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Form **990**

Department cothe Treasury Internal Reverue Service EXTENSION GRANTED TO AUGUST 15, 2010

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)

2008

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

Open to Public Inspection

Form 990 (2008)

Α	For th	e 2008 calendar year, or tax year beginning OCT 1, 2008 and ending	SEP 30, 2009	
В	Check if	Please C Name of organization	D Employer identifi	cation number
4	applicab	use IRS		
	Addre			
	Name chang		31-1	299136
	lnıtıal return	i See Number and Street (of P.U. dox if mail is not delivered to street address) Koom/Sui	te E Telephone numbe	r
	Termi ation	n- Specific PO BOX 6216	(203) 988-2073
	Amen return		G Gross receipts \$	34,984.
	Application	DAMPEN, CT 0001/	H(a) Is this a group re	eturn
	pendi	F Name and address of principal officer GREG MILLER	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	luded? Yes No
		empt status X 501(c) (3) ◀ (insert no)	If "No," attach a	list (see instructions)
		te: ► WWW.NORTHERNNUTGROWERS.ORG	H(c) Group exemptio	
			ar of formation: 1911 N	A State of legal domicile: DC
P	art []	Summary		
9	1	Briefly describe the organization's mission or most significant activities TO PROMOT	E NUT GROWIN	G
ğ				
Governance	1	Check this box I if the organization discontinued its operations or disposed of mo		
Ĝ	1	Number of voting members of the governing body (Part VI, line 1a)	3	11
త	1	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
Ę	1	Total number of employees (Part V, line 2a) Total number of volunteers (estimate if necessary)	5	<u>0</u>
Activities &		Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	1,939.
ĕ		Net unrelated business taxable income from Form 990-T, line 34	7a 7b	-187.
		The difference business taxable modific from 550 1, line 54	Prior Year	Current Year
4	8	Contributions and grants (Part VIII, line 1h)	458.	115.
Revenue		Program service revenue (Part VIII, line 2g)	13,611.	17,246.
eve	1	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	26,592.	7,726.
ď	l	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,909.	9,897.
	l	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	42,570.	34,984.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	24,885.	16,484.
	l	Benefits paid to or for members (Part IX, column (A), line 4)	,	
တ္သ	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25)		
úì		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	25,759.	23,143.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A) Line 25 VED	50,644.	39,627.
	-19	Revenue less expenses Subtract line 18 from line 12	-8,074.	-4,643.
Net Assets or Fund Balances	Ì	1-1	Beginning of Year	End of Year
Sset	20	Total assets (Part X, line 16)	290,907.	<u>271,790.</u>
et A	21	Total liabilities (Part X, line 26)		
픊	22 1rt II	Net assets or fund balances Subtract line 21 from line 20 OGDEN UT	290,907.	271,790.
Pe	11 L 11	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statement	s and to the best of my knowled	and holief it is true, correct
		and complete Declaration of preparer (other than officer) is based of all information of which preparer has any knowledge	ge	ge and belief, it is the, correct,
C:	_	1 A A RANGE OF TO SE	1 6 (). ()	a 2010
Sigi Her		Sugnature of officer	Date	10010
ner		SANDRA L. ANAGNOSTAKIS, TREASURER	(9
		Type or print name and title		
_				er's identifying number
Paid		Suprature V San I	self- employed (see ins	structions)
-	arer's	Firm's name (or SEWARD AND MONDE C D A 'S	EIN ►	
Use	Only	self-employed), 296 STATE STREET		
		NORTH HAVEN, CT 06473-2165	Phone no. ▶ 2	03 248-9341
Max	tho I	29 discuss this return with the property shown shows? (see instructions)		No.

	orm 990 (2008) THE NORTHERN NUT GROWERS ASSOCIATION 31-129913	6 Page 2
Pa	Part III Statement of Program Service Accomplishments (see instructions)	
1	Briefly describe the organization's mission SEE SCHEDULE O FOR CONTINUATION	
	THE NORTHERN NUT GROWERS ASSOCIATION, INC. IS A NON-PROFIT	
	ORGANIZATION OF PEOPLE INTERESTED IN GROWING NUT TREES AND MINOR	
	FRUITS SUCH AS PAWPAWS AND PERSIMMONS. WE ACHIEVE OUR PURPOSES BY	
		H OUR
2		<u> </u>
-		es X No
		es LAINO
_	If "Yes", describe these new services on Schedule O.	(==)
3		'es X No
	If "Yes", describe these changes on Schedule O	
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	a (Code) (Expenses \$ 38,854. including grants of \$ 16,484.) (Revenue \$ 2	1,112.)
	REGARDING NUTS, NUT BEARING TREES AND MINOR FRUITS: TO PROMOTE IN	PEREST
	IN AND DISSEMINATE INFORMATION ABOUT; TO PROMOTE SCIENTIFIC RESE	
	TO PROMOTE PRODUCTION AND ADVANCE THE CULTURE AND USE OF NUTS.	HICH,
	TO INDICATE INDUCTION THE INDUCTION CONTINUE THE CONTINUE AND ONE OF MOID:	
		
4b	b (Code) (Expenses \$ including grants of \$) (Revenue \$	
	/\muses	,
4c	c (Code) (Expenses \$ including grants of \$) (Revenue \$	
70	γ (Louis) (Expenses ψ) (Including grains of ψ) (Interende ψ	,
	I Other and the Color I I O	
4d		
	(Expenses \$ including grants of \$) (Revenue \$)	
_4e		
	Forn	n 990 (2008)

Form 990 (2008)			GROWERS	ASSOCIATION	31-1299	136	Pa	age 3
Part IV Checklist of F	Required	Schedules						
							Yes	No
•								

			Yes	No
1	ls the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	_X_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	ļ		
	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
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		
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
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	Х	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
••	If "Yes," complete Schedule D, Parts VI, 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			
12	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	. 140		
U	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
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			- 23
15	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	13		
16		46		х
47	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	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		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	-lf-"No"-, go-to question-25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a		l	
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X_
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a		İ	
	prior year? If "Yes," complete Schedule L, Part I	25b		<u> </u>
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			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		<u>X</u>
		E0	990 c	วกกฉา

Part IV Checklist of Required Schedules (continued) Yes No 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)? If "Yes," complete Schedule L, Part IV Х 28a b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV X 28b 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? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 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 X Schedule N, Part II 32 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 X 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 X 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? X If "Yes," complete Schedule R, Part V, line 2 35 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 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

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b Did the organization make a distribution to a donor, donor advisor, or related person?

Section 501(c)(7) organizations, Enter: N/A a initiation fees and capital contributions included on Part VIII, line 12

-a-Did-the organization-make any taxable distributions under section 4966?

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Section 501(c)(12) organizations. Enter N/A

a Gross income from members or shareholders

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)

Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

10a

10b

11a

11b

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9a

9b

12a

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,				
	processes, or changes in Schedule O. See instructions				
1a	Enter the number of voting members of the governing body	L 1			
b	Enter the number of voting members that are independent	L 1			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other				
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	. L	4		X
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?	L	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	-			
	governing body?	Ŀ	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b_		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
	by the following:			-	
а	The governing body?	L	8a	X	
b	Each committee with authority to act on behalf of the governing body?	<u> </u>	8b		<u>X</u>
9a	Does the organization have local chapters, branches, or affiliates?	!	9a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,		-		
	and branches to ensure their operations are consistent with those of the organization?	4	9b_		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must		ł		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	L	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		<u> </u>
Sec	tion B. Policies				
		_		Yes	No
	Does the organization have a written conflict of interest policy? If "No," go to line 13	1	2a		<u>X</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise				
	to conflicts?	1	2b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe				
	in Schedule O how this is done		2c		
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		<u>X</u>
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:	_ _	-		77
	-The organization's CEO, Executive Director, or top management official?		5a		<u>X</u>
b	Other officers or key employees of the organization?	1	5b		<u>X</u>
16-	Describe the process in Schedule O (see instructions)				
ıva	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	_			v
_	taxable entity during the year?	<u> </u>	6a		<u>X</u>
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			1	
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	۔ ا	CF	İ	
;ec.	exempt status with respect to such arrangements? tion C. Disclosure		6b		
17	List the states with which a copy of this Form 990 is required to be filed NONE				
17 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.	ole fo			
.0	public inspection. Indicate how you make these available. Check all that apply	טוט טוע	•		
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy	and	finar	ncial	
ıJ	statements available to the public.	anu	midi	icial	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organi	zatioi	n 🕨		
	SANDRA L. ANAGNOSTAKIS - (203) 988-2073	Lativi			
	P.O. BOX 6216, HAMDEN, CT 06517				
32006 2-18-0		F	orm \$	990 (2008)

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

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

1a Complete this table for all persons required to be listed. 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)	(C) Position						(D)	(E)	(F)
Name and Title	Average hours	100	hec			i app	shv)	Reportable compensation	Reportable compensation	Estimated amount of
	per	<u> </u>	1	T	1	T	,,,, 	from	from related	other
	week	direct				1		the	organizations	compensation
		ee or	stee	i		nsate		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
		frusi	重	İ	oyee	DE S		(**-2/1099-141130)	i	organization and related
		ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated , employee	III G			organizations
ALAN VAN ANTWERP		Ĕ	Ē	₹		Ĭ £ 5	ĕ			
PAST PRESIDENT/DIRECTOR	1.00	v	ļ.,	Х	\vdash	\vdash		0.	0.	0
GREGORY MILLER	1.00	^		^	<u> </u>		\vdash	0.		0.
PRESIDENT	1.00	v		x				0.	0.	^
SANDRA L. ANAGNOSTAKIS		┢	-	^	\vdash			 	0.	0.
TREASURER	1.00	v		x	ĺ			0.	0.	0.
DENNIS FULBRIGHT	1.00	^		^		┢╌		0.	0.	<u> </u>
VICE PRESIDENT	1.00	v		X				0.	0.	0.
THOMAS MOLNAR	1.00	Λ		Α.		<u> </u>	-	0.	0.	<u> </u>
SECRETARY	1.00	x		x				0.	0.	0.
SAM FLEET	1.00	1	 	1	-	 		0.		
DIRECTOR	1.00	x	İ					0.	0.	0.
ANDRE FLYS			 	 						
DIRECTOR	1.00	x						0.	0.	0.
ROBERT MILLER										
DIRECTOR	1.00	Х						0.	0.	0.
SALLY-MARTYN-		-		-						
DIRECTOR	1.00	X						0.	0.	0.
JOE HIETTER										
DIRECTOR	1.00	X		<u> </u>				0.	0.	0.
ROBERT STEHLI										
DIRECTOR	1.00	X			_			0.	0.	0.
			<u> </u>	<u> </u>		<u> </u>				
		<u> </u>		-						
			-	\vdash	l			_		
	·		 	 -				_		
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Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

0

from the organization

				NUT GROW	ERS ASSOCI	ATION	<u> 31-1299</u>	136 Page 9
Pa	rt VI	II Statement of Reve	nue	<u> </u>	,			_
		`			(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 ts	1 a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts		Membership dues	1b					
fts,	С	: Fundraising events	1c					
igi ilar	d	Related organizations	1d	·				
ons		 Government grants (contributions, gifts, grains) 						
buti	T	similar amounts not included abo	· I I	115.		ŀ		
deti	a	Noncash contributions included in line						
Se	h	Total. Add lines 1a-1f	.s ia ii		115.			
			·	Business Code				
8		DUES & ASSESSMI		110000	9,598.			
er.		MEMBER SUPPORT	SERVICE	900099	5,709.	5,709.		
n S	С	ADVERTISING		541800	1,939.		1,939.	
Program Service Revenue	d							
P. jo	e							
_	f a		enue		17,246.			
\dashv	3	Investment income (including	n dividends inter		17,240.			
	Ŭ	other similar amounts)	g arriadinas, iinoi	>	5,215.		:	5,215.
	4	Income from investment of ta	ax-exempt bond ;	proceeds -				
	5	Royalties		•				
			(i) Real	(ıi) Personal				
	6 a	Gross Rents						
	b	Less. rental expenses						
	C	• •	L	<u> </u>				
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(i) Other			<u> </u>	
	/ a	assets other than inventory	2,511.	(ii) Other				
	b	Less. cost or other basis	2,311					
1	_	and sales expenses						
ļ	С	Gain or (loss)	2,511.					
	d	Net gain or (loss)		_ _	2,511.			2,511.
e e	8 a	Gross income from fundraising	_					
Ve I		including \$						
Be		contributions reported on line	•	4-0-0-0-				
Other Revenue	h	Part IV, line 18 Less direct expenses	a b					
ಕ		Net income or (loss) from fund	_		4,092.			4,092.
		Gross income from gaming a	-		4,002.		-	4,0520
	-	Part IV, line 19	а					
	b	Less direct expenses	b					
	С	Net income or (loss) from gan	ming activities					
İ	10 a	Gross sales of inventory, less	returns					
		and allowances	а					
		Less cost of goods sold	b				ļ	
ŀ	с	Net income or (loss) from sale		Business Code	-			
}	11 0	Miscellaneous Revenu REFUND PRIOR YE		Business Code 900099	5,805.	5,805.		
	ii a b			20099		3,003.		
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d		>	5,805.			
92000	12	Total Revenue. Add lines 1h, 2g, 3,	4, 5, 6d, 7d, 8c, 9c, 10	0c, and 11e	34,984.	21,112.	1,939.	11,818.
83200 02-02	-08 a							Form 990 (2008)

Part IX Statement of Functional Expenses

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

	' All other organizations must comp				id (D).
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(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 U.S. See Part IV, line 21	16,484.	16,484.		
2	Grants and other assistance to individuals in				
	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			•	
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)			и.	
	and section 403(b) employer contributions)				
9	Other employee benefits				. —
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
đ	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				<u></u>
12	Advertising and promotion				
13	Office expenses	17,138.	16,807.	331.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	3,131.	3,131.		
-20-	-Interest				
21	Payments to affiliates				····
22	Depreciation, depletion, and amortization	247.	247.		
23	Insurance	202.		202.	
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.)	0.400	0.160	0.40	
	PROFESSIONAL FEES	2,400.	2,160.	240.	
р	MISCELLANEOUS	25.	25.		
C	·				
d			*		
е	All (1)		· ·		
f	All other expenses	20 605	20.054		
25	Total functional expenses. Add lines 1 through 24f	39,627.	38,854.	773.	0.
26	Joint Costs Check here Inf following				
	SOP 98-2. Complete this line only if the organization		Ì		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	1			

Га	<u> </u>	, balance Sneet		(A)		(B)	_
		•		Beginning of year		End of y	ear
	1	Cash - non-interest-bearing		3,358.	1 _	2	,535
	2	Savings and temporary cash investments		<u>21,752.</u>	2	15	,824
	3	Pledges and grants receivable, net			3	<u> </u>	
	4	Accounts receivable, net .			4		
	5	Receivables from current and former officers, direct	ors, trustees, key				
		employees, or other related parties Complete Part			5		
	6	Receivables from other disqualified persons (as def			}		
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete				
		Part II of Schedule L			6		
Assets	7	Notes and loans receivable, net			7		
\ss	8	Inventories for sale or use			8		
•	9	Prepaid expenses and deferred charges	1 050	· · · · · · · · · · · · · · · · · · ·	9		
	10a	- ' '	1,850.				
	b	Less accumulated depreciation Complete				_	
	١	Part VI of Schedule D	<u>247.</u>	0.	10c		,603
	11	Investments - publicly traded securities		265,797.	11		,632
	12	Investments other securities See Part IV, line 11			12	15	,196
	13	Investments · program-related See Part IV, line 11			13		 .
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11	04)	200 007	15	271	700
	16	Total assets. Add lines 1 through 15 (must equal lines assets)	le 34)	290,907.	16		,790
	17 18	Accounts payable and accrued expenses Grants payable			17		
	19	Deferred revenue			18		
	20	Tax-exempt bond liabilities			19		_
' 0	21	Escrow account liability Complete Part IV of Sched	ula D		20		
Liabilities	22	Payables to current and former officers, directors, ti		21			
ig		highest compensated employees, and disqualified p					
تّ		of Schedule L	orderio dempieto i art ii		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			25		
	26	Total liabilities. Add lines 17 through 25		0.	26		0
		Organizations that follow SFAS 117, check here	► X and complete				
S		lines 27 through 29, and lines 33 and 34.	•				
Balance	27	Unrestricted net assets		290,907.	27	271	,790
3ala	28	Temporarily restricted net assets			28		
	-29-	-Permanently-restricted net assets			29		
Net Assets or Fund		Organizations that do not follow SFAS 117, check	chere 🕨 🔲 and				
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds			30		
Ass	31	Paid-in or capital surplus, or land, building, or equipi	ment fund .		31		
let '	32	Retained earnings, endowment, accumulated incom	e, or other funds		32		
2	33	Total net assets or fund balances		<u>290,907.</u>	33	<u>271</u>	,790
	34	Total liabilities and net assets/fund balances		290,907.	34	<u>271</u>	<u>,790</u>
Pai	t XI	Financial Statements and Reporting		· · · · · · · · · · · · · · · · · · ·		1.	r NI-
		_		1		Y	es No
1			Cash Accrual	Other			
2a		the organization's financial statements compiled or r	•	accountant?		2a	- X
		the organization's financial statements audited by an			_	2b	X
С		s" to lines 2a or 2b, does the organization have a con			audit,		
_		w, or compilation of its financial statements and selec				2c	 -
за		result of a federal award, was the organization required OMR Circular A 1332	ed to undergo an audit or aud	iits as set forth in the Sing	ie Audit		•
L		nd OMB Circular A-133?	r audita?			3a	<u> </u>
<u>a</u> _	11 10	s," did the organization undergo the required audit o	audits'			3b	

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

2008 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Employer identification number

			CTHERN NOT GE							<u>-1299</u>	<u> 136</u>		
Part I	Reason	for Public Cha	rity Status (All organi	zations mu	ust comple	te this pai	rt) (see ins	structions)			_		
The organ	nization is not a	a private foundation	because it is (Please ch	neck only (one organı	zation)							
1 🔲	A church, co	nvention of churche	es, or association of chui	rches desc	cribed in se	ection 170	D(b)(1)(A)(i).					
2	A school des	scribed in section 1	70(b)(1)(A)(ii). (Attach So	chedule E)								
з 🗀	A hospital or	a cooperative hosp	ital service organization	described	in section	170(b)(1))(A)(iii). (At	tach Sche	dule H)				
4 🔲	A medical re	search organization	operated in conjunction	with a hos	spital desc	ribed in se	ection 170)(b)(1)(A)(ii	i). Enter th	e hospita	l's nam	ie,	
	city, and stat								•	•			
5	•		benefit of a college or u	niversity o	wned or o	perated by	v a govern	mental uni	t describe	d in			
	=	(b)(1)(A)(ıv). (Compl		•	,		, ,						
6 🗆			nent or governmental un	it describe	d in sectio	n 170/h)/	1)(Δ)(ν)						
7 🗔		-	ceives a substantial part					or from the	general n	ublic desc	ribad ii	n	
. —		(b)(1)(A)(vi). (Comple		or no oup,		govonim	ornar arm v	J. 110111 1110	general p	apilo doce		•	
8 🗆			section 170(b)(1)(A)(vi).	(Complete	Part II \								
9 X	_		ceives (1) more than 33			rom contr	ibutions n	nomborobi	n food and	d arose ro	aainta i	from	
3 L XX .													
	activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975.												
		509(a)(2). (Complet		lion 511 ta	1X) IIOIII DC	1511 162262	acquireu c	by the orga	mization ai	iter June 3	0, 197	5.	
40			•	الماريم بيمة المم	lia aafatii (? . :	F00/V	4) (222					
10	-	-	perated exclusively to te	•	•								
11 🔔			perated exclusively for the)r	
			ations described in secti				2) See se (ction 509(a)(3). Chec	ck the box	tnat		
	_	· · · <u></u>	organization and compl	_	~				. —				
	a Type		_ Type II		e III - Fund	•	-			Type III - 0			
e 🗀			at the organization is not				-					Л	
			than one or more publicl		_				9(a)(1) or se	ection 509	9(a)(2).		
f	If the organiz	ation received a wri	tten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III				_	
	supporting of	rganızatıon, check t	his box										
g	Since August	t 17, 2006, has the o	organization accepted ai	ny gift or c	ontribution	n from any	of the foll	owing pers	sons?				
	(ı) A perso	n who directly or inc	directly controls, either a	lone or tog	ether with	persons o	described	ın (II) and (I	ıı) below,		Yes	No	
	the gove	erning body of the s	upported organization?							11g(i)			
	(ii) A family	member of a perso	n described in (i) above?	•						11g(ii)			
	(iii) A 35% d	controlled entity of a	a person described in (i) (or (ii) abov	e?					11g(iii)			
h	Provide the fe	ollowing information	about the organizations	the organ	nization suj	oports							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the o	organization	(v) Did yo	u notify the	(vi) ls	the	/vii\ An	nount of		
	nization———	(11) 2.11	organization (described on lines 1-9		sted in your	organizat		lorganizatio	n-col		port		
			above or IRC section	governing	document?	(i) of you	r support?	(i) organizi U.S.	2				
			(see instructions))	Yes	No	Yes	No	Yes	No				
					1								
							-						
			-			_	 						
				1	_								
				-	-		<u> </u>	<u></u>					
					ļ]						
<u>Total</u>			L	<u> </u>	<u>i</u>	L	L	<u></u>					
LHA For P	rivacy Act an	d Paperwork Redu	ction Act Notice, see tl	he Instruc	tions for F	orm 990.		Schedule	A (Form	990 or 99	0-EZ)	2008	

Section A. Public Support				T		
Catendar year (or fiscal year beginning in)▶∟	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants ")		<u> </u>				
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf		 			 	
3 The value of services or facilities						
furnished by a governmental unit to						1
the organization without charge	_		, <u>,</u>			
4 Total. Add lines 1 - 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the amount shown on line 11,						
column (f)						
···						
Public Support. Subtract line 5 from line 4 ection B. Total Support				L <u></u>	I	
alendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
Amounts from line 4			-			
Gross income from interest,	<u> </u>					
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
Net income from unrelated business						
activities, whether or not the						
business is regularly carried on						
Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part IV.)						
1 Total support. Add lines 7 through 10						
2 Gross receipts from related activities, e	tc. (see instruct	ions)			12	
First five years. If the Form 990 is for t	he organization'	s first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3)	
organization, check this box and stop i				·		<u> </u>
ection C. Computation of Public		 			· · · · · · · · · · · · · · · · · · ·	
Public support percentage for 2008 (lin		=	olumn (f))		14	
5 Public support percentage from 2007 S	-	•			15	
Sa 33 1/3% support test - 2008. If the org			•	14 is 33 1/3% or r	nore, check this bo	ox and
stop here. The organization qualifies as		-				►L
b 33 1/3% support test - 2007. If the org				line 15 is 33 1/3%	6 or more, check th	nis box
and stop here. The organization qualification						►L
a 10% -facts-and-circumstances test -	_					
and if the organization meets the "facts					rt IV how the organ	nization
meets the "facts-and-circumstances" te				-		►L
b 10% -facts-and-circumstances test -						
more, and if the organization meets the				-) . r
organization meets the "facts-and-circu		=	-	-		▶ L
Private foundation. If the organization						

Sch	edule A (Form 990 or 990 EZ) 2008 T rt III Support Schedule for C	<u>HE NORTHE</u> Organizations	RN NUT GRO Described in S	OWERS ASS Section 509(a)	OCIATION (2) (Complete each)	31-129	9136 Page 3
Sec	ction A. Public Support	ga	Dodding and	30011011 000(4)	(-/ (Complete only	ii you checked the ot	ox oil line 9 of Part I)
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and					127	(// · · · · · · · · · · · · · · · · · ·
	membership fees received. (Do not						
	include any "unusual grants.")	15,483.	66,095.	20,975.	10,592.	9,713.	122,858.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,546.	7,437.	6,835.	3,894.	9,801.	30,513.
3	Gross receipts from activities that			•			
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to	,				٠	
	the organization without charge		_			_	
6	Total. Add lines 1 - 5	18,029.	73,532.	<u>27,810.</u>	<u>14,486.</u>	19,514.	<u> 153,371.</u>
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons					_	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						153,371.
	tion B. Total Support	·					
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	18,029.	73,532.	27,810.	14,486.	19,514.	153,371.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,364.	584.	7,319.	8,886.	5,215.	40,368.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975			2,760.	1,492.	1,939.	6,191.
11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	18,364.	584.	10,079.	10,378.	7,154.	46,559.
12	Other income Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)	5,027.	13,256.			5,805.	24,088.
	Total support (Add lines 9, 10c, 11, and 12)						224,018.
14	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
800	tion C. Computation of Rubli	is Support Do	· · · · · · · · · · · · · · · · · · ·				<u> </u>
	tion C. Computation of Publi						<u> </u>
	Public support percentage for 2008 (li		•	olumn (t))	}	15	68.46 %
	Public support percentage from 2007 tion D. Computation of Inves					16	75.46 %
				12 ook (6)		47	20.78 %
	Investment income percentage for 20 Investment income percentage from 2	•	•	9 13, COIDITIT (I))	ŀ	17 18	20.78 % 12.46 %
	33 1/3% support tests - 2008. If the			n line 14 and line	15 is more than 3		
	more than 33 1/3%, check this box ar	nd stop here. The	organization qualif	ies as a publicly si	upported organiza	ition	$\triangleright X$
	33 1/3% support tests - 2007. If the	-					ınd ▶ []
	line 18 is not more than 33 1/3%, che	CK THIS DOX SHO STO	op nere. The organ	nzation qualifies a	s a publicly suppo	rted organization	▶Щ
	Private foundation. If the organization	n did not abook a b	ooy on line 14, 10e	or 10h abadu 4h	a hay and see :	tructions	<u> </u>

	or Part III	I. line 12 P	rovide anv	other add	litional ii	nformation	see instruct)	(piariatio ions)	n required b	y Part II, line 1	o, Part II, IIni	e i/a or i/o),
•		· <u>·</u>					<u> </u>						
SCHEDUI	ΣE A,	PART	III,	LINE	12,	EXPL?	NATION	FOR	OTHER	INCOME			
REFUNDS	•												
KEF UND)									<u> </u>			
				-									
		_											
											 .		
			 -			. <u>.</u>							
		•	-								<u> </u>		
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				_									
													
													
							-				<u> </u>		
													_

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

MAIL MOREGINES AND CROSSES ACCOUNTS

Employer identification number

Schedule D (Form 990) 2008

Pa	rt I Organizations Maintaining Donor Advise		Accounts Complete if the
1 4	organization answered "Yes" to Form 990, Part IV, line		Accounts: Complete ii tile
	organization answered Tes to Form 990, Fait IV, inte	(a) Donor advised funds	(b) Funds and other accounts
	Tatal number at and of year	(4)	(b) t dilec dile citici deceding
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		
_	are the organization's property, subject to the organization's	5	Yes No
6	Did the organization inform all grantees, donors, and donor a		
Da	for charitable purposes and not for the benefit of the donor or the Conservation Easements. Complete if the org		
			IV, line 7.
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or p	· -	
	Protection of natural habitat	Preservation of certified h	nistoric structure
_	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified cons	ervation contribution in the form of a conserv	ation easement on the last day
	of the tax year		
			Held at the End of the Year
a	Total number of conservation easements		
	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic stri	• • • • • • • • • • • • • • • • • • • •	2c
	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the org	ganization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per	iodic monitoring, inspection, violations, and	
_	enforcement of the conservation easements it holds?		└── Yes └── No
6	Staff or volunteer hours devoted to monitoring, inspecting, an		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4	
_	and section 170(h)(4)(B)(ii)?		└ Yes
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
Dai	conservation easements t III- Organizations-Maintaining-Collections-of	-Art-Historical Treasures or Othe	r Similar Accets
-1-a	Complete if the organization answered "Yes" to Form	•	i Silillai Assets.
	Complete if the organization answered Tes to Form	930, 1 art 1V, line 0	
4-	If the eventuation elected as a secretary under OFAO 440 and		
ıa	If the organization elected, as permitted under SFAS 116, not		
	treasures, or other similar assets held for public exhibition, ed		service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if		h h h h h
D	If the organization elected, as permitted under SFAS 116, to		
	or other similar assets held for public exhibition, education, or	r research in furtherance of public service, pro	ovide the following amounts relating to
	these items		. .
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		5
2	If the organization received or held works of art, historical trea		n, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items	.
а	Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
þ	Assets included in Form 990, Part X		> \$

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

Schedule D (Form	m 990) 2008 THE NOR ganizations Maintaining C	THERN NUT					31-12 ar Asse			
	organization's accession and other									
that apply)	ı .									
a 🔲 Publ	ic exhibition	•	d 🔲 Loan o	or exchange pro	ograms					
b Scho	olarly research	•	e 🔲 Other							
c 🔲 Pres	ervation for future generations									
4 Provide a d	description of the organization's c	ollections and expla	in how they fur	ther the organi	zation's ex	empt purpo	se in Par	t XIV		
5 During the	year, did the organization solicit of	or receive donations	of art, historica	al treasures, or	other simila	ar assets				_
to be sold	to raise funds rather than to be m	aintained as part of	the organization	n's collection?				Yes		No
	ust, Escrow and Custodia	-	Complete if	organization an	swered "Y	es" to Form	990, Par	t IV, line !	9, or	
repo	orted an amount on Form 990, Pa	rt X, line 21								
1a Is the orga	nization an agent, trustee, custod	ian or other interme	diary for contril	outions or othe	r assets no	t included		_		_
on Form 99	90, Part X?						L.	Yes		No
b If "Yes," ex	plain the arrangement in Part XIV	and complete the fo	ollowing table							
								Amount	<u>t</u>	
c Beginning	balance					1c				
d Additions of	during the year					1d				
e Distribution	ns during the year				•	1e				
f Ending bal			-			1f		_		
-	ganization include an amount on F		21?		1			_ Yes	L	No
	xplain the arrangement in Part XIV									
Part V En	dowment Funds. Complete							r		
		(a) Current year	(b) Prior ye	ar (c) Two	years back	(d) Three y	ears back	(e) Four	years	back_
1a Beginning	of year balance	16,051.						<u>-</u>		
b Contribution		622.								
	t earnings or losses	-684.						ļ. <u></u>		
d Grants or s		622.						<u> </u>		
e Other expe	enditures for facilities									
and progra		4=-						<u> </u>		
	f Administrative expenses 170.									
•										
	e estimated percentage of the year	r end balance held a								
	<u> </u>									
c Term endo	· • ———	%								
	indowment funds not in the posse	ession of the organiz	ation that are h	neld and admin	istered for	the organiz	ation	٦		
									No	
``	(i) unrelated organizations 3a(i) X								<u> </u>	
(ii) related organizations 3a(ii)							1	\longrightarrow	<u>X</u>	
	3a(ii), are the related organizations	•		, 				3b		
	Part XIV the intended uses of the estments - Land, Building			- 000 Post V I	10					—
							_	(D D	1	
De	scription of investment	(a) Cost or o		Cost or other	(c) l	Depreciation	n	(d) Book	value	;
4- 1		Dasis (investi	non) I	pasis (other)						
1a Land				·				-		
b Buildings	unan rayama ata									
	improvements			1 0 5 0			17	-	1,60	<u> </u>
d Equipment				1,850			47.		<u> , 0 (</u>	<u>, , , , , , , , , , , , , , , , , , , </u>
e Other	1a-1a (Column (d) should agual Ec	orm 000 Port V col	ump (R) line 10)(c))					1 60	03

Schedule D (Form 990) 2008

832053 12-23-08

	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Sta	N	31-129913	6 Page 4
_		tements	· <u>-</u>	
1	Total revenue' (Form 990, Part VIII, column (A), line 12)	1 -		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		
3	Excess or (deficit) for the year Subtract line 2 from line 1	3		
4	Net unrealized gains (losses) on investments	4	<u>-</u>	
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7	 	
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net) Add lines 4-8	9		
10 Par	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9 t XII Reconciliation of Revenue per Audited Financial Statements With Reve	10	Return	
	Total revenue, gains, and other support per audited financial statements	muc per		
1 2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1	
a			\dashv \mid	
	<u>-</u>		-	
	Recoveries of prior year grants Other (Describe in Part XIV) 2c 2d		.	
d	Other (Describe in Part XIV) Add lines 2a through 2d		_	
2			2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b		-	
D	Other (Describe in Part XIV)		\dashv . \parallel	
c	Add lines 4a and 4b		4c	
Dai	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) † XIII Reconciliation of Expenses per Audited Financial Statements With Exp	0000000	5 Dotum	
		enses pe		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities 2a			
b	Prior year adjustments 2b		-	
C	Losses reported on Form 990, Part IX, line 25		-	
d	Other (Describe in Part XIV)		⊣	
_	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
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		_	
	Other (Describe in Part XIV)		_	
	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) t XIV Supplemental Information	·-	5	-
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, P	art IV, lines	16 and 26; Part V, II	ne 4, Part
	rt XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b <u>TT_V_LINE_4: THE_DISTRIBUTIONS_FROM_THE_FUND_WILL</u> _1	מטוו מם	n mo	
LVI	1 V, DINE 4: THE DISTRIBUTIONS FROM THE FUND WILL I	DE USE	D TO	
SIIE	PORT CHARITABLE, SCIENTIFIC AND EDUCATIONAL PURPOSI	r C		
<u> 50E</u>	FORT CHARTIABLE, SCIENTIFIC AND EDUCATIONAL PURPOSI	<u> </u>		
	· · · · · · · · · · · · · · · · · · ·			
		*		

SCHEDULE I (Form 990)		Grants and Governn	ants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organization	νĵ		OMB No. 1545-0047	۰
Department of the Treasury Internal Revenue Service	► Con	 Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990. 	n answered "Yes," on F ▶ Attach to Form 990.	" on Form 990, P n 990.	art IV, lines 21 or 22.		Open to Public Inspection	ì
Name of the organization THE NORTHERN NUT Part I General Information on Grants and Assistance	ERN NUT	GROWERS ASSO	SSOCIATION				Employer identification number 31-1299136	
1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection	to substantiate t	he amount of the grants	or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	: :	
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of	stance? ocedures for mo		grant funds in the United States	States			X Yes No	
Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	Governments	nd Organizations in the	United States. O	omplete if the org	anization answered ")	res" on Form 990, Part	t IV, line 21, for any	1
Teciplent that received more than \$5,000 Use Part IV and Schedule I-1 (Form 999) if additional space is needed (b) EIN (b) EIN (c) IRC section if applicable cash grant and address of organization or government or government.	45,000 Check to	is box if no one recipien (c) IRC section if applicable	(d) Amount of cash grant	an \$5,000 Use P (e) Amount of non-cash	art IV and Schedule I- (f) Method of valuation (book,	(g) Description of non-cash assistance	hal space is needed (h) Purpose of grant or assistance	,
				assistance	FMV, appraisal, other)			
UNIVERSITY OF KENTUCKY 410 ADMINISTRATION DRIVE								
LEXINGTON, KY 40506	61-6033693	501(C)(3)	5,259.	0			AGRICULTURAL RESEARCH	
								1
 Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations 	nd government	organizations					4	
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	ction Act Notic	e, see the Instructions 1	for Form 990.				Schedule I (Form 990) 2008	١

31-1299136 Page 2		(f) Description of non-cash assistance											Schedule I (Form 990) 2008
	"Yes" on Form 990, Part IV, line 22	non- lce (e) Method of valuation lce (book, FMV, appraisal, other)			 other additional information	1'S RESEARCH	IEETING. AFTER						
LION	ation answered	(d) Amount of non- cash assistance			line 2, and any c	GRANTEE	ANNUAL M	REMITTED.	_	_		_	
3 ASSOCIA	plete if the organiz	(c) Amount of cash grant			required in Part I,	CONCLUSION OF THE GRANTEE'S	GANIZATION'S ANNUAL MEETING.	GRANT IS F					23
UT GROWERS	nited States. Com	(b) Number of recipients			ide the information	E CONCLUSI	AT THE ORGANI	OF THE					
	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				SCHEDULE I, PART I, LINE 2: AT THE	PROJECT A REPORT IS PRESENTED AT	THE PRESENTATION THE FINAL PORTION					832102 12-18-08

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revende 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.

2008
Open to Public Inspection

Name of the organization

A ...

THE NORTHERN NUT GROWERS ASSOCIATION

Employer identification number 31-1299136

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AWARD WINNING WEB SITE, AND THROUGH INTERACTIONS WITH OTHER NUT GROWING
ORGANIZATIONS THROUGHOUT NORTH AMERICA AND THE WORLD.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS THE FOLLOWING
CLASSES OF MEMBERSHIP - INDIVIDUAL AND FAMILY MEMBERS, CONTRIBUTING
MEMBERS, SUSTAINING MEMBERS, LIFE MEMBERS AND HONORARY MEMBERS. THESE
CLASSES OF MEMBERS ARE OUTLINED IN THE ORGANIZATION'S GOVERNING DOCUMENTS.
FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS ELECT THE MEMBERS OF
THE BOARD OF DIRECTORS AS EACH DIRECTOR'S TERM OF OFFICE EXPIRES. ALL
MEMBERS IN GOOD STANDING ARE ALLOWED TO VOTE.
FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES WITH
AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION A, LINE 10: THE BOARD OF DIRECTORS WILL BE
PROVIDED-WITH-A-COPY-OF-THE-ORGANIZATION'S-FORM-990-FOR-THEIR-REVIEW-PRIOR-
TO THE FILING OF THE RETURN.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT HAVE A
CONFLICT OF INTEREST STATEMENT OR FINANCIAL STATEMENTS. AN ANNUAL
FINANCIAL REPORT IS PUBLISHED ON THE ORGANIZATION'S WEB SITE. THE
ORGANIZATIONS GOVERNING DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.