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A For the 2009 calendar year, or tax year beginning 01-01-2009, and ending 12-31-2009				
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization FOUNDATION FOR AGRICULTURE AND RURAL RESOURCES MANAGEMENT AND SUSTAINABILITY		D Employer identification number 45-0456558
		Number and street (or P.O. box, if mail is not delivered to street address) 301 5TH AVE SE		E Telephone number (701) 486-3569
		City or town, state or country, and ZIP + 4 MEDINA, ND 58467		F Group Exemption Number 1

* Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).		G Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶	
I Website: <u>WWW.FARRMS.ORG</u>		H Check <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)	
J Tax-Exempt status (check only one)— <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> (Insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			

K Check ☒ if the organization is not a section 509(a)(3) supporting organization **and** its gross receipts are normally **not** more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ **►** \$ 129,549

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I)				
Revenue	1	Contributions, gifts, grants, and similar amounts received	1	116,009
	2	Program service revenue including government fees and contracts	2	1,835
	3	Membership dues and assessments	3	
	4	Investment income	4	11,705
	5a	Gross amount from sale of assets other than inventory	5a	
	b	Less cost or other basis and sales expenses	5b	0
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here 		
	a	Gross revenue (not including \$ _ of contributions reported on line 1)	6a	0
	b	Less direct expenses other than fundraising expenses	6b	0
Expenses	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	0
	7a	Gross sales of inventory, less returns and allowances	7a	
	b	Less cost of goods sold	7b	0
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe )	8	
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	129,549
	10	Grants and similar amounts paid (attach schedule) 	10	9,300
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	55,484
	13	Professional fees and other payments to independent contractors	13	4,863
Net Assets	14	Occupancy, rent, utilities, and maintenance	14	5,140
	15	Printing, publications, postage, and shipping	15	139
	16	Other expenses (describe )	16	41,551
	17	Total expenses. Add lines 10 through 16	17	116,477
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	13,072
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	185,836
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	198,908

Part II Balance Sheets—If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ		
(See the instructions for Part II)		
	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	167,802	22 177,517
23 Land and buildings	17,654	23 16,429
24 Other assets (describe  )	20,598	24 25,211
25 Total assets	206,054	25 219,157
26 Total liabilities (describe  )	20,218	26 20,249
27 Net assets or fund balances (line 27 of column (B) must agree with line 21) .	185,836	27 198,908

Part III Statement of Program Service Accomplishments (See the instructions for Part III)		Expenses (Required for section 501 (c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? EXPLORE AND IMPLEMENT PRACTICES AND METHODS WHICH FURTHER THE SUSTAINABILITY OF FARMS AND RURAL COMMUNITIES			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title			
28 See Additional Data Table			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	28a	
29			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	29a	
30			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	30a	
31 Other program services (attach schedule) <input type="checkbox"/>			
(Grants \$)	If this amount includes foreign grants, check here . . . <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a) <input checked="" type="checkbox"/>		32	50,952

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

Part V Other Information (Note the statement requirements in the instructions for Part V.)		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	No
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	No
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033 (e) notice, reporting, and proxy tax requirements?	35a	No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶	37a	
b	Did the organization file Form 1120-POL for this year?	37b	No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . .	38a	No
b	If "Yes," complete Schedule L, Part II and enter the total amount involved .	38b	
39	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on line 9	39a	0
b	Gross receipts, included on line 9, for public use of club facilities	39b	0
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ▶ _____, section 4912 ▶ _____, section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	No
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e	No
41	List the states with which a copy of this return is filed ▶ ND		
42a	The organization's books are in care of ▶ KARRI STROH Telephone no ▶ (701) 486-3569 301 5TH AVE SE Located at ▶ MEDINA, ND ZIP + 4 ▶ 58467		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 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.	42b	No
c	At any time during the calendar year, did the organization maintain an office outside of the U S ? If "Yes," enter the name of the foreign country ▶ _____	42c	No
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of Form 990-EZ.	44	No
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes", Form 990 must be completed instead of Form 990-EZ.	45	No

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.
All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46	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	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		No
48	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
49a	Did the organization make any transfers to an exempt non-charitable related organization?		No
49b	If "Yes," was the related organization a section 527 organization?		No

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

50(f) Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		

51(d) Total number of other independent contractors each receiving over \$100,000

Please Sign Here	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.				
	Signature of officer		Date		
Paid Preparer's Use Only	Preparer's signature		Date	Check if self-employed	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4		EIN		Phone no
	Mandant, ND 58554				
	May the IRS discuss this return with the preparer shown above? See instructions				

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization FOUNDATION FOR AGRICULTURE AND RURAL RESOURCES MANAGEMENT AND SUSTAINABILITY	Employer identification number 45-0456558
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Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 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 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	26,348	42,967	122,384	154,117	116,009	461,825
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	26,348	42,967	122,384	154,117	116,009	461,825
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)						0
6 Public Support. Subtract line 5 from line 4						461,825

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	26,348	6,251	122,384	154,117	116,009	461,825
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,020	6,251	10,704	12,291	11,705	49,971
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets				302		302
11 Total support (Add lines 7 through 10)						512,098
12 Gross receipts from related activities, etc (See instructions)					12	5,731
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	90 180 %
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	88 060 %
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:

Software Version:

EIN: 45-0456558

Name: FOUNDATION FOR AGRICULTURE AND RURAL RESOURCES MANAGEMENT AND SUSTAINABILITY

Form 990EZ, Part III - Statement of Program Service Accomplishments

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.		Expenses (Required for 501(c)(3) and 501(c)(4) organizations and 4947(a)(1) trusts; optional for others.)	
28 FARRMS RECEIVED FUNDING FROM THE BRADSHAW-KNIGHT FOUNDATION FOR PROGRAMMING AND OPERATIONS DURING THE YEAR ALLOWING IT TO PROMOTE THE GRANTS TO GROW PROGRAM ACROSS ND AND ADD AN EXECUTIVE DIRECTOR (Grants \$ 12,000) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		28a	
29 ORGANIC LIVESTOCK WORKSHOP - MADE POSSIBLE BY SARE, RRC, AND FARM AID ROTATIONAL GRAZING, COCKTAIL MIXTURES, CONVENTIONAL MEDICINES AND HOMEOPATHY WERE JUST SOME OF THE TOPICS COVERED AT THE ONE-DAY ORGANIC LIVESTOCK WORKSHOP HELD IN JAMESTOWN, ND MAIN PRESENTERS, KEVIN SEDIVEC, STATE RANGELAND SPECIALIST, AND GUY JODARSKI, VETERINARIAN, GAVE PARTICIPANTS EXCELLENT INFORMATION AND INSPIRED MANY QUESTIONS THAT THEY READILY ANSWERED THE AFTERNOON PANEL OF ORGANIC LIVESTOCK PRODUCERS, BLAIN AND KENT SCHMALTZ AND TERRY JACOBSON SHARE THEIR EXPERIENCES WITH RAISING AND MARKETING ORGANIC CATTLE A VIDEO OF THE DAY'S SESSIONS WAS PRODUCED AND PROVIDED TO 32 FARMERS (Grants \$ 3,122) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		29a	
30 GRANTS TO GROW PROGRAM - MADE POSSIBLE BY RRC THE INTEREST IN OUR GRANTS TO GROW PROGRAM IS INCREASING EACH YEAR WE WERE ABLE TO GIVE STRAIGHT GRANTS TO AID IN THE START UP OF A SHEEP PRODUCER, HELP A FAMILY OBTAIN A COMPUTER AND FENCING SUPPLIES, HELPED A BEGINNING MARKET GARDENER TO NAME A FEW WITH THE INITIAL START UP FUNDS, WE WERE ABLE TO HELP 5 YOUNG FARMERS GET STARTED WE WERE ALSO ABLE TO PROVIDE GRANT/LOAN COMBINATIONS FOR 2 INDIVIDUALS TO FURTERN THEIR EXISTING FARM BUSINESSES THE GRANT/LOAN PARTICIPANTS RECEIVE A MENTOR AND SCHOLARSHIP FUNDS TO ATTEND THE ADULT FARM BUSINESS MANAGEMENT COURSE THIS IS A ONE TO ONE FINANCIAL PLANNING/TRACKING PROGRAM TO HELP FARMERS TRACK EXPENSES AND INCOME (Grants \$ 22,997) If this amount includes foreign grants, check here . . . <input type="checkbox"/>		30a	
WHAT'S NEW IN FOOD PRESERVATION - MADE POSSIBLE FOR FARM AID AND RRC THIS INTERACTIVE WORKSHOP FOCUSED ON SHARING UP TO DATE INFORMATION ON CANNING, FREEZING, AND DRYING METHODS THAT ARE SAFE TO USE WITH GARDEN PRODUCE RECIPES, REQUIPMENT AND METHODS WERE TAUGHT IN ADDITION, PRESSURE COOKER DIAL GAUGES WERE TESTED FOR ACCURACY PARTICIPANTS WENT HOME WITH NEW IDEAS ON HOW TO PRESERVE THE FOOD THEY HARVEST FROM HOME GARDENS OR FARMERS MARKETS EUNICE SAHR FROM THE JAMESTOWN EXTENSION OFFICE FILLED THE DAY WITH AN ABUNDANT AMOUNT OF INFORMATION (Grants \$ 249) If this amount includes foreign grants, check here . . . <input type="checkbox"/>			
CSA & NORTHERN GREENHOUSE WORKSHOP - MADE POSSIBLE BY FARM AID AND RRC THE CSA AND NORTHERN GREENHOUSE WORKSHOP WAS FILLED WITH VALUATBLE INFORMATION ON PRACTICES FOR SEASN EXTENSION AND MARKETING DIRECTLY TO CONSUMERS THE MORNING PRESENTATIONS FOCUSED ON GREENHOUSES AND SEASON EXTENSION TECHNIQUES TERRY NENNICH, UNIVERSITY OF MINNESOTA EXTENSION SPECIALIST, SPOKE ON RESEARCH BEING DONE WITH HIGH TUNNEL GREENHOUSES, ROW COVERS, RAISED BEDS, AND MULCHES CHUCK WAIBEL, CO-OWNER OF GARDEN GOODNESS ENTERPRISE, SHARED A UNIQUE GREENHOUSE SYSTEM USING BURIED ROCKS AND CIRCULATING AIR WITH SOLAR PANELS FOR A HEATING SOURCE THE AFTERNOON WAS USED TO COVER ALL ASPECTS OF COMMUNITY SUPPORTED AGRICULTURE (CSA) IN CSA'S CONSUMERS MAY PURCHASE A SHARE OF THE FARMER'S GARDEN PRODUCTION THEY THEN RECEIVE A WEEKLY BOX OF PRODUCE FOR 8 TO 12 WEEKS JAY BASQUAIT, OWNER OF BASKETS OF PLENTY CSA IN MANDAN, STARTED OUT THIS SESSION SPEAKING ON THE BASICS OF WHAT A CSA IS, HOW YOU GET STARTED AND THE PROS/CONS OF RUNNING A BUSINESS LIKE THIS ANNIE CARLSON, CO-OWNER OF MORNING JOY FARM CSA IN CLEVELAND SPOKE ON PLANT SELECTION, HARVESTING, AND PACKAGING HOLLY MAWBY, DIRECTOR OF THE ENTREPRENEURIAL CENTER OF HORTICULTURE, SPOKE ABOUT THE MARKET ASPECT OF A CSA THE DAY CONCLUDED WITH A QUESTION AND ANSWER PERIOD WITH ALL PRESENTERS (Grants \$ 3,776) If this amount includes foreign grants, check here . . . <input type="checkbox"/>			
MARKET GARDEN TOUR - MADE POSSIBLE BY FARM AID PAM ANDERSON, DRISCOLL, ND HOSTED A GARDEN TOUR ON A BEAUTIFUL SUNDAY AFTERNOON IN AUGUST PAM HAS PARTICIPATED IN FARMERS MARKETS FOR 23 YEARS THROUGHOUT THE TOUR SHE SHARED MANY TIPS AND IDEAS INCLUDING WHERE SHE BUYS HER GARDEN SEEDS AND PLANTS AND HOW SHE DECIDES WHAT SHE WILL GROW WHILE WANDERING THE 14 ACRES OF HER GARDEN, SHE POINTED OUT VARIOUS TRADITIONAL VARIETIES OF PEAS, CARROTS, TOMATOES, CORN AND POTATOES SHE ALSO LIKES TO PLANT SOME DIFFERENT THINGS THAT PROVIDE A HOOK TO PULL IN POTENTIAL CUSTOMERS SHE TELLS CUSTOMERS HOW TO COOK A NEW ITEM OR PROVIDES A RECIPE (Grants \$ 183) If this amount includes foreign grants, check here . . . <input type="checkbox"/>			
ORGANIC FARMING 101 MADE POSSIBLE FOR SARE & NATURAL RESOURCES TRUST THE 2009-2010 ORGANIC FARMING 101 COURSE CONVENED ON OCTOBER 24, 2009 THE CURRICULUM FROM THE 2007-2008 COURSE WAS REVISED AND USED FOR THE NEW CLASS EIGHT STUDENTS SIGNED UP FOR THE FULL 10-SESSION COURSE AND OTHER PRODUCERS EXPRESSED AN INTEREST IN ONE OR TWO SPECIFIC SESSIONS EACH CLASS WAS AVAILABLE TO ANY PARTICIPANT WHETHER ENROLLING IN THE FULL COURSE OR NOT PARTICIPANT FEEDBACK AND EVALUATIONS WILL BE REVIEWED TO DETERMINE FUTURE CHANGES AND PROGRAM MODIFICATIONS (Grants \$ 7,787) If this amount includes foreign grants, check here . . . <input type="checkbox"/>			
ORGANIC GARDENING WORKSHOP - FUNDED BY FARM AID LOCAL FOODS AND FARMERS' MARKETS ARE AREAS OF GROWING AGRICULTURAL INTEREST IN ND THIS LED TO MANY REQUESTS FOR A WORKSHOP ON ORGANIC GARDENING PRACTICES IN FEBRUARY, WE HOSTED AN ORGANIC GARDENING WORKSHOP TAUGHT BY DAVID PODOLL AND PAM ANDERSON DAVID HAS BEEN AN ORGANIC FARMER AND GARDENER FOR MORE THAN 30 YEARS WHILE NOT CERTIFIED ORGANIC, PAM FOLLOWS ORGANIC PRACTICES IN HER GARDEN AND HAS BEEN A MARKET GARDENER FOR 20 YEARS THE WORKSHOP WAS DESIGNED AS AN OVERVIEW OF GARDENING AND COVERED A VARIETY OF TOPICS PARTICIPANTS LEARNED ABOUT SOIL FERTILITY, CROP ROTATION, SEED SELECTIONS, SEEDLINGS, MULCHING TECHNIQUES, COMPOSTING, HARVESTING, AND TOOLS INSTRUCTORS SHARED THEIR EXPERTISE AND PROVIDED TIME FOR QUESTIONS PARTICIPANT EVALUATIONS WERE VERY POSITVE INDICATING THE WORKSHOP WAS VERY INFORMATIVE AND PROVIDED A WEALTH OF USEFUL INFORMATION WE INTEND TO HOST A SIMILAR WORKSHOP IN 2010 (Grants \$ 838) If this amount includes foreign grants, check here . . . <input type="checkbox"/>			

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
NATHAN HOCHHALTER 3375 61ST AVE SE CLEVELAND,ND 58424	Director 0 50	0		
PAUL NYREN 4824 48TH AVE SE STREETER,ND 58483	Director 0 50	0		
MARCY SVENNINGSSEN 3546 109TH AVE SE VALLEY CITY,ND 58072	Executive Direc 32 00	19,061	1,715	
GERALD HORNER PO BOX 308 MEDINA,ND 58467	Director 1 00	0		
SHARON CLANCY 3091 119TH AVE SE VALLEY CITY,ND 58072	Treasurer 1 00	0		
KARL LIMVERE 201 COLLEGE ST E MEDINA,ND 58467	Secretary 1 00	0		
MINDI GRIEVE 8376 32ND ST SE JAMESTOWN,ND 58401	Director 1 00	0		
ANNIE KIRSCHENMANN 6844 35TH ST SE WINDSOR,ND 58424	President 2 00	0		

TY 2009 Grants and Similar Amounts Paid Schedule

Name: FOUNDATION FOR AGRICULTURE AND RURAL
RESOURCES MANAGEMENT AND SUSTAINABILITY

EIN: 45-0456558

Software ID: 09000047

Software Version: 2009v1.3

Item No.	1
Class of Activity	GRANTS
Donee's Name	BETHANY PRAIRIE FARM
Donee's Address	2333 99TH AVE SE WIMBLEDON, ND 58492
Amount (FMV)	1,000
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	2
Class of Activity	GRANTS
Donee's Name	KRISTI & DAVE WIRRENGA
Donee's Address	7981 55TH ST SE ADRIAN, ND 58472
Amount (FMV)	1,000
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	3
Class of Activity	GRANTS
Donee's Name	STEVE ZWINGER
Donee's Address	275 3RD AVE N CARRINGTON, ND 58421
Amount (FMV)	3,300
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	4
Class of Activity	GRANTS
Donee's Name	MARY ANN DUNBAR
Donee's Address	319 3RD ST PETERSBURG, ND 58272
Amount (FMV)	1,000
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	5
Class of Activity	GRANTS
Donee's Name	JASON STROH
Donee's Address	3747 41ST ST SE TAPPEN, ND 58487
Amount (FMV)	1,000
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	6
Class of Activity	GRANTS
Donee's Name	AMANDA THOMPSON
Donee's Address	3175 53RD AVE SE MEDINA, ND 58467
Amount (FMV)	1,000
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

Item No.	7
Class of Activity	GRANTS
Donee's Name	VALLEY CITY COMMUNITY PROJECT
Donee's Address	230 4TH ST NW ROOM 204 VALLEY CITY, ND 58072
Amount (FMV)	1,000
Purpose of Payment to Affiliate	
Relationship	NONE
Description	
Book Value	
How BV Determined	
How FMV Determined	
Date of Gift	

TY 2009 Other Assets Schedule

Name: FOUNDATION FOR AGRICULTURE AND RURAL
RESOURCES MANAGEMENT AND SUSTAINABILITY

EIN: 45-0456558

Software ID: 09000047

Software Version: 2009v1.3

Description	Beginning of Year Amount	End of Year Amount
Notes and Loans Receivable	4,700	13,150
Machinery and Equipment	15,898	12,061

TY 2009 Other Expenses Schedule

Name: FOUNDATION FOR AGRICULTURE AND RURAL
RESOURCES MANAGEMENT AND SUSTAINABILITY

EIN: 45-0456558

Software ID: 09000047

Software Version: 2009v1.3

Description	Amount
Travel	7,759
STAFF DEVELOPMENT	2,489
OTHER	775
Office Expenses	9,978
Interest	759
DUES & REGISTRATIONS	1,270
Depreciation	5,062
Conferences, Conventions, and Meetings	5,119
Advertising and Promotion	3,103

TY 2009 Other Liabilities Schedule

Name: FOUNDATION FOR AGRICULTURE AND RURAL
RESOURCES MANAGEMENT AND SUSTAINABILITY

EIN: 45-0456558

Software ID: 09000047

Software Version: 2009v1.3

Description	Beginning of Year Amount	End of Year Amount
Secured Mortgages and Notes Payable	19,445	18,385
PAYROLL TAXES PAYABLE	773	1,864