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Form 990

Return of Organization Exempt From Income Tax

2008

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning 07/01, 2008, and ending 06/30, 2009

Form 990 header section containing organization name (U.S. APPLE ASSOCIATION), EIN (53-0210482), address (8233 OLD COURTHOUSE RD., VIENNA, VA 22182-3816), and principal officer (NANCY FOSTER).

Part I Summary

Table with 22 rows detailing financial and operational data. Columns include: Description, Prior Year, Current Year, and Beginning/End of Year. Key items include Revenue (Total: 2,045,253), Expenses (Total: 1,901,456), and Net Assets (Total: 2,159,012).

Part II Signature Block

Signature of Nancy E. Foster, President & CEO, dated 4-12-10. Includes a declaration of accuracy under penalties of perjury.

Preparer's information: Bond Beebe, CPA, dated 4/7/2010, address 4600 EAST-WEST HIGHWAY SUITE 900 BETHESDA, MD 20814-3423, phone 301-272-6000.

May the IRS discuss this return with the preparer shown above? (See instructions) [X] Yes [] No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions

SCANNER MAY 13 2010

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Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission

TO ADVOCATE FOR AMERICAN APPLE GROWERS AND THEIR INDUSTRY PARTNERS ON
NATIONAL ISSUES IN ORDER TO PROMOTE THE PROFITABLE PRODUCTION AND
MARKETING OF APPLES AND APPLE PRODUCTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes" describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

PUBLIC AFFAIRS: DEVELOPED AND INFLUENCED FEDERAL POLICIES THAT
PRESERVED AND IMPROVED A VIABLE AMERICAN APPLE INDUSTRY FOR
GENERATIONS TO COME. ACCOMPLISHED THROUGH EDUCATION AND ADVOCACY
TO CONGRESS, FEDERAL REGULATORY AGENCIES AND THE WHITE HOUSE.

4b (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

EDUCATION: DELIVERED POSITIVE CONSUMER BENEFITS OF APPLES AND
APPLE PRODUCTS WHILE PROTECTING THEIR IMAGE AGAINST DISPARAGEMENT
IN THE MEDIA AND MARKETPLACE. MANAGED DOMESTIC CRISIS ISSUES THAT
COULD DISRUPT THE INDUSTRY AND ITS RELATIONSHIP WITH CONSUMERS.

4c (Code _____) (Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

MEMBERSHIP SERVICES: TO MAINTAIN A SATISFIED AND ENGAGED
MEMBERSHIP AND TO ENSURE THAT THE ASSOCIATION IS REPRESENTING THE
VIEWS OF THE MAJORITY OF THE APPLE INDUSTRY. TO COMMUNICATE US
APPLE'S POSITIONS AND ACTIVITIES TO THE INDUSTRY AND MEMBERSHIP,
AND REPRESENTING THE INDUSTRY TO THE MEDIA.

4d Other program services (Describe in Schedule O)
(Expenses \$ _____ including grants of \$ _____)

SEE STATEMENT 1

(Revenue \$ _____)

4e Total program service expenses ► \$

(Must equal Part IX, Line 25, column (B))

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		X
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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	X	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		
5 Sections 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	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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		X
10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		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	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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the U S ?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		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	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		X
23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No," go to question 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
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		
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		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III		X

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		
a	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)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

		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		
1a			12
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
			NONE
1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
1c			
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		
			9
2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
2b			
Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3a			
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
3b			
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)?		X
4a			
b	If "Yes," enter the name of the foreign country ▶ _____ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		
4b			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5a			
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5b			
5c	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
5c			
6a	Did the organization solicit any contributions that were not tax deductible?	X	
6a			
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	X	
6b			
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		
7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
7h			
8	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			
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
9b			
10	Section 501(c)(7) organizations. Enter		
a	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		
a	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	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

Table with 11 rows of questions regarding governing body and management. Columns include question number, description, and Yes/No checkboxes. Includes sub-questions 1a, 1b, 7a, 7b, 8a, 8b, 9a, 9b, 15a, 15b.

Section B. Policies

Table with 12 rows of questions regarding organizational policies. Columns include question number, description, and Yes/No checkboxes. Includes sub-questions 12a, 12b, 12c, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
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 for public inspection
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Part VIII Statement of Revenue

53-0210482

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	187,400.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	Total. Add lines 1a-1f		187,400.			
Program Service Revenue	2a	CONFERENCE/MEETING	Business Code 611600	163,305.	163,305.		
	b	MEMBERSHIP DUES AND ASSESSMENTS	900099	1,659,186.	1,659,186.		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		1,822,491.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		27,452.		27,452.	
	4	Income from investment of tax-exempt bond proceeds		NONE			
	5	Royalties		NONE			
	6a	Gross Rents	(i) Real				
			(ii) Personal				
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
	b	Less cost or other basis and sales expenses					
c	Gain or (loss)						
d	Net gain or (loss)		NONE				
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
b	Less direct expenses	b					
c	Net income or (loss) from fundraising events		NONE				
9a	Gross income from gaming activities See Part IV, line 19	a					
b	Less direct expenses	b					
c	Net income or (loss) from gaming activities		NONE				
10a	Gross sales of inventory, less returns and allowances	a					
b	Less cost of goods sold	b					
c	Net income or (loss) from sales of inventory		NONE				
Miscellaneous Revenue		Business Code					
11a	REIMBURSEMENTS	900099	7,800.	7,800.			
b	MISCELLANEOUS	900099	110.			110.	
c							
d	All other revenue						
e	Total. Add lines 11a-11d		7,910.				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		2,045,253.	1,830,291.		27,562.	

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the US See Part IV, line 21 . . .	10,414.			
2 Grants and other assistance to individuals in the US See Part IV, line 22	NONE			
3 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	251,991.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	NONE			
7 Other salaries and wages	434,590.			
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions). .	22,873.			
9 Other employee benefits	46,803.			
10 Payroll taxes	44,548.			
11 Fees for services (non-employees)				
a Management	NONE			
b Legal	110,171.			
c Accounting	21,653.			
d Lobbying	NONE			
e Professional fundraising services See Part IV, line 17	NONE			
f Investment management fees	NONE			
g Other	138,918.			
12 Advertising and promotion	32,281.			
13 Office expenses	145,036.			
14 Information technology	20,500.			
15 Royalties	NONE			
16 Occupancy	126,116.			
17 Travel	78,207.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	180,310.			
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization . . .	14,765.			
23 Insurance	11,142.			
24 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 DUES & SUBSCRIPTIONS -----	97,314.			
b REGISTRATION -----	5,130.			
c BAD DEBT EXPENSE -----	40,000.			
d RESEARCH AND DEVELOPMENT -----	61,374.			
e TEMPORARY ASSISTANCE -----	2,721.			
f All other expenses -----	4,599.			
25 Total functional expenses. Add lines 1 through 24f	1,901,456.			
26 Joint Costs. Check here <input type="checkbox"/> 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1
	2	Savings and temporary cash investments	1,820,443.	2 1,778,581.
	3	Pledges and grants receivable, net		3
	4	Accounts receivable, net	356,647.	4 370,633.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L		5
	6	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
	7	Notes and loans receivable, net		7
	8	Inventories for sales or use		8
	9	Prepaid expenses and deferred charges	41,855.	9 147,091.
	10a	Land, buildings, and equipment cost basis	10a 228,183.	
	b	Less accumulated depreciation Complete Part VI of Schedule D.	10b 144,430.	10c 83,753.
	11	Investments - publicly traded securities		11
	12	Investments - other securities See Part IV, line 11		12
	13	Investments - program-related See Part IV, line 11		13
	14	Intangible assets		14
	15	Other assets See Part IV, line 11	9,430.	15 18,276.
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,266,675.	16 2,398,334.	
Liabilities	17	Accounts payable and accrued expenses	152,777.	17 145,249.
	18	Grants payable		18
	19	Deferred revenue	69,569.	19 94,073.
	20	Tax-exempt bond liabilities		20
	21	Escrow account liability Complete Part IV of Schedule D		21
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22
	23	Secured mortgages and notes payable to unrelated third parties		23
	24	Unsecured notes and loans payable.		24
	25	Other liabilities Complete Part X of Schedule D	29,114.	25 NONE
	26	Total liabilities. Add lines 17 through 25.	251,460.	26 239,322.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets	1,968,813.	27 2,116,132.
	28	Temporarily restricted net assets	46,402.	28 42,880.
	29	Permanently restricted net assets		29
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30
	31	Paid-in or capital surplus, or land, building, or equipment fund		31
	32	Retained earnings, endowment, accumulated income, or other funds		32
	33	Total net assets or fund balances	2,015,215.	33 2,159,012.
	34	Total liabilities and net assets/fund balances.	2,266,675.	34 2,398,334.

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X
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 Act and OMB Circular A-133?	3a	X
b	If "Yes," did the organization undergo the required audit or audits?	3b	

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

OMB No 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **To be completed by organizations described below.**

▶ **Attach to Form 990 or Form 990-EZ.**

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

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

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization U.S. APPLE ASSOCIATION	Employer identification number 53-0210482
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Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details

- | | | | |
|---|--|------|------|
| 1 | Provide a description of the organization's direct and indirect political campaign activities in Part IV | | |
| 2 | Political expenditures | ▶ \$ | NONE |
| 3 | Volunteer hours | | NONE |

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details

- | | | | |
|----|---|------|--|
| 1 | Enter the amount of any excise tax incurred by the organization under section 4955 | | |
| 2 | Enter the amount of any excise tax incurred by organization managers under section 4955 | ▶ \$ | |
| 3 | If the organization incurred a section 4955 tax, did it file Form 4720 for this year? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4a | Was a correction made? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b | If "Yes," describe in Part IV | | |

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details

- | | | | |
|---|---|------|---|
| 1 | Enter the amount directly expended by the filing organization for section 527 exempt function activities | | |
| 2 | Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities | ▶ \$ | NONE |
| 3 | Total of direct and indirect exempt function expenditures Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b | ▶ \$ | NONE |
| 4 | Did the filing organization file Form 1120-POL for this year? | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 5 | State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV | | |

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
U S APPLE POLITICAL ACTION COMMITTEE	8233 OLD COURTHOUSE RO VIENNA, VA 22182	53-0210482	NONE	6,450.

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check if the filing organization belongs to an affiliated group.
B Check if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1 a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a Enter -0- if line g is more than line a														
i	Subtract line 1f from line 1c Enter -0- if line f is more than line c														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f of the instructions.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2008

Part II-B 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	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
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?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If "Yes," describe in Part IV			
j Total lines 1c through 1i			
2 a 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
1 Were substantially all (90% or more) dues received nondeductible by members?		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?		X

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

1 Dues, assessments and similar amounts from members	1	1,659,186.
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	62,358.
b Carryover from last year	2b	
c Total	2c	62,358.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	414,797.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5	-352,439.

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 11

Also, complete this part for any additional information

ORGANIZATION'S POLITICAL CAMPAIGN ACTIVITIES

PART 1-A, LINE 1

COLLECTED CONTRIBUTIONS AND IMMEDIATELY DEPOSITED THEM INTO U S APPLE

POLITICAL ACTION COMMITTEE ACCOUNT, TO SUPPORT THE CAMPAIGN ACTIVITIES

FOR FEDERAL, STATE AND LOCAL ELECTIONS.

Supplemental Financial Statements

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization: U.S. APPLE ASSOCIATION; Employer identification number: 53-0210482

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Includes rows for total number at end of year, aggregate contributions, aggregate grants, aggregate value, and two Yes/No questions regarding donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7

Form for Conservation Easements including checkboxes for purposes (land for public use, natural habitat, open space, historic area, historic structure), a table for 'Held at the End of the Year' (2a-2d), and various questions (3-9) about monitoring, expenses, and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a, 1b, 2, and 2a, 2b regarding reporting and amounts.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10

Table with 6 columns: (a) Current Year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g (Balance, Contributions, Earnings, Grants, Expenditures, Expenses, End of year balance)

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment %
b Permanent endowment %
c Term endowment %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

- (i) unrelated organizations
(ii) related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10

Table with 5 columns: Description of investment, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Depreciation, (d) Book value. Rows: 1a-1e (Land, Buildings, Leasehold improvements, Equipment, Other) and Total.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Table with 10 rows and 2 columns. Row 1: Total revenue (Form 990, Part VIII, column (A), line 12) 2,045,253. Row 2: Total expenses (Form 990, Part IX, column (A), line 25) 1,901,456. Row 3: Excess or (deficit) for the year Subtract line 2 from line 1 143,797. Row 4: Net unrealized gains (losses) on investments. Row 5: Donated services and use of facilities. Row 6: Investment expenses. Row 7: Prior period adjustments. Row 8: Other (Describe in Part XIV). Row 9: Total adjustments (net) Add lines 4-8. Row 10: Excess or (deficit) for the year per financial statements Combine lines 3 and 9 143,797.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Table with 5 main rows and sub-rows. Row 1: Total revenue, gains, and other support per audited financial statements 2,045,253. Row 2: Amounts included on line 1 but not on Form 990, Part VIII, line 12. Sub-rows 2a-2d. Row 2e: Add lines 2a through 2d. Row 3: Subtract line 2e from line 1 2,045,253. Row 4: Amounts included on Form 990, Part VIII, line 12, but not on line 1. Sub-rows 4a-4b. Row 4c: Add lines 4a and 4b. Row 5: Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 2,045,253.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

Table with 5 main rows and sub-rows. Row 1: Total expenses and losses per audited financial statements 1,901,456. Row 2: Amounts included on line 1 but not on Form 990, Part IX, line 25. Sub-rows 2a-2d. Row 2e: Add lines 2a through 2d. Row 3: Subtract line 2e from line 1 1,901,456. Row 4: Amounts included on Form 990, Part IX, line 25, but not on line 1. Sub-rows 4a-4b. Row 4c: Add lines 4a and 4b. Row 5: Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 1,901,456.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Series of horizontal dashed lines for providing supplemental information.

Part XIV Supplemental Information (continued)

Area with horizontal dashed lines for supplemental information.

Part III 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.

(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 non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

MONITOR USE OF GRANT FUNDS

PART I, LINE 2

THE ORGANIZATION DOES NOT MONITOR THE USE OF THE NATIONAL APPLE MONTH GRANTS, ONCE DISBURSED TO THE RECIPIENTS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

OMB No 1545-0047

2008

**Open to Public
Inspection**

Name of the organization

U.S. APPLE ASSOCIATION

Employer identification number

53-0210482

Part I Questions Regarding Compensation

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.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

2 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?

3 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.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 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?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

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.

5 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?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III

6 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?

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

8 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

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		

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

Schedule J (Form 990) 2008

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
NANCY E FOSTER	(i) 205,379.	(ii) NONE	(iii) 17,324.	13,211.	15,762.	251,676.	NONE
	(ii) NONE	NONE	NONE	NONE	NONE	NONE	NONE
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
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	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						

Part III Supplemental Information

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

Area with horizontal dashed lines for supplemental information.

**SCHEDULE J-2
(Form 990)**

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

**Open to Public
Inspection**

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

Employer Identification number

U.S. APPLE ASSOCIATION

53-0210482

Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KENNETH E GUISE REGULAR DIR./IMMED. PAST CHAIR	5.	X		X			NONE	NONE	NONE	
BRUCE GRIM REGIONAL DIRECTOR/CHAIRMAN	5.	X		X			NONE	NONE	NONE	
JOHN E GRADEN REGULAR DIRECTOR/TREASURER	5.	X		X			NONE	NONE	NONE	
JOHN TEEPLE REGIONAL DIR./VICE CHAIRMAN	5.	X		X			NONE	NONE	NONE	
GEORGE ALLAN REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
DAVID L BENNER REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
BRYAN BIXBY REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
CHRIS D BRITTON REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
WILLIAM G DODD REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
DALE FOREMAN REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
KELLY R HENGGELER REGULAR DIRECTOR	5.	X					NONE	NONE	NONE	
EDWARD J O'NEILL, III REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
LEE J PETERS REGULAR DIRECTOR	5.	X					NONE	NONE	NONE	
ROBERT G PRICE REGULAR DIRECTOR	5.	X					NONE	NONE	NONE	
JULIA ROTHWELL REGIONAL DIRECTOR/SECRETARY	5.	X		X			NONE	NONE	NONE	
TOM STOKES REGULAR DIRECTOR	5.	X					NONE	NONE	NONE	
LARRY STONEBARGER REGULAR DIRECTOR	5.	X					NONE	NONE	NONE	
MIKE WADE REGULAR DIRECTOR	5.	X					NONE	NONE	NONE	
JON WYSS REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
BILL ZIRKLE REGIONAL DIRECTOR	5.	X					NONE	NONE	NONE	
JAMES ALLEN STATE APPLE ASSOC EXEC. DIR.	5.	X					NONE	NONE	NONE	

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

Schedule J-2 (Form 990) 2008

SCHEDULE O
(Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2008

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

Name of the organization

Employer identification number

U.S. APPLE ASSOCIATION

53-0210482

REVIEW OF FORM 990 PRIOR TO FILING

FORM 990, PART VI, SECTION A, LINE 10

THE FORM 990 IS REVIEWED BY THE BOARD OF DIRECTORS PRIOR TO ITS BEING

FILED.

Name of the organization

Employer identification number

U.S. APPLE ASSOCIATION

53-0210482

PROCESS FOR DETERMINING COMPENSATION

FORM 990, PART VI, SECTION B, LINES 15A AND 15B

THE OFFICERS' FUNCTION AS THE PERSONNEL COMMITTEE IS TO MEET ANNUALLY

WITH THE PRESIDENT/CEO AND DIRECTOR OF FINANCE TO REVIEW AND SET

COMPENSATION LEVELS FOR ALL PERSONNEL. NEW COMPENSATION AMOUNTS ARE

DETERMINED BY THE CURRENT COMPENSATION LEVELS, AND ANY INCREASES ARE

APPROVED BY THE ENTIRE BOARD DURING THE YEARLY BUDGET APPROVAL PROCESS.

Name of the organization

Employer identification number

U.S. APPLE ASSOCIATION

53-0210482

DOCUMENTS AVAILABLE TO THE PUBLIC

FORM 990, PART VI, SECTION C, LINE 18

ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL

STATEMENTS AVAILALABLE TO THE PUBLIC.

Name of the organization

Employer identification number

U.S. APPLE ASSOCIATION

53-0210482

PROGRAM SERVICE ACTIVITIES

FORM 990, PART III, LINE 4D

INDUSTRY INFORMATION: TO PROVIDE RELEVANT AND TIMELY INFORMATION TO

MEMBERS OF THE U.S. APPLE INDUSTRY, GOVERNMENT OFFICIALS, MEDIA AND

OTHERS REGARDING ECONOMIC, MARKET AND TECHNICAL REGULATORY MATTERS

PERTINENT TO THE PRODUCTION AND MARKETING OF APPLES AND APPLE PRODUCTS.

NATIONAL APPLE MONTH: TO INCREASE APPLE INDUSTRY SALES AND TO ENHANCE

CONSUMER AWARENESS AND USAGE OF APPLES AND APPLE PRODUCTS, TO INCREASE

APPLE INDUSTRY SALES THROUGH A FALL RETAIL DISPLAY CONTEST,

FOODSERVICE PROMOTIONAL CONTEST, AND TO DEVELOP STRONG RELATIONS WITH

RETAIL, FOODSERVICE AND APPLE INDUSTRY MEMBERS.

TREEFRUIT TECHNICAL ADVISORY COMMITTEE: TO ENSURE THAT POTENTIAL IMPORTS

OF DECIDUOUS TREE FRUITS FROM NON-TRADITIONAL SOURCES POSE NO INSECT OR

DISEASE THREATS TO OUR DOMESTIC PRODUCTION AREAS OR FOOD SAFETY CONCERNS

TO OUR DOMESTIC MARKETS. TO PROVIDE APHIS AND OTHER FEDERAL AGENCIES

WITH SCIENTIFIC INPUT WHICH WILL BE USED TO HELP DEFINE PHYTOSANITARY

RISKS TO OUR DOMESTIC TREE FRUIT INDUSTRY AND TO ESTABLISH SCIENCE

POLICES TO PROTECT DOMESTIC PRODUCERS AND CONSUMERS.

Name of the organization

Employer identification number

U.S. APPLE ASSOCIATION

53-0210482

MEMBERS

FORM 990, PART VI, SECTION A, LINE 6

SECTION 1 - THE ASSOCIATION SHALL BE COMPRISED OF THE FOLLOWING:

(A) U.S. STATE AND REGIONAL ASSOCIATIONS OF PRODUCERS PARTICIPATING COLLECTIVELY AND REPRESENTATIVELY FOR THE PRODUCERS OF EACH STATE OR REGION OF APPLE PRODUCTION.

(B) U.S. INDIVIDUALS, PARTNERSHIPS, CORPORATIONS, COOPERATIVES AND OTHER BUSINESS ENTITIES ENGAGED IN THE PRODUCTION, PREPARING FOR MARKET OR MARKETING OF APPLES OR APPLE PRODUCTS, INCLUDING BUT NOT LIMITED TO APPLE PRODUCERS REPRESENTED BY A STATE OR REGIONAL ASSOCIATION REFERRED TO IN PARAGRAPH (A) OF THIS SECTION WHERE SUCH STATE OR REGIONAL ASSOCIATION IS A MEMBER IN GOOD STANDING WITH THE ASSOCIATION.

(C) U.S. INDIVIDUAL APPLE PRODUCERS WHO OBTAIN AND MAINTAIN THEIR OWN INDIVIDUAL MEMBERSHIP IN THE ASSOCIATION.

(D) U.S. AND FOREIGN INDIVIDUALS, PARTNERSHIPS, CORPORATIONS, COOPERATIVES AND OTHER ENTITIES ENGAGED IN A BUSINESS ASSOCIATED WITH THE FRUIT INDUSTRY.

(E) U.S. AND FOREIGN PROFESSIONAL PERSONS ASSOCIATED WITH GOVERNMENT, EDUCATIONAL AND RESEARCH INSTITUTIONS, AND OTHER ASSOCIATIONS.

SECTION 2 - MEMBER VOTING RIGHTS SHALL BE AS FOLLOWS:

(A) EACH MEMBER ASSOCIATION DESCRIBED IN SECTION 1(A) OF THIS ARTICLE SHALL BE ENTITLED TO ONE REPRESENTATIVE WHO MAY CAST ITS VOTE AT ALL ASSOCIATION MEETINGS ON SUCH MATTERS AS MAY BE BROUGHT BEFORE THE MEMBERSHIP FOR A VOTE. EACH SUCH MEMBER SHALL BE ENTITLED TO ONE ADDITIONAL REPRESENTATIVE AND VOTE FOR EACH FIVE MILLION BUSHELS OF PRODUCTION REPRESENTED OR MAJOR FRACTION THEREOF ABOVE FIVE MILLION

Name of the organization

Employer identification number

U.S. APPLE ASSOCIATION

53-0210482

BUSHELS, WHICH SHALL BE BASED ON AVERAGE PRODUCTION DURING THE
 IMMEDIATELY PRECEDING FIVE YEARS, AS DETERMINED FROM PUBLISHED REPORTS OF
 THE U.S. DEPARTMENT OF AGRICULTURE, OR IN ITS ABSENCE, OTHER CREDIBLE
 SOURCES OF INFORMATION. FORTY-TWO POUNDS SHALL BE THE APPLICABLE WEIGHT
 PER BUSHEL.

(B) EACH MEMBER DESCRIBED ABOVE IN SECTION 1(B) AND (C) SHALL HAVE THE
 RIGHT TO VOTE ON SUCH MATTERS AS SHALL BE SET FORTH IN THE BYLAWS.

(C) THOSE MEMBERS DESCRIBED ABOVE IN SECTION 1(D) AND (E) SHALL NOT HAVE
 VOTING RIGHTS.

Name of the organization

Employer identification number

U.S. APPLE ASSOCIATION

53-0210482

VOTING FOR BOARD OF TRUSTEES

FORM 990, PART VI, SECTION A, LINE 7

FIFTEEN (15) MEMBERS SHALL BE REGIONAL DIRECTORS (SERVE THREE YEAR TERMS)

ELECTED AT THE ANNUAL MEETING BY THOSE MEMBERS COMPRISED OF U.S. AND

STATE AND REGIONAL ASSOCIATIONS OF PRODUCERS PARTICIPATING COLLECTIVELY

AND REPRESENTATIVELY FOR THE PRODUCERS OF EACH STATE OR REGION OF APPLE

PRODUCTION.

NINE (9) MEMBERS SHALL BE REGULAR DIRECTORS (SERVE THREE YEAR TERMS)

ELECTED BY THOSE MEMBERS COMPRISED OF U.S. INDIVIDUAL APPLE PRODUCERS WHO

OBTAIN AND MAINTAIN THEIR OWN INDIVIDUAL MEMBERSHIP IN THE ASSOCIATION

AND U.S. INDIVIDUALS, PARTNERSHIPS, CORPORATIONS, COOPERATIVES AND OTHER

BUSINESS ENTITIES ENGAGED IN THE PRODUCTION, PREPARING FOR MARKET OR

MARKETING OF APPLES/APPLE PRODUCTS.

ONE (1) MEMBER SHALL BE THE STATE APPLE ASSOCIATION EXECUTIVE DIRECTOR

(SERVE A ONE YEAR TERM). THE INITIAL STATE APPLE ASSOCIATION EXECUTIVE

DIRECTOR SHALL BE SELECTED BY THE CHAIRMAN. THEREAFTER, SUCH DIRECTOR

SHALL BE NOMINATED BY A COMMITTEE APPOINTED BY THE CHAIRMAN AND SUBJECT

TO APPROVAL BY THE BOARD.

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION	GRANTS	EXPENSES	REVENUE
INDUSTRY INFORMATION			
NATIONAL APPLE MONTH			
TREETAC			
TOTALS			

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS

DESCRIPTION OF SERVICES COMPENSATION

MCDERMOTT, WILL & EMERY
PO BOX 7247-6751
PHILADELPHIA, PA 19170-6751

LEGAL SERVICES

110,171.

TOTAL COMPENSATION

110,171.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print <small>File by the extended due date for filing the return See instructions</small>	Name of Exempt Organization U.S. APPLE ASSOCIATION	Employer identification number 53-0210482
	Number, street, and room or suite no. If a P.O. box, see instructions. 8233 OLD COURTHOUSE RD.	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions VIENNA, VA 22182-3816	

Check type of return to be filed (File a separate application for each return)

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of MELAINE SPRIGLER
Telephone No 703 442-8850 FAX No 703 790-0845
- 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 is for

- I request an additional 3-month extension of time until 05/15/2010
- For calendar year _____, or other tax year beginning 07/01/2008, and ending 06/30/2009
- If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period
- State in detail why you need the extension _____

ADDITIONAL TIME IS REQUIRED TO ASSEMBLE THE INFORMATION IN ORDER TO FILE A COMPLETE AND ACCURATE RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$
c Balance Due. Subtract line 8b from line 8a 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	8c \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title CFO Date 2/9/10

BOND BEEBE
4600 EAST-WEST HIGHWAY SUITE 900
BETHESDA, MD 20814-3423