(4)			
(5)			
(9)			
832163 12-23-08	Schedule R (Form 990) 2008	orm 990	2008

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84-0200555

Schedule R (Form 990) 2008 UNION OF AMERICA

Part VI Unrelated Organizations Taxable as a Partnership

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

								1
( <b>A</b> )	(8)	<u>(</u> )	<u> </u>		Œ	<u> </u>		
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of- vear assets	Dispropor- tionate	Code V-UBI amount in box 20	General or managing	5 <b>9</b> ,
		country)	Yes No		Yes No	of Schedule K-1 (Form 1065)	1 -	و ا
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Schedule R (Form 990) 2008

Form **8868** 

(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

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

File a separate application for each return.

OMB No 1545-1709

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box				
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).				
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.				
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)				
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete				
Part I only				
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time				
to file income tax returns.				
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit <a href="https://www.irs.gov/efile">www.irs.gov/efile</a> and click on e-file for Charities & Nonprofits				
Туре	Name of Exempt Organization	Emp	loyer identification number	
print	THE FARMERS EDUCATIONAL AND COOPERATIVE			
File by t	UNION OF AMERICA	8	4-0200555	
due date filing yo return S	te for   Number, street, and room or suite no. If a P.O. box, see instructions			
instructi				
Check type of return to be filed (file a separate application for each return)				
X       Form 990       Form 990-T (corporation)       Form 4720         Form 990-BL       Form 990-T (sec 401(a) or 408(a) trust)       Form 5227         Form 990-EZ       Form 990-T (trust other than above)       Form 6069         Form 990-PF       Form 1041-A       Form 8870				
THE ORGANIZATION - 400 NORTH CAPITAL STREET N.W, NO. 790  • The books are in the care of ▶ - WASHINGTON, DC 20001  Telephone No ▶ (202)554-1600  FAX No. ▶  • If the organization does not have an office or place of business in the United States, check this box				
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover				
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until				
2	f this tax year is for less than 12 months, check reason  Initial return  Final return		Change in accounting period	
3a	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
-	nonrefundable credits. See instructions	3a	\$	
b I	f this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			
	ax payments made. Include any prior year overpayment allowed as a credit	3b	\$	
c l	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,			
(	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).			
	See instructions	3c	\$ N/A	
Cautio	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-FO and Form	8879.1	=O for payment instructions	

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)