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Form 990

Department of the Treasury Internal Revenue Service

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

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

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

2009
Open to Public Inspection

For the 2009 calendar year, or tax year beginning and ending Please Wild Blueberry Association of C Name of organization Check if applicable D Employer identification number use IRS North America Inc Address change label or 22-3447986 Doing Business As print or Name change type. Number and street (or P O box if mail is not delivered to street address) Room/suite Telephone number Initial ceturn See PO Box 100 207-581-1475 Specific Termination City or town, state or country, and ZIP + 4 1,617,750 G Gross receipts\$ Instruc Old Town ME 04468-0100 Amended return tions. F Name and address of principal officer Application pending H(a) Is this a group return for Jerel Kim Higgins affiliates? PO Box 100 Yes Old Town ME 04468-0100 If "No," attach a list (see instructions) **X** 501(c) ( 5)\_ ◀ (insert no ) 4947(a)(1) or www.wildblueberries.com Website > H(c) Group exemption number ▶ Type of organization X Corporation Trust 1981 Association Year of formation M State of legal domicile ME Part I Summary Briefly describe the organization's mission or most significant activities The core mission of the Wild Blueberry Association of North America (WBANA) SCANNED JUL \$7 2010 Revenue Activities & Governance is to promote the reputation and use of wild lowbush blueberries that are Native to North America. 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 11 Number of voting members of the governing body (Part VI, line 1a) 11 Number of independent voting members of the governing body (Part VI, line 1b) 4 Ó 5 5 Total number of employees (Part V, line 2a) 8 Total number of volunteers (estimate if necessary) 6 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year** 892,374 8 Contributions and grants (Part VIII, line 1h) 820,000 699,249 660,629 Program service revenue (Part VIII, line 2g) 27,327 17,075 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 3,287 9,052 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,617,750 1,511,243 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 384,803 394,552 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), (III) 942,728 1,145,908 17 Other expenses (Part IX, column (A), lines 11a-11d, 41f-24f) 18 Total expenses Add lines 13–17 Strust equal Part IX, column
19 Revenue less expenses Subtractine 18 from line 12 0 10 1,327,531 1,540,460 (A)) line 25) 183,712 77,290 58 Beginning of Current Year End of Year 1,206,830 1,450,757 20 Total assets (Part X, line 16) OGDEN. UT 282,255 448,892 21 Total liabilities (Part X, line 26) 924,575 001,865 22 Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Signature of officer 5-14-10 Ragnar Kamp Vice-President Type or print name and title Preparer's identifying number Check if Preparer's Paid signature 05/12/10 P00538192 employed > Preparer's Edwards 01-0463272 Faust EIN Firm's name (or yours **Use Only** 716 Union if self-employed). address, and ZIP + 4 ▶ 207-947-4575 Bangor. ME 04401-3156 May the IRS discuss this return with the preparer shown above? (see instructions) Form 990 (2009) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

	Wild Blueberry As		-3447986	Page 2
1 Briefly descr The core is to p:	tatement of Program Servinbe the organization's mission e mission of the romote the reputato North America.	ce Accomplishments Wild Blueberry Associa tion and use of wild l	tion of North Ameriowbush blueberries	ca (WBANA) that are
the prior For	nization undertake any significant p m 990 or 990-EZ? cribe these new services on Sched	program services during the year which were	not listed on	Yes X No
3 Did the orga services?		e significant changes in how it conducts, any	program	Yes X No
4 Describe the Section 501	e exempt purpose achievements for (c)(3) and 501(c)(4) organizations a	or each of the organization's three largest prog and section 4947(a)(1) trusts are required to r evenue, if any, for each program service repo	eport the amount of grants and	
is to p	e mission of the	12,871 including grants of \$ Wild Blueberry Associa tion and use of wild l	tion of North Ameri	
Communi are par adverti strateg (Contin	cations" and "Con t of an integrate sing, trade shows ic partnerships, ued on Schedule O	otion programs include sumer Communications". d promotion program th, consumer advertising and public relations.	All promotion com at includes trade	ponents
4b (Code	) (Expenses \$	moluuling grants of \$	) (Itevenue 🛡	•
4c (Code	) (Expenses \$	including grants of \$	) (Revenue \$	

4d Other program services (Describe in Schedule O )							
	(Expenses \$	including grants of \$	) (Revenue \$	)			
4e	Total program service expenses ▶	1,442,871					

Pe	art iv Checklist of Required Schedules			
4	to the constraint of the state		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
_	complete Schedule A	1	X	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		İ
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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
0	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
1	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
2	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<u> </u>		
	Schedule D, Parts XI, XII, and XIII	12	X	ļ
2A		<u>                                     </u>		
		ζ		
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<del> </del>	X
þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X	-
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	15	x	
6	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13	<b>├</b> ^	<del> </del>
0	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		x
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	18	<del> </del>	
•	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	-"	<u> </u>	<del>                                     </del>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			<u> </u>
-	If "Yes," complete Schedule G, Part III	19		х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

22-3447986 Form 990 (2009) Wild Blueberry Association of Page 4 Part IV Checklist of Required Schedules (continued) Yes No 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the X United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 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 lines 24b through 24d and complete Schedule K. If "No," go to line 25 X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? X If "Yes," complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, X Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X Part I 31 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 33 X

- 31
- Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1
- Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 Schedule R, Part V, line 2
- 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
- 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
- Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O

X Form 990 (2009)

X

X

X

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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 0 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X 3a b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b 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 X account)? 4a 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 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the X organization solicit any contributions that were not tax deductible? 6a If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b 7 Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a 7b If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c 7a | If "Yes," indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a 9ь b Did the organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter 10 Initiation fees and capital contributions included on Part VIII, line 12 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Form 990 (2009) Wild Blueberry Association of 22-3447986 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body 1b Enter the number of voting members that are independent b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 3 supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 X 6 6 Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members X 7a of the governing body? X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following a The governing body? 8a X b Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code ) No 10a X 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the X form? 11 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give X 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X 12c describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 13 14

14 Does the organization have a written document retention and destruction policy?

a The organization's CEO, Executive Director, or top management official

**b** Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)

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?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

17	List the states wi	th which a copy	of this Form	990 is required	to be filed <b>&gt;</b>	Non
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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. Indicate how you make these available. Check all that apply

Own website | X | 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 financial statements available to the public

State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization ▶ Wild Blueberry Commission 5784 York Complex

Orono

ME 04469

207-581-1475

15a

15b

16a

16b

X

15

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, 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) Name and Title	(B) Average			(6	C)	that a	pply)	<b>(D)</b> Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Sanford Kelley		x			-			0	0	(
Director Todd Merrill		+≏				<b>├</b>			<u> </u>	
Director		x						o	o	(
Kermit Allen		1				$\vdash$		<u>_</u>	<u> </u>	
Director		x		ļ				o	0	(
Greg Bridges		+^				$\vdash$		0	<u> </u>	
Director		x						0	0	(
David Houston	-	1			-	┢				
Director		X		1				o	o	(
Brian Powers		+	_	$\vdash$	<u> </u>		_			<u> </u>
Director		x						o	o	C
Barry Schneider		1								
Director		x						0	0	C
Roy Allen										
Treasurer				X				0	0	
Linda Long										
Secretary				X				0	0	(
Jerel Kim Higgins	3									
President				X				0	0	(
Ragnar Kamp										
V. President		<u> </u>		X				0	0	
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orm 990 (2009) Wild Blu Part VII Section A. Office								22-344 d Highest Compensated			<del>,</del>		age
(A) Name and Title	(B) Average hours per week		ition	(	C)	that a	pply)	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	cor	(F) stima imour othe npens from t	ated nt of er sation the	
		trustee	al trustee		oyee	Highest compensated employee		(W-2/1099-MISC)		a	ganiza nd rela ganiza	ated	
	1												
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	1		L.,										
1b Total  Total number of individuals reportable compensation fro				thos	e lıs	ted a	bove	e) who received more than	1 \$100,000 in				
3 Did the organization list any employee on line 1a? If "Yes								yee, or highest compensa	ted		3	Yes	N
For any individual listed on l the organization and related individual	ine 1a, is the sun	of re	port	able	com	pens	atio				4		,
5 Did any person listed on line services rendered to the org Section B. Independent Contract	anization? If "Yes								or 		5		
Complete this table for your compensation from the organical compensation from the organi	five highest com	pensa	ited	ınde	pend	lent o	contr	actors that received more	than \$100,000 of				
Name a	(A) and business address							Descrip	(B) otion of services		Co	(C) mpensa	tion
								<del></del>					
									<del></del>				
		-											
2 Total number of independen	t contractor (	امر را	- In		lues '		<u></u>	lated at any vista and			_		
2 Total number of independent more than \$100,000 in com		_				zu (0	เกอร	se listeu above) who recel	veu		0		

_	rt V	III Statement of Reve		A55	OCIACIO.	II OL	22 3447900		Page 3
	IF V	statement of Neve	illue			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns	1a						
yrar our	ь	Membership dues	1b		1,375				
is, c	С	Fundraising events	1c						
gif	d	Related organizations	1d						
ns,	е	Government grants (contributions)	1e						
Program Service Revenue   Contributions, gifts, grants anounts	f	All other contributions, gifts, grants, and similar amounts not included above	1f		890,999				
ont	g	Noncash contributions included in lines 1a	-1f \$	6	1				
O B	h	Total. Add lines 1a-1f			<b>•</b>	892,374			
Jue					Busn. Code				
evel	2a Canada Program Reimbursement				571,371	571,371			
e R	b	CA Research Reimbur	semen	t	ļ	70,587	70,587		
ζį	С	Food Export NE				57,291	57,291		
Ser	d								
аш	е						·		
ō	f	All other program service reve	nue		L				
<u>-</u>	9	Total. Add lines 2a-2f			<b>•</b>	699,249			
	3	Investment income (including	dıvıden	ds, intere	est, and				
		other similar amounts)				17,075			17,075
	4	Income from investment of tax	c-exemp	ot bond p	roceeds 🕨 📙				
	5	Royalties			<b>&gt;</b>	j			
		(ı) Real		(II) F	Personal				
	6a	Gross Rents							
	b	Less rental exps							
	С	Rental inc or (loss)							
		Net rental income or (loss)			<b>&gt;</b>				
	/a	7a Gross amount from sales of assets (i) Securities (ii) (		Other					
		other than inventory							
	b	Less cost or other							
		basis & sales exps							
	c	Gain or (loss)							
	ď	Net gain or (loss)	_		<b>&gt;</b>				
ø	8a	Gross income from fundraising eve	ents						
Other Revenue		(not including \$							
eve		of contributions reported on line 1c	).						
Ä		See Part IV, line 18	а						
the	b	Less direct expenses	b						
0	c	Net income or (loss) from fund	draising	events	<b>&gt;</b>				
	9a	Gross income from gaming activities	es						
		See Part IV, line 19	а						
	b	Less direct expenses	b						
	C	Net income or (loss) from gan	ning act	ivities	<b>&gt;</b>				
	10a	Gross sales of inventory, less							
		returns and allowances	а				1		
	b	Less cost of goods sold	b						
	С	Net income or (loss) from sale	s of Inv	entory	<b>&gt;</b>				
		Miscellaneous Revenue	е		Busn. Code				
	11a	Meeting Revenue				6,205			6,205
	ь	Promotional Items				2,547			2,547
	С	Uncategorized Income				300			300
	d	·							
	e	Total. Add lines 11a-11d			<b>•</b>	9,052			
	12	Total Revenue. See instruction	ns		▶ □	1,617,750	699,249		0 26,127
									Earm 990 (2000)

#### 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).

	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				
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	204 552	204 552		
	U.S. See Part IV, lines 15 and 16	394,552	394,552		
4 5	Benefits paid to or for members  Compensation of current officers, directors,	<del></del>	<del></del>	·	
3	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)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management	6 007	_	6 007	
b	Legal	6,027 5,320		6,027 5,320	
C	Accounting	5,320		5,320	
d e	Lobbying Professional fundraising services See Part IV, line 17			<del></del>	
f	Investment management fees		†		
g g	Other				
12	Advertising and promotion				· · · · · ·
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	<del></del>			<u>.</u>
19 20	Conferences, conventions, and meetings				
21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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	Agency Services	253,008	253,008	<u>-</u>	
b	Marketing-Trade Ingredien	215,221	215,221		
c	Research Marketing-Consumer Retail	208,095 177,551	208,095 177,551		
d	Off-shore promotions	110,247	110,247		
e f	All other expenses	170,439	84,197	86,242	
25	Total functional expenses. Add lines 1 through 24f	1,540,460	1,442,871	97,589	<del></del>
26	Joint costs. Check here ▶ ☐ If following	= , = = 5 , = 3 6			<del></del>
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
244	fundraising solicitation				5 000 (000)

			(A)		(B)		
_ , _			Beginning of year		End of year		
1	Cash—non-interest bearing			1			
2	Savings and temporary cash investments		657,153	2	841,225		
3	Pledges and grants receivable, net		3				
4	Accounts receivable, net	549,677	4	588,698			
5	Receivables from current and former officers, directors,	, trustees, key					
	employees, and highest compensated employees Com	nplete Part II of					
	Schedule L		5				
6	Receivables from other disqualified persons (as defined	d under section					
	4958(f)(1)) and persons described in section 4958(c)(3)	(B) Complete					
رم س	Part II of Schedule L			6			
Assets	Notes and loans receivable, net			7			
8   8	Inventories for sale or use			8			
9	Prepaid expenses and deferred charges			9	20,834		
10	a Land, buildings, and equipment cost or						
	other basis Complete Part VI of Schedule D	10a					
t	Less accumulated depreciation	10b		10c			
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	tments—program-related See Part IV, line 11					
14	Intangible assets			14			
15	Other assets See Part IV, line 11			15			
16	Total assets. Add lines 1 through 15 (must equal line 3	34)	1,206,830	16	1,450,757		
17	Accounts payable and accrued expenses	282,255	17	448,892			
18	Grants payable			18			
19	Deferred revenue			19			
20	Tax-exempt bond liabilities			20			
g 21	Escrow or custodial account liability Complete Part IV	of Schedule D		21			
Liabilities	Payables to current and former officers, directors, trusti	ees, key			•		
<u>遠</u>	employees, highest compensated employees, and disq	ualified					
<u>.</u>	persons Complete Part II of Schedule L			22			
_	Secured mortgages and notes payable to unrelated thir	rd parties		23			
24	Unsecured notes and loans payable to unrelated third p	parties		24			
25	Other liabilities Complete Part X of Schedule D			25			
26	Total liabilities. Add lines 17 through 25		282,255	26	448,892		
S	Organizations that follow SFAS 117, check here ▶	X and					
ဍ	complete lines 27 through 29, and lines 33 and 34.	_					
[ 27	Unrestricted net assets		924,575	27	1,001,865		
ස්   <sub>28</sub>	Temporarily restricted net assets			28			
멸 29	Permanently restricted net assets			29			
֡֡֝֝֝֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֓	Organizations that do not follow SFAS 117, check he	ere 🕨 🗀					
토	and complete lines 30 through 34.						
S 30	Capital stock or trust principal, or current funds			30			
ğ 31	Paid-in or capital surplus, or land, building, or equipmen	nt fund		31			
8 32	Retained earnings, endowment, accumulated income,			32			
Net Assets or Fund Balances	Total net assets or fund balances	•	924,575	33	1,001,865		
2 34	Total liabilities and net assets/fund balances		1,206,830		1,450,757		

Form	990 (2009) Wild Blueberry Association of 22-3447986		Ŗа	ge <b>12</b>
Pa	rt XI Financial Statements and Reporting			,
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
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 line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
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? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

	e of the organization		Employer identification number
	ild Blueberry Association of		22 2447096
	orth America Inc  orti Organizations Maintaining Donor Advised Ful	nds or Other Similar Funds or	22-3447986
Pa	the organization answered "Yes" to Form 990, I	Part IV line 6	Accounts. Complete II
	the organization answered Tes to Form 500, i	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Donor advised idital	(b) I dilas and other assistants
2	Aggregate contributions to (during year)		
3	Aggregate contributions to (during year)  Aggregate grants from (during year)		
4	Aggregate value at end of year		<u> </u>
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised	
•	funds are the organization's property, subject to the organization's excl		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in	<del>-</del>	
•	used only for charitable purposes and not for the benefit of the donor of	• •	
	purpose conferring impermissible private benefit?	aditor advisor, or for any other	☐ Yes ☐ No
Pa	art II Conservation Easements. Complete if the organization	anization answered "Yes" to For	
1	Purpose(s) of conservation easements held by the organization (check		in oco, r arc rv, mo r.
	Preservation of land for public use (e g , recreation or pleasure)	Preservation of an historically im	portant land area
	Protection of natural habitat	Preservation of certified historic	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	rvation contribution in the form of a conse	ervation
	easement on the last day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С		luded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/	06	2d
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organiza	ation during
	the taxable year		
4	Number of states where property subject to conservation easement is I	located <b>&gt;</b>	
5	Does the organization have a written policy regarding the periodic mon	itoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation easements during the y	<i>y</i> ear
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	conservation easements during the year	
	▶\$		
8	Does each conservation easement reported on line 2(d) above satisfy t	the requirements of section	
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		☐ Yes ☐ No
9	In Part XIV, describe how the organization reports conservation easem	•	
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that of	describes
_	the organization's accounting for conservation easements		0: " 4
۲٤	art III Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to		əmmar Assets.
4 -			act works of
та	If the organization elected, as permitted under SFAS 116, not to report art, historical treasures, or other similar assets held for public exhibition		
	provide, in Part XIV, the text of the footnote to its financial statements t		n public service,
h	If the organization elected, as permitted under SFAS 116, to report in it		works of art
U	historical treasures, or other similar assets held for public exhibition, ed		
	provide the following amounts relating to these items	accasion, or research in future ance of pu	5014100,
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial dain, pr	
2	following amounts required to be reported under SFAS 116 relating to t	· · · · · · · · · · · · · · · · · · ·	Ovide the
_	Revenues included in Form 990, Part VIII, line 1	inese items	<b>&gt;</b> \$
a h	Assets included in Form 990, Part X		*
_	Assets illoluded iii i Olili 550, Falt A		

	till Oppopiations Maintaining				2: -: 1 4	Page Z
	rt III Organizations Maintaining (					(continuea)
3	Using the organization's acquisition, accession collection items (check all that apply)	, and other records, che	ck any of the follow	ng that are a significa	ant use of its	
а	Public exhibition	d Loan	or exchange prograr	ns		
b	Scholarly research	e Other				
С	Preservation for future generations					
4	Provide a description of the organization's colle Part XIV	ections and explain how	they further the orga	ınızatıon's exempt pu	ırpose ın	
5	During the year, did the organization solicit or r	eceive donations of art,	historical treasures,	or other similar		
	assets to be sold to raise funds rather than to be				(5) ( 1) L E O	Yes No
Pa	rt IV Escrow and Custodial Arrai			ation answered	Yes to Form 9	90, Paπ
	IV, line 9, or reported an ame		· · · · · · · · · · · · · · · · · · ·			
1a	Is the organization an agent, trustee, custodiar	or other intermediary for	or contributions or ot	her assets not		
	ıncluded on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIV as	nd complete the following	g table			
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	<del></del>
e	Distributions during the year				1e	
f	Ending balance				1f	<del></del>
2a	Did the organization include an amount on For	m 990 Part Y line 212			<u> </u>	Vec Ne
	If "Yes," explain the arrangement in Part XIV	111 330, Falt X, lille 217				☐ Yes ☐ No
	rt V Endowment Funds. Comple	te if organization a	newered "Vee"	to Form 990 Pa	ort IV line 10	<del></del>
	Lindowinent i unus. Comple	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
4.	Danisan of ward balance	(a) Current year	(b) i noi year	(C) TWO years back	(u) Three years back	(e) Four years back
	Beginning of year balance		-			······································
	Contributions					
С	Net investment earnings, gains,					
	and losses		··			
d	Grants or scholarships					
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the year	end balance held as				
а		%				
ь	Permanent endowment ▶ %					
c	Term endowment ▶ %					
	Are there endowment funds not in the possess	ion of the organization t	hat are held and adn	ninistered for the		
	organization by	ion of the organization t	nat are new and adi	ministered for the		Yes No
	(i) unrelated organizations					3a(i)
	-					
_	(ii) related organizations		and the DO			3a(ii)
	If "Yes" to 3a(ii), are the related organizations I	·				3b
4	Describe in Part XIV the intended uses of the c			0 Dad V Faa 4	^	
<u>ra</u>	rt VI Investments—Land, Buildir					
	Description of investment	(a) Cost or other basis	(b) Cost or ot	',	cumulated	(d) Book value
		(investment)	basis (other	r) depr	eciation	
1a	Land					
b	Buildings					
С	Leasehold improvements					
d	Equipment					
	Other					
	. Add lines 1a through 1e (Column (d) must eq	ual Form 990, Part X co	olumn (B) line 10(c)	)	<b>•</b>	

Schedule D (Form 990) 2009 Wild Blueberry Associ	ation of	22-3447986	Page 3
Part VII Investments—Other Securities. See Form 99			
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year marke	t value
Financial derivatives			
Closely-held equity interests			
Other			····
			<del></del>
		<del></del>	
		<del> </del>	
		<del> </del>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	-		
Part VIII Investments—Program Related. See Form 99	90. Part X. line 13.		
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year marke	t value
			<b>********</b>
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, line 15.  (a) Description		<del></del>	(b) Book value
(a) Description		· · · · · · · · · · · · · · · · · · ·	D) Book value
			<del>,</del>
			-
		"	
			,
			•
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)		<b>&gt;</b>	
Part X Other Liabilities. See Form 990, Part X, line 2			
1 (a) Description of liability	(b) Amount	4	
Federal income taxes		4	
	<del>                                     </del>	-{	
	<del></del>	-{	
		-{	
	<del>                                     </del>		
	<del>                                     </del>	-[	
	<del> </del>	┪	
		†	
		1	
	<u> </u>	1	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )		1	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the orga		ents that reports the	
organization's liability for uncertain tax positions under FIN 48		·	

	dule D (Form 990) 2009 WIIG Blueberry Association of 22-344/98		Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,617,750
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,540,460
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	77,290
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	77,290
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements	1	1,617,750
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d			
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,617,750
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV )		
c	Add lines 4a and 4b	4c	
5		5	1,617,750
	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R	_	
1	Total expenses and losses per audited financial statements	1	1,540,460
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	•	
a	Donated services and use of facilities 2a		
b	_		
c			
d	Other (Describe in Part XIV )		
	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,540,460
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	-	1,340,400
٠,		1	
a h	Investment expenses not included on Form 990, Part VIII, line 7b  Other (Describe in Part XIV )  4a  4b		
	Add lines 4a and 4b	4.	
	1	4c	1 540 460
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  At XIV Supplemental Information	5	1,540,460
	· · · · · · · · · · · · · · · · · · ·		
	plete 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		
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
this p	part to provide any additional information		
		_	<b>_</b>
_			<b></b> _

Schedule D (F	Form 990)	2009	W:	ild	l B	lue	be:	rry	As	SSO	ci	ati	Lor	0	f			22	<u>-3</u> 4	147	98	6					Page 5
Schedule D (F	Supp	leme	ntal	Info	rma	ation	(co	ntini	ied)																		
	<u> </u>						(00										-										
			· –	_	_		_			-	_					_	_						- –		_		
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				_	_		_	_			_	_	_			_	_			_	_			_	_	_	
				_	_		_	_			_	_				_	_			_	_			_	_	_	

Schedule F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Wild Blueberry Association of

North America Inc

Employer identification number 22-3447986

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

X Yes No

2 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Canada			Program	Promotion	394,552
China			Program	Promotion	69,213
Middle Ea	st - Dubai		Program	Promotion	6,129
		_			
_					
_					
otals ►					469,894

Page 2

Use Sched	le 13, 10r any reci Jule F-1 (Form 99	ipient who rece 90) if additiona	Fait IV, line 13, for any recipient who received more than \$5,000. Check this box it no one recipient received more than \$5,000. Use Schedule F-1 (Form 990) if additional space is needed.	SCK THIS DOX IT TIO OI	re recipient rec	selved more than	000,c¢ r	
(a) Name of organization	(b) IRS code section and EtN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV,
		North Amer	Promotion rica	394,552	Wire transfer	sfer		de la companya de la
2 Enter total number of reby the IRS, or for which	ciplent organizations I	listed above that all	Enter total number of reciplent organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	eign country, recognizec	s tax-exempt		•	
3 Enter total number of other organizations or entities	her organizations or e	entities					•	

Schedule F (Form 990) 2009

WILDBLU7986 05/12/2010 4 13 PM

Schedule F (Form 990) 2009 Wild Blueberry Association of 22–3447986

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.Use Schedule F-1 (Form 990) if additional space is needed.

Page 3

(h) Method of valuation (book, FMV, appraisal, other)						•				Schedule F (Form 990) 2009
(g) Description of non-cash assistance										Schedule
(f) Amount of non-cash assistance										
(e) Manner of cash disbursement										
(d) Amount of cash grant										
(c) Number of recipients										
(b) Region										
(a) Type of grant or assistance (b) Region (c) Number of recipients										

Part IV Supplemental Information

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

Part IV - Additional Information

The program services that the Canadian affiliate offers are very similar to the United States office. Their mission is to promote the reputation of the wild low bush blueberry that is native to North America.

SCHEDULE O (Form 990) Supplemental Information to Form 990

2009

Department of the Treasury Internal Revenue Service

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

• Attach to Form 990.

Open to Public Inspection

Name of the organization

Wild Blueberry Association of North America Inc

Employer identification number 22-3447986

Form 990, Part III, Line 4a - First Achievement

The health attributes of wild blueberries has been the underpinning of trade and consumer promotion programs since the late 1990's. Key 2009 activities included new releases on the latest blueberry health related scientific discoveries, participation in the American Dietetic Association Food & Nutrition Conference & Expo, and partnering with the Produce for Better Health Foundation. WBANA also helped to organize and sponsor the International Berry Health Benefits Symposium and participated in the Nutrient Rich Coalition. All these activities drive consumer interest and awareness related to wild blueberries.

The Trade Communications focused on the largest market segment that uses wild blueberries. The trade promotion program carried out in 2009 included advertising and trade shows. Multiple wild blueberry ads were placed in trade publications covering the bakery, food service, packaged goods, nutraceuticals, and grocery segments. Trade shows attended included the largest food ingredient/technology show in North America, a health food ingredient show, a produce show and a restaurant trade show. Trade show booth graphics, brochures and other factual literature were developed to support the shows.

Consumer communications is a key component of WBANA's wild blueberry promotion. Over the last 11 years it has focused communication on the consumer to help drive demand for retail frozen wild blueberries as well as

other products containing wild blueberries. This effort continued in 2009 with consumer recipe development, advertising, and a focused effort to update the wildblueberries.com web site and web marketing efforts.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders Organizaton has members.

Form 990, Part VI, Line 7a - Election of Members and Their Rights Members elect the board of directors.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990

The form 990 was provided to the Association officers for review prior to filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Directors including officers are provided annually with the written

conflict of interest policy which has the written expectation of disclosing

possible conflicts of interest.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Upon request, governing documents, conflict of interest policy, and financial statements will be made available.