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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.

Open to Public Inspection

OMB No 1545-0047

Α	For th	e 2009 calendar year, or tax year beginning	and end	ding		
В	Check if applicab	Please use IRS C Name of organization			D Employer ident	tification number
Г	Addre		ON			
	Name	e type			48-	0289365
	Initial return	n 500 Number and Street (of P.O. dox it mail is not delivered to street ad	ldress) Ro	om/suite	E Telephone num	
	Termi	Instruction DIO SW IIDER	10	0	785	-234-0461
Ļ	Amen	n City or town, state or country, and ZIP + 4			G Gross receipts \$	<u>1,183,271.</u>
L	Application pendi				H(a) Is this a group	
	P 5	F Name and address of principal officer: TOM R TUNNELL			for affiliates?	Yes X No
_		SAME AS C ABOVE	7.507		H(b) Are all affiliates	
		xempt status: X 501(c) (6) ◀ (insert no) 4947(a)(1) or L	527		· ·	n a list. (see instructions)
		ite: ► WWW . KANSASAG . ORG of organization; X Corporation Trust Association Other ►		Vear o	H(c) Group exemp	M State of legal domicile: KS
	art I			IL TEALC	n ioinialion. 1904	M State of legal dofficile. KS
	T .	Briefly describe the organization's mission or most significant activities:	VCA OT	JANCE	AND PROTE	СТ ТНЕ
Governance	'	COMMON INTEREST OF ITS MEMBERS THROUGH				
ruai	2	Check this box ff the organization discontinued its operations of				
Ş.	3	Number of voting members of the governing body (Part VI, line 1a)			4	3 d
	4	Number of independent voting members of the governing body (Part VI, II	ine 1b)			4 16
Activities &	5	Total number of employees (Part V, line 2a)				5 9
ξ	6	Total number of volunteers (estimate if necessary) RECEIVE) [.			6 0
Ę	7a	Total gross unrelated business revenue from Pan VIII, column (C), line 12				117,039.
_	b	Net unrelated business taxable income from Font 990 Julia 847 2010	IRS-OS(, .	7	<u>'b <12,197.</u> >
		<u> </u>	8		Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)	217,954.			
Revenue	9	Program service revenue (Part VIII, line 2g)			742,721	
Se (10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-	77,947	
, –	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			65,573	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), li	ne 12)		1,289,598	1,134,358.
	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)			750 000	740 771
ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), line	s 5-10)	·	750,822	749,771.
Expenses	16a	a Professional fundraising fees (Part IX, column (A), line 11e)		-		
ă	` b	o Total fundraising expenses (Part IX, column (D), line 25)		$- \vdash$	362,755	386,854.
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	•	.	1,113,577	
	18	Revenue less expenses. Subtract line 18 from line 12	•		176,021	
<u></u>		Trevenue less expenses. Oubtract line 10 from line 12		Red	ginning of Current Yea	
Net Assets or	20	Total assets (Part X, line 16)		50,	1,318,938	
Ass	21	Total liabilities (Part X, line 26)		· ···	437,485	
Set	22	Net assets or fund balances. Subtract line 21 from line 20			881,453	
P	art II	Signature Block				
	_	Under penalties of perjury, I declare that I have examined this return, including accompanying so and complete. Declaration of preparer (other than officer) is based on all information of which pre-	hedules and st	tatements, a	nd to the best of my know	ledge and belief, it is true, correct,
		Sa. 1 2 10	,		. 5	h .
Sig	jn	m / Junia			<u> </u>	= 24-10
Here		TOM R TUNNELL, PRESIDENT			Date	
		Type or print name and title	Data	l Cha	note of To-	
Pai	d	Preparer's	Date	l self	(see	parer's identifying number e instructions)
_	parer's	8	05/19/			
	Only	yours if LINDBURG VOGEL PIERCE FARIS	-	CTERE	D EIN ►	
	-	self-employed), address, and HALSTEAD - P O BOX 2			Dhe	620 660 0461
		ZIP+4 HUTCHINSON, KANSAS 67504-204 IRS discuss this return with the preparer shown above? (see instructions)	4 /		Prione no.	620 669-0461 \\ X Yes \ No
IVIZ	ıv lile i	ing diacuss this return with the preparet shown above? (see instructions)			• • • • • • • • • • • • • • • • • • • •	ואט באו ובא וועט

932001 02-04-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

	990 (2009) KANSAS GRAIN AND FEED ASSOCIATION 48-0289365 Page 2
Pa	rt III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
•	TO ADVANCE AND PROTECT THE COMMON INTEREST OF ITS MEMBERS THROUGH
	EFFECTIVE COMMUNICATION AND EDUCATION TO ITS MEMBERS, THE PUBLIC AND
	GOVERNMENT
	GOVERNMENT
	Did the expensation undertake any expitioent program convece during the year which were not letted as
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	MEETINGS AND TRADE SHOWS
	ONE ANNUAL MEETING AND ONE TRADE SHOW PER YEAR
	OPPORTUNITY FOR MEMBERS TO LISTEN TO INDUSTRY AND EDUCATIONAL SPEAKERS
	ALSO PRESENTS OPPORTUNITY FOR MEMBERS AND THE GENERAL PUBLIC TO BECOME
	FAMILIAR WITH INDUSTRY PRODUCTS AND SERVICES
	TIMIDIAN WITH INDODINI INCODED AND DERVICED
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$
	TRAINING PROGRAMS
	TRAINING PROGRAMS FOR MEMBERS AT DIFFERENT LOCATIONS ACCROSS THE STATE
	TRAINING IS PROVIDED IN VARIOUS AREAS PERTINENT TO THE INDUSTRY
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$
	MANAGEMENT CONTRACT FEES
	ANNUAL CONTRACT AGREEEMENTS TO PROVIDE SERVICES RELATED TO MEMBER
	NEEDS. INCLUDING ENVIRONMENTAL FUND SERVICES AND OTHER RELATED
	ASSOCIATION SERVICES
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ▶\$
93200	Form 990 (2009)
02-04	

Form 990 (2009) KANSAS GRAIN AND FEED ASSOCIATION
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
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		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
-	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide	Ť		
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	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
11	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	х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,	<u> </u>		
	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.	ŀ		
•	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 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.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12.	Schedule D, Parts XI, XII, and XIII.	12		х
128	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No	<u> '</u>		
124	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
142	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
h	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	175		
.0	as antity leasted exited the United States 2 If IVas II complete Schodule E. Dort II	15	:	х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	- -		
10	located outside the United States? If "Yes," complete Schedule F, Part III	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	<u> </u>		
• ′	column (A) Imag C and 41 a 2 K IVan II complete Cabadida C Part I	17		х
10	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-' ' -		
18	1a and 0a0 If EVan I complete School to C. Dort II	40	х	
40	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	A .	
19	annulate Schoolule C. Port III	40		X
~	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	19		X
<u>20</u>	Did the organization operate one of more hospitals (ii. res, complete schedule n	20	ليب	_^

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	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			ŀ
	Schedule J	23	<u> X</u>	
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			1
	Schedule K. If "No", go to line 25	24a		X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	-		
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u></u>
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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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, Part IV	28c		_X_
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X_
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	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	38	Х	
	The state of the s		000	

	990 (2009) KANSAS GRAIN AND FEED ASSOCIATION 48-0289	<u> 365</u>	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1		
	U.S Information Returns Enter 0 if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	•
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2a 5	ı		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			_
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	х	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
	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)?	4a	[x
h	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			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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		
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
0a	any contributions that were not tax deductible?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ca		
	was a standard address to the control of the contro	6b		
7	Organizations that may receive deductible contributions under section 170(c).	OD		
′_	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services	1		
d	provided to the payor?	7a		
_	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10		
С		7c		
		76		
d	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1		
е	benefit contract?	7.		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
τ	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
9		í		
h		7h	-	
8	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		:	l
_	at any time during the year?	8_		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the organization make any taxable distributions under section 4966?	9a		
10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	\vdash	
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	1		
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1]	
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	J		l

Form **990** (2009)

12a

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Sec	tion A. Governing Body and Management			
		-	Yes	No
_	Enter the number of voting members of the governing body 1a 16 Enter the number of voting members that are independent 1b 16	_		
b		2		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			v
	officer, director, trustee, or key employee?	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		v
_	of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	X	
6	Does the organization have members or stockholders?	6		
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the		v	
	governing body?	7a	X	
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b_		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:		х	
a	The governing body?	8a 8b	X	
b	Each committee with authority to act on behalf of the governing body?	-80	Λ.	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		х
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	1 9	<u> </u>	
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)		Yes	No
40-	Deep the exception have legal chapters, branches, or affiliates?	10a	162	X
	Does the organization have local chapters, branches, or affiliates?	100		
В	and branches to ensure their operations are consistent with those of the organization?	10b		
44	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11		X
11 11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	- • • •		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		х
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
U	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
·	In Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
9	The organization's CEO, Executive Director, or top management official	15a	x	
h	Other officers or key employees of the organization	15b	Х	
_	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
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?	16a		х
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		Ì	
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation:	-	
	MANAGEMENT - 785-234-0461			
	816 SW TYLER, NO. 100, TOPEKA, KS 66612			
		Form	990	(2009)

932006 02-04-10

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)	(B)	(C)		(D)	(E)	(F)				
Name and Title	Average hours	(6)	Position (check all that apply)		Reportable compensation	Reportable compensation	Estimated amount of			
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated Employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
GARY GANTZ										
CHAIRMAN	0.00	X						0.	0.	0.
STAN STARK										
1ST VICE CHAIRMAN	0.00	X						0.	0.	0.
TED SCHULZ										
2ND VICE CHAIRMAN	0.00	Х	L					0.	0.	0.
MIKE BARRETT										
DIRECTOR	0.00	X						0.	0.	0.
DAVE ERWIN										
DIRECTOR	0.00	X						0.	0.	0.
GARY FRIESEN										
DIRECTOR	0.00	X						0.	0.	0.
JEREMY GIRARD		1								
DIRECTOR	0.00	X						0.	0.	0.
PETE GOETZMANN										
DIRECTOR	0.00	X						0.	0.	0.
GLEN HOFBAUER										_
DIRECTOR	0.00	X						0.	0.	0.
JERALD KEMMERER									_	_
DIRECTOR	0.00	X	_		_			0.	0.	0.
RICK KIMBREL									_	_
DIRECTOR	0.00	X	_					0.	0.	0.
SCOTT MCWILLIAMS		l								
DIRECTOR	0.00	X	_			_		0.	0.	0.
JERRY MURPHY				1						
DIRECTOR	0.00	X	ļ	<u> </u>				0.	0.	0.
ROB NORDMEYER		l							_	
DIRECTOR	0.00	X	_			_		0.	0.	0.
RUSS RONNEBAUM								_	_	_
DIRECTOR	0.00	X		-	-		<u> </u>	0.	0.	0.
VANCE WESTHUSIN	1 2 22	.,							^	_
DIRECTOR	0.00	X	-	H	├—		<u> </u>	0.	0.	0.
TOM R TUNNELL	40.00			_	x			163,695.	0.	10,562.
PRESIDENT	40.00		<u> </u>	Δ	A			103,033.		Form 990 (2009)

932007 02-04-10

(A)					(E)			(F)					
Name and title	Average hours	(cl		Posi all t			lv)	Reportable compensation	Reportable compensation			timat nount	
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)		com fr org	other pensa om th anıza d rela anızat	ation ne tion ted
MARY JANE STANKIEWICZ	40.00					х		100,807.		0.			0.
							-						
					-	İ						-	
												. <u>-</u>	
											· · · - · ·		
Total number of individuals (including but no compensation from the organization)	ot limited to th	nose	liste	 ed al	DOV	e) wt	no r	264,502. eceived more than \$100		0.	1_	0,5	62. 2
										ſ		Yes	No
 3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the st 	uch individual										3		x
and related organizations greater than \$150Did any person listed on line 1a receive or a									ices rendered to		4_	X	
the organization? If "Yes," complete Sched Section B. Independent Contractors	ule J for such	pers	on	•							5_		X
Complete this table for your five highest co the organization. NONE	mpensated in	dep	ende	ent c	ontı	racto	rs t	that received more than	\$100,000 of comp	ensa	ation f	from	
(A) Name and business	address							(B) Description of s	ervices	С	ompe		n
					_		_						
					41				Ab an				
Total number of independent contractors (i \$100,000 in compensation from the organic		iot li	mite	u to		se 115 0		auove) wno received m	lore triari		_	990	

Part IX Statement of Functional Expenses

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

	All other organizations must compl		not required to comp	ete columns (B), (C), an	
	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 U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members		-		
5	Compensation of current officers, directors,		_		
	trustees, and key employees	275,064.			
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	321,330.			
8	Pension plan contributions (include section 401(k)	521,550.			
J	and section 403(b) employer contributions)	48,186.			
9	Other employee benefits	61,447.			
	ъ ". Т	43,744.			
10 11	Fees for services (non-employees):	4J,/440			
11					
a	Management	580.			
b	Legal	9,012.			
С.	Accounting	9,012.			
d	Lobbying		 		
е	Professional fundraising services. See Part IV, line 17			-	
f	Investment management fees	40			
g	Other	40.			
12	Advertising and promotion	1,853.			
13	Office expenses	17,024.			
14	Information technology	13,660.			
15	Royalties				
16	Occupancy	38,565.			
17	Travel	16,126.	-		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	88,857.			
20	Interest	11,788.			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	52,137.			
23	Insurance	5,797.			
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.)				
а	POSTAGE, PRINTING AND SU	47,230.			
b	TAL PROJECT COSTS	22,563.			
c	DUES AND SUBSCRIPTIONS	20,728.			
d	TRAINING COSTS	14,931.			·········
e	BOARD OF DIRECTORS EXPE	10,109.			
f	All other expenses	15,854.			
-	-	1,136,625.			
<u>25</u>	Total functional expenses. Add lines 1 through 24f	1,130,043.			
26	Joint costs. Check here J if following				
	SOP 98-2. Complete this line only if the organization	Ì			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	L			Form 990 (200

		(A) Beginning of year		(B) End of year
1.	Cash - non-interest-bearing	130,122.	1	304,779.
1 2	Savings and temporary cash investments	213,000.	2	
2	Pledges and grants receivable, net	213,000.	3	
3			4	
4	Accounts receivable, net		-	
5	·			
	employees, and highest compensated employees. Complete Part II of Schedule L		5	
	Receivables from other disqualified persons (as defined under section	···	-3	
6	4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	De All of Och adula I		6	
_			7	
7	Notes and loans receivable, net		8	
8	Inventories for sale or use	14,699.	9	11,533.
9	Prepaid expenses and deferred charges	14,033.	9	11,333.
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1,122,013.			
١ .	400 400	753,150.	10c	710 531
		119,556.		712,531. 172,720.
11	Investments - publicly traded securities	26,000.	11 12	26,000.
12	Investments - other securities. See Part IV, line 11	20,000.	13	20,000.
13	Investments - program-related. See Part IV, line 11		14	
14		62,411.	15	62,053.
15 16	Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34)	1,318,938.	16	1,289,616.
17	Accounts payable and accrued expenses	116,545.	17	852.
18	Grants payable	110,545.	18	052
19	Deferred revenue	28,000.	19	29,700.
20	Toursell hand tables	20,000.	20	23,100
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Payables to current and former officers, directors, trustees, key employees,			
- 22	highest compensated employees, and disqualified persons. Complete Part II			
	of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties	194,750.	23	243,685.
24	Unsecured notes and loans payable to unrelated third parties	10,050.	24	6,655.
25	Other liabilities. Complete Part X of Schedule D	88,140.	25	106,143.
26	Total liabilities. Add lines 17 through 25	437,485.	26	387,035.
20	Organizations that follow SFAS 117, check here X and complete	13//1031		30,7033.
.	lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	881,453.	27	902,581.
28	Temporarily restricted net assets	001/1501	28	
29	Permanently restricted net assets		29	
27 28 29 30 31 32	Organizations that do not follow SFAS 117, check here			
	complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	- ·
32	Retained earnings, endowment, accumulated income, or other funds		32	 -
33	Total net assets or fund balances	881,453.	33	902,581.
1 ~~	Total liabilities and net assets/fund balances	1,318,938.	34	1,289,616.

Pa	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: Cash Cash Counting MODIFIED CASH			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			İ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	a_		_X
b	Were the organization's financial statements audited by an independent accountant?	ь		$_{\mathtt{X}}$
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,	ĺ		
	review, or compilation of its financial statements and selection of an independent accountant?	c_		
	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:		Ì	
	Separate basis Consolidated basis Both consolidated and separate basis			
За	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?	a		_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	ь		

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below.

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

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

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

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

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

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

• 5	Section 501(c)(4), (5), or (6) organizations: Co	mplete Part III.			
	e of organization			E	mployer identification number
	KANSAS GRAII	N AND FEED	ASSOCIATION		48-0289365
Pa	rt I-A Complete if the organizat	ion is exempt ur	nder section 501(c)	or is a section 52	7 organization.
1	Provide a description of the organization's d	rect and indirect poli	tical campaign activities	ın Part IV.	
2	Political expenditures				> \$
3	Volunteer hours				
,					
Pa	rt I-B Complete if the organizat	ion is exempt ur	nder section 501(c)		
	Enter the amount of any excise tax incurred	-			\$
	Enter the amount of any excise tax incurred		-		▶\$
	If the organization incurred a section 4955 to	ax, did it file Form 472	20 for this year?		Yes No
-	Was a correction made?				Yes No
	If "Yes," describe in Part IV. rt I-C Complete if the organizat	ion is exempt ur	der section 501(c)	except section 5	01(c)(3)
					> \$
	Enter the amount directly expended by the filter the amount of the filing organization's		•		Φ
2	exempt function activities	idilas contribatea to	other organizations for s	ection 527	▶ \$
3	Total exempt function expenditures. Add lin	 es 1 and 2 Enter here	 and on Form 1120-POL		· · · · · · · · · · · · · · · · · · ·
3		oo rana z. zmornon	, and 611 / 6111 / 720 / 62		▶\$
4	Did the filing organization file Form 1120-PC) for this year?	•••••		Yes No
-	Enter the names, addresses and employer	-	• • •		
Ŭ	For each organization listed, enter the amou				
	that were promptly and directly delivered to				
	(PAC). If additional space is needed, provide	e information in Part I	V		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro	m (e) Amount of political
	, ,	• •		filing organization's	
				funds. If none, enter	-0 promptly and directly delivered to a separate
					political organization.
					If none, enter -0
				- 	
					1

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LHA

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009					0289365 Page 2						
Part II-A Complete if the org		npt under section	on 501(c)(3) and file	ed Form 5768							
(election under sec	tion 501(h)).										
	tion belongs to an affi										
B Check 🕨 🔛 if the filing organiza	tion checked box A ar	nd "limited control" pr	ovisions apply								
	ts on Lobbying Exper ditures" means amou		.)	(a) Filing organization's totals	(b) Affiliated group totals						
1a Total lobbying expenditures to influ	uence public opinion (grass roots lobbying)									
b Total lobbying expenditures to influ	uence a legislative boo	ly (direct lobbying)	<i></i>								
c Total lobbying expenditures (add li	nes 1a and 1b)				<u> </u>						
d Other exempt purpose expenditure	es										
e Total exempt purpose expenditure	s (add lines 1c and 1c		,								
f Lobbying nontaxable amount. Enter	er the amount from the	e following table in bo	th columns.		<u> </u>						
If the amount on line 1e, column (a) o	r (b) is: The lob	bying nontaxable an	nount is:		•						
Not over \$500,000		the amount on line 1e)								
Over \$500,000 but not over \$1,000	0,000 \$100,00	0 plus 15% of the ex	cess over \$500,000.								
Over \$1,000,000 but not over \$1,5			cess over \$1,000,000.								
Over \$1,500,000 but not over \$17,		0 plus 5% of the exce	ess over \$1,500,000								
Over \$17,000,000	\$1,000,0	000									
g Grassroots nontaxable amount (en											
h Subtract line 1g from line 1a. If zer			 								
i Subtract line 1f from line 1c. If zero or less, enter -0-											
j If there is an amount other than ze		line 1i, did the organiz	ration file Form 4720		п., п. ,						
reporting section 4911 tax for this					Yes No						
	ations that made a s		r Section 501(n) In do not have to comp es 2a through 2f on pa								
-			ar Averaging Period	· · · · · · · · · · · · · · · · · · ·							
· · · · · · · · · · · · · · · · · · ·											
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total						
2a Lobbying nontaxable amount											
b Lobbying ceiling amount											
(150% of line 2a, column(e))											
c Total lobbying expenditures			ļ								
d Grassroots nontaxable amount			-								
e Grassroots ceiling amount											
(150% of line 2d, column (e))											
f Grassroots lobbying expenditures			<u> </u>		<u> </u>						

(election under section 501(h)).

Solicition Sol			(a))	(I	o)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if lile Form 4720 for this year? Part IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carriover lobbying and political expenditures from the prior vear? 3 X Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part IIII-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid). a Current year 2 C Total 3 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues 3 90, 400. 4 If notices were sent and the amount on line 2 ce exceeds the			Yes	No	Amo	ount
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1))? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 11 20 bd the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization uncurred a section 4912 tax, did if life Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the pnor year? 3 X Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 5 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expension of the excess does the organization agree to carryover to the reasonable estimate of nond	1	During the year, did the filing organization attempt to influence foreign, national, state or			 	
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? l Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 1 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the filing organization nocurred a section 4912 to the very series of the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2 Description of the excess of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenses for which the section 527(f) tax was paid). 5 Taxable amount of lobbying and political expenditures (see instructions) 5 Taxable amount of lobbying and politica		local legislation, including any attempt to influence public opinion on a legislative matter				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filling organization incurred a section 4912 tax, idid it file Form 4720 for this year? Part III-A] Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 2 X 3 Did the organization make only inhouse lobbying expenditures of \$2,000 or less? 2 2 X 3 Did the organization make only inhouse lobbying and political expenditures from the pnor year? 1 Dues, assessments and similar amounts from members 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 2 A 73,695. C Section 162(e) mondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 a Current year b Carryover from last year c Total 5 Complete if the organization in a cection 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 90,400. 4 If notices were sent and the amount on line 2 cexceeds the amount on line 3, what portion of the excess does the organizat		or referendum, through the use of:	ļ			
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Raillies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total Add lines to through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 d if the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? 1	а	Volunteers?				
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? If "Yes," describe in Part IV j Total Add lines 1c through 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carryover lobbying and political expenditures from the prory year? 3 X Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 152(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2b 16,189, or 1	b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
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	3 Par 1 2 a b c 3 4	Till-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) t IV Supplemental Information Determine the prior year? Taxable amount of provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the political expenditure of the part I-B, line 4; Part I-C, line 5; and the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and the part to provide the part to provide the description and the part to provide the p	al	3 5), or se le 3 is ar 1 2a 2b 2c 3	209 73 10 89	3,695, 6,189, 9,884, 0,400,
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Schedule D

Department of the Treasury Internal Revenue Service

(Form 990)

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

Name of the organization

Employer identification number

_	KANSAS GRAIN AND FI		48-0289365
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Fund:	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		
	į	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	sed funds
•	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
·	for charitable purposes and not for the benefit of the donor o	• •	•
			Yes No
Par			
1	Purpose(s) of conservation easements held by the organization	•	are re, mio 7.
•	Preservation of land for public use (e.g., recreation or p		storically important land area
			-
	Protection of natural habitat	Preservation of a cer	tified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization held a qualification of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the organization of the complete lines 2a through 2d if the complete 2a through 2d if the complete lines 2a through 2d if the complete	led conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements	• • • •	
b			2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	. <u>2c</u>
d	Number of conservation easements included in (c) acquired a	after 8/17/06	. 2d
3	Number of conservation easements modified, transferred, relative	eased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	nodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	tholds?	Yes L No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements during	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
	conservation easements.		
Pai	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	<u>. </u>	
	the footnote to its financial statements that describes these	· ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art, historical treasures
	or other similar assets held for public exhibition, education, or	•	
		r research in fartherance of public service	e, provide the following amounts relating to
	these items:		▶ ¢
	(i) Revenues included in Form 990, Part VIII, line 1		. •
_	(ii) Assets included in Form 990, Part X	• • • • • • • • • • • • • • • • • • • •	• • •
2	If the organization received or held works of art, historical trea		ai gain, provide
	the following amounts required to be reported under SFAS 1	16 relating to these items:	
а	• • • • • • • • • • • • • • • • • • • •		\$
b	Assets included in Form 990, Part X		▶ \$

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932051 02-01-10

Schedule D (Form 990) 2009

	dule D (Form 990) 2009 KANSAS (t III Organizations Maintaining C	GRAIN AND					er Sim			Page 2
3	Using the organization's acquisition, accession							•		
•	(check all that apply):	ni, and other record	20, 0 1100	it any or asc	ionowing and	at are a t	sigi iiilodi i	t uso of it	3 CONCULIO	i itoms
а	Public exhibition	d		l can or evo	hange progr	ame				
b	Scholarly research	e			ilalige progr					
	Preservation for future generations	e	,	Oti 161						
C		llootions and avale	- ha 41	fi inth an t	ha araani-at	on'o ove		In D	~~ VIV	
4	Provide a description of the organization's co			-				Jose III P	art AIV.	
5	During the year, did the organization solicit or to be sold to raise funds rather than to be ma					ier Simila	ır assets	Г	Yes	
Par	t IV Escrow and Custodial Arrang					e" to Fo	rm 000 5	Part IV lin		No_
1 41	reported an amount on Form 990, Part		ere II OIÉ	gariization a	iisweieu ie	S to ro	iiii 990, r	ait iv, iiii	0 3, 0;	
	Is the organization an agent, trustee, custodia		diani for		an ar athar a	octo po	t include			
ra	5 000 D 170		-	CONTINUE	is of other as	ssets HO	i include	, r	¬ _v	
				4		• •	•	∟	Yes	∟ No
D	If "Yes," explain the arrangement in Part XIV a	and complete the ic	ollowing	table:				1	A	
	B								Amount	
C	Beginning balance						1c			
d	Additions during the year		-	-		-	1d			
е	Distributions during the year		-	••		-	<u>1e</u>	<u> </u>		
f					•	-	1f	<u> </u>		
	Did the organization include an amount on Fo	orm 990, Part X, line	217					L	Yes	∟ No
-	If "Yes," explain the arrangement in Part XIV.							· · · · · ·		
Par	t V Endowment Funds. Complete if				ĭ					
		(a) Current year	(b) P	nor year	(c) Two yea	rs back	(d) Three	years bac	k (e) Four	years back
1a	Beginning of year balance									
b	Contributions				 		, .			
C	Net investment earnings, gains, and losses									
ď	Grants or scholarships								<u>.</u>	
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 a	as [.]							
а	Board designated or quasi-endowment > _		_%							
b	Permanent endowment	%								
С	Term endowment >9	6								
За	Are there endowment funds not in the posses	ssion of the organiz	ation tha	at are held a	ınd administe	ered for t	the orgar	ization	_	
	by [.]									Yes No
	(i) unrelated organizations			_					3a(i)	
	(ii) related organizations	-							3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	listed as required of	n Sched	dule R?					3b	
4	Describe in Part XIV the intended uses of the	· ·			•	•	•		<u></u>	
Par	t VI Investments - Land, Building), Part X, line	10.		·		
	Description of investment	(a) Cost or o			t or other		Accumula	ted	(d) Book	value
	•	basis (investr			(other)		preciatio	- 1	• • •	
1a	Land			5	0,000.				50	0,000.
b	Buildings				9,915.		205,2	241.	_	674.
-	Leasehold improvements	"			_ , •		/-			<u></u>
4	Equipment			3.0	2,098.		204,2	241.	97	7,857.
	Other									_, ,

Schedule D (Form 990) 2009

712,531.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2009 KANSAS GRA	IN AND FEED AS	SOCIATION	48-0289365 Page 3
Part VII Investments - Other Securities. S	ee Form 990, Part X, line 1	2.	
(a) Description of security or category (including name of security)	(b) Book value) Method of valuation: or end-of-year market value
Financial derivatives			
Closely-held equity interests			
Other			
		<u> </u>	
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value) Method of valuation:
(a) Description of investment type	(b) DOOK Value	Cost o	or end-of-year market value
	<u> </u>		
	<u></u>	<u></u>	
	<u></u>		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, In			
(a) Description		(b) Book value
			
	···········		
			
Total. (Column (b) must equal Form 990, Part X, col (B) lin		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Part X Other Liabilities. See Form 990, Part X	I, line 25.	(L) A	
1 (a) Description of liability		(b) Amount	
Federal income taxes		106 112	
DEFERRED COMPENSATION		106,143.	
		400 110	
Total. (Column (b) must equal Form 990, Part X, col (B) lii		106,143.	
2. FIN 48 Footnote. In Part XIV, provide the text of the fo	otnote to the organization	's financial statements th	nat reports the organization's liability for
uncertain tax positions under FIN 48 932053 02-01-10			Schedule D (Form 990) 2009

	dule D (Form 990) 2009 KANSAS GRAIN AND FEED ASSOCI	ATION		48-0289365	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to A	udited Final	ncial State	ements	<u>-</u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		
4	Net unrealized gains (losses) on investments		4		
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	<u>_</u>	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	<u> </u>	10		
Par	t XII Reconciliation of Revenue per Audited Financial Statement	s With Reve	enue per F	Return	
1	Total revenue, gains, and other support per audited financial statements		••••	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a		<u> </u>	
b	Donated services and use of facilities	2b		<u> </u>	
С	Recoveries of prior year grants	2c]	
d	Other (Describe in Part XIV.)	2d		_	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		<u>j</u>	
b	Other (Describe in Part XIV.)	4b		<u> </u>	
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
Pa	t XIII Reconciliation of Expenses per Audited Financial Statemen	ts With Exp	enses per	r Return	
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			1 1	
а	Donated services and use of facilities	2a		_	
b	Prior year adjustments	2b	<u></u> .	_	
С	Other losses	2c			
d	Other (Describe in Part XIV.)	2d		<u> </u>	
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		<u> </u>	
b	Other (Describe in Part XIV.)	4b		<u> </u>	
С	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	
Pa	t XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, li	nes 1a and 4; F	Part IV, lines 1	1b and 2b; Part V, line 4	; Part
X, lın	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complet	e this part to p	rovide any ad	lditional information.	
					
	· · · · · · · · · · · · · · · · · · ·				

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

Employer identification number Name of the organization KANSAS GRAIN_AND FEED ASSOCIATION 48-0289365 Fundraising Activities. Complete if the organization answered "Yes" to Form 990. Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid (iii) Did (vi) Amount paid (iv) Gross receipts (i) Name of individual to (or retained by) to (or retained by) (ii) Activity have custody or control of contributions? fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

932081 02-03-10

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

Schedule G (Form 990 or 990-EZ) 2009

932082 02-03-10

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

administer charitable gaming?

11 Does the organization operate gaming activities with nonmembers?

Sch	edule G (Form 990 or 990 EZ) 2009 KANSAS GRAIN AND FEED ASSOCIATION 48-028	1936	5 Pa	age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in:	1		ł
а	The organization's facility			
b	An outside facility]		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
	Address >			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
D	of "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			}
_	of gaming revenue retained by the third party \$\sum_{\text{uniform}} \square \text{uniform} \text{uniform} . If "Yes," enter name and address of the third party:			
C	if Yes," enter name and address of the third party:			
	Name			
	Address >			
16	Gaming manager information:			
	Name			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

2009

Open to Public Inspection

Internal Revenue Service

Name of the organization

➤ Attach to Form 990. ➤ See separate instructions.

KANSAS GRAIN AND FEED ASSOCIATION

Employer identification number 48-0289365

Schedule J (Form 990) 2009

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	X Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study	. '		
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			l
а	Receive a severance payment or change-of-control payment?	4a		_X_
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
				ĺ
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			ĺ
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		<u> </u>
b	Any related organization?	5b		<u> </u>
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		
b	Any related organization?	6b_		<u> </u>
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			l
	not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			l
	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			l
	Regulations section 53 4958-6(c)?	9_		

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

KANSAS GRAIN AND FEED ASSOCIATION

Schedule J (Form 990) 2009

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

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

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

		(B) Breakdown of \	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(a)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	retifement and other deferred compensation	Nontaxable benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
	Ξ	161,924.		1,771.	10,562.		174,257.	173,056.
TOM R TUNNELL	(ii)							
ŀ	Ξ							
	∷∭							
	<u>(ii)</u>							
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	(ii)							

Schedule J (Form 990) 2009

SCHEDULE O

(Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

KANSAS GRAIN AND FEED ASSOCIATION

Employer identification number 48-0289365

TANDAD GRAIN THE THE ADDOCITION 1 40 0205303
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATION TO ITS MEMBERS, THE PUBLIC AND GOVERNMENT
FORM 990, PART VI, SECTION A, LINE 6: THE ASSOCIATION HAS MEMBERS WHO PAY
ANNUAL DUES, ELIGIBILITY TO BE A MEMBER IS DEFINED IN THE ASSOCIATION'S
BYLAWS.
FORM 990, PART VI, SECTION A, LINE 7A: ACTIVE MEMBERS(AS DESCRIBED IN THE
ASSOCIATION'S BYLAWS) ELECT THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION A, LINE 7B: THE BOARD OF DIRECTOR'S NOMINATIONS
FOR DIRECTOR POSITIONS OR CHANGES IN THE BYLAWS OF THE ASSOCIATION ARE
SUBJECT TO APPROVAL BY THE ACTIVE MEMBERS
FORM 990, PART VI, SECTION B, LINE 11: NO REVIEW BY THE GOVERNING BODY
ONLY BY THE STAFF
FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION IS SET AS PART OF THE
BUDGETARY FUNCTION BY THE EXECUTIVE COMMITTEE OF THE GOVERNING BODY
FORM 990, PART VI, SECTION C, LINE 19: THE ASSOCIATION HAS COPIES OF ALL
APPLICABLE DOCUMENTS ON FILE AT IT'S OFFICE. THESE WILL MADE AVAILABLE TO
THE PUBLIC UPON APPROPRIATE REQUEST
MODIFIED CASH BASIS WHERE MEMBERS DUES INCOME IS RECOGNIZED AS RECEIVED

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

Schedule O (Form 990) 2009

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection

OMB No 1545-0047

Employer identification number 48-0289365 Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ▶ Attach to Form 990. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) KANSAS GRAIN AND FEED ASSOCIATION Name of the organization Part

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	tions (Complete if the organization ans	wered "Yes" to Form 990, Par	t IV, line 34 becaus	e it had one or more r	elated tax-exempt
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity

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

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Schedule R (Form 990) 2009

48-0289365

Page 2

Schedule R (Form 990) 2009 KANSAS GRAIN AND FEED ASSOCIATION

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

9	General or managing partner?	res No	 	 _	_	_	 	-				_	 1 2
€	Code V-UBI General or amount in box managing 20 of Schedule partner?	K-1 (Form 1065)											
Ξ	Disproportion- ate allocations?	Yes No											4 000
(b)	Share of end-of-year	\neg											10 0cm // 100 0cm
E	Share of total income												00 m202 04 #00 X# 1
(e)	Predominant income (related, unrelated, excluded from tax under	sections 512-514)											The state of the s
ਉ	Direct controlling entity												to be observed on the second
<u> </u>	Legal domicile (state or foreign	country)								-			
(Q)	Primary activity												
(a)	Name, address, and EIN of related organization												Charles Charles Single and

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) Part IV

organizations treated as a corporation of those during the tax year)	year /						
(a)	(q)	(0)	(p)	(p)	(J)	(6)	£
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
MIDWEST MANAGEMENT SOLUTIONS, INC., - 90-0132717		_ PE-1	KANSAS GRAIN &				
816 SW TYLER			FEED				
66612	MANAGEMENT SERVICES	KS	ASSOCIATION	C CORP	<1,977,>	25,655,	100%
					•		
					_		
						_	

Schedule R (Form 990) 2009

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932162 02-04-10

Schedule R (Form 990) 2009 KANSAS GRAIN AND FEED ASSOCIATION

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	٥
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ons listed in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	:::::::::::::::::::::::::::::::::::::::		ta	^	×
:	:		₽	~	×
Gift grant, or capital contribution from other organization(s)			2	_	×
			7		×
d Loans of loan guarantees to of for other organization(s)			2		. ا
e Loans or loan guarantees by other organization(s)	:		9	7	≺
				-	
f Sale of assets to other organization(s)			#		ايد
			5	_	54
F Cobana of secate	:		ŧ	_	×
			;		>
i Lease of facilities, equipment, or other assets to other organization(s)	: :		=		اہ
			1		:
j Lease of facilities, equipment, or other assets from other organization(s)		:	=	~	×
k Performance of services or membership or fundraising solicitations for other organization(s)	:		¥	^	ايح
1 Performance of services or membership or fundraising solicitations by other organization(s)	:	:	=	_	×
m Sharing of facilities, equipment, mailing lists, or other assets		•	Ę	×	
Considerate pictures of the control of the co	:	•	÷	×	
n originity of paid emproyees				-	
• Beimbircement paid to other organization for expenses			ç		×
	•		<u>,</u>	╁	
p Reimbursement paid by other organization for expenses			2	4	
					- [,
q Other transfer of cash or property to other organization(s)			5	~	×
r Other transfer of cash or property from other organization(s).			+	^	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	g covered relationships and transactio	on thresholds.			
(a) Name of other organization(s)	Tra	(b) Transaction	(c) Amount involved	volved	
		pa (a1)			
(1) MIDWEST MANAGEMENT SOLUTIONS INC		Z	103	3,042	2
•					
(3)					
(4)					
		-			
(9)		_			
832183 02-04-10 30		Schedul	Schedule R (Form 990) 2009	990) 20	8

48-0289365

Page 4

Schedule R (Form 990) 2009 KANSAS GRAIN AND FEED ASSOCIATION

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	(e) Share of end-of- year assets	Disproportionate allocations?	(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner? Yes No
					-		

Schedule R (Form 990) 2009

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box Of the complete only Part I and check this box Of the complete only Part II and check this box	ua farma)	▶ 🗓
 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of the Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously 		m 8868.
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and co	omplete 	▶□
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request to file income tax returns.	an exten	sion of time
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensionated below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic www.irs.gov/efile and click on e-file for Chanties & Nonprofits.	onically if consolida	(1) you want the additional ated Form 990-T. Instead,
Type or Name of Exempt Organization	Empl	oyer identification number
KANSAS GRAIN AND FEED ASSOCIATION	4	8-0289365
File by the due date for filing your 816 SW TYLER, NO. 100		
City, town or post office, state, and ZIP code For a foreign address, see instructions. TOPEKA, KS 66612		
Check type of return to be filed (file a separate application for each return):		
X Form 990	5227 6069	
MANAGEMENT • The books are in the care of ▶ 816 SW TYLER STE 100 - TOPEKA, KS 6661 Telephone No. ▶ 785-234-0461 • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If box ▶ If it is for part of the group, check this box ▶ and attach a list with the names and EINs of a	this is fo	
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time u AUGUST 15, 2010 , to file the exempt organization return for the organization named		The extension
is for the organization's return for: X calendar year 2009 or tax year beginning, and ending		
2 If this tax year is for less than 12 months, check reason. Initial return		Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
tax payments made. Include any prior year overpayment allowed as a credit. c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3b 3c	\$ \$ N/A
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and For		
LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Mailed IRS 5-6-11	. to	Form 8868 (Rev. 4-2009)

92383 1