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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2009

OMB No 1545-0047

Open to Public

			<u> </u>					Inspection
			endar yea	r, or tax year beginning C Name of organization	g 01-01-2009 and ending 12-31-20	UŸ	D Employer id	lentification number
	eck ıf a dress ch		Please use IRS	The Farmers Educationa Union of America	l and Cooperative		84-02005	
		larige	label or	Doing Business As			E Telephone n	
	me cha		print or type. See				(202) 554-	-1600
Init	ial retu		Specific Instruc-		O box if mail is not delivered to street add	ress) Room/suite	G Gross receipts	
Ter	mınate	d	tions.	20 f st nw No 300			G Gloss receipts	
┌ Am	ended	return		City or town, state or co	untry, and ZIP + 4		1	
Г _{Арі}	olication	n pending		Washington, DC 20001				
		_	F Nar	ne and address of princ	cinal officer	W(a) I. th	.	6
				Johnson	angui omeer		ıs a group retui ates?	TYes ▼ No
				nw ste 300				
			wasnin	gton, DC 20001		1 ' '	ll affiliates inclu	
——— т Та	x-exem	npt status	▼ 501(c)) (5) ◄ (insert no)	1947(a)(1) or	_		t (see instructions)
			1- 301(0) (3) ¬ ((iiiseit iio) .	+947(d)(1) (i 327	H(c) Grou	up exemption n	umber 🟲
J W	ebsite	e: ► n/a				1		
K Forr	n of or	ganızatıon	✓ Corporat	tion Trust Association	Other 🕨	L Year of fo	ormation 1902	M State of legal domicile CO
Pa	rt I	Summ	nary			•	•	
	1	•		<u> </u>	on or most significant activities			
ω.		To prote	ct and enl	hance the economic we	ll-being and quality of life for family	farmers and ra	nchers and the	r rural communities
Governance								
Ĕ								
<u>₹</u>	2	Check th	us box ⊫F	If the organization di	scontinued its operations or dispose	d of more than	25% of its net	assets
ŝ	3		•		ing body (Part VI, line 1a)			3 27
			_	_				
Activities &	4				of the governing body (Part VI, line 1	.D)		
Ē	5			nployees (Part V , line)				528
ទ្ធ	6				ecessary)			5
	1	_			from Part VIII, column (C), line 12			'a 53,816
	Ь	Net unre	lated busi	iness taxable income f	rom Form 990-T, line 34		7	'b (
						Pric	or Year	Current Year
۵.	8	Contrib	utions and	d grants (Part VIII, lın	e 1 h)		1,150,557	922,327
П	9	Progran	n service	revenue (Part VIII, lın	e 2g)	-	227,512	251,318
Reveni	10	Investn	nent incor	me (Part VIII, column	(A), lines 3, 4, and 7d)		981,729	372,109
Δ.	11	O ther re	evenue (P	art VIII, column (A), l	nes 5, 6d, 8c, 9c, 10c, and 11e)		1,272,145	1,399,643
	12				must equal Part VIII, column (A), lı	ne	2 624 242	2 2 4 5 2 2 7
					 		3,631,943	2,945,397
	13			•	X, column (A), lines 1-3)		136,366	0
	14			·	(, column (A), line 4)			171,060
ø	15		s, other co	ompensation, employee	e benefits (Part IX, column (A), lines	5-	2,122,201	1,386,769
ě	46-	10)	6				2,122,201	
Expenses	16a				olumn (A), line 11e)			0
五	Ь			enses (Part IX, column (D),				
	17				nes 11a-11d, 11f-24f)		1,672,171	1,946,271
	18	Total ex	kpenses /	Add lines 13-17 (mus	t equal Part IX, column (A), line 25)		3,930,738	3,504,100
	19	Revenu	e less exp	penses Subtract line 1	8 from line 12		-298,795	-558,703
\$ \$						_	g of Current	End of Year
Net Assets or Fund Balances						<u> </u>	/ear	
% 88 €	20						18,940,750	20,271,205
<u> </u>	21						2,241,732	1,775,291
	22	_			ne 21 from line 20		16,699,018	18,495,914
Pai	rt II		ture Bl					
					examined this return, including accompanyir aration of preparer (other than officer) is bas			
			i, it is true,	correct, and complete been	aration of preparer (other than officer) is but	sea on an imonna	non or which prepa	mer has any knowledge
Sign	1	****	*			2010	-07-02	
Here	е	Signat	ture of office	er		Date		
		Roger	Johnson pr	resident				
			or print nam					
		Preparer's	. k		Date	Check If	Preparer's ident	tifying number
Paid		signature				self-	(see instruction	
	arer's	F'	F	a k DONDIA COLIC		empolyed 🕨 🦵		
Use (ıf self-em		•			EIN Þ	
USE (Unity		and ZIP + 4	44 INVERNESS DRIVE	EAST			
				ENGLEWOOD, CO 801	.12		Phone no 🕨 (303) 799-6826
May	the IR	S discuss	this retu	·	own above? (see instructions) .			✓ Yes No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

To protect and enhance the economic well-being and quality of life for family farmers and ranchers and their rural communities

	. otai piogiaili sci	TICE EXPENSES F	3,304,10			Form 990 (2009)
	Total program ser	· · · · · · · · · · · · · · · · · · ·	3,504,10	·	· · · · · · · · · · · · · · · · · · ·	•
4d	Other program se (Expenses \$	rvices (Describe in Sche 2,769,251 incli	dule O) uding grants o	of \$) (Revenue \$)
	0.11	(December 2)	dada o)			
	(Code) (Expenses \$	2,769,251	ıncludıng grants of \$) (Revenue \$)
	Education & Cooperat agricultural products	ive Development-education of	its members in t	the techniques of farming, p	roduction, distribution and the process o	f purchasing and marketing
4c	(Code) (Expenses \$	117,796	ıncludıng grants of \$) (Revenue \$)
	Membership Services-	Providing membership services	to famers in 33	states and keeping them co	onnected to the farming industry and pro	oviding a support system
4b	(Code) (Expenses \$	350,398	ıncludıng grants of \$) (Revenue \$)
	agencies The office a		notes legislation,		gress, the US Dept of Agriculture, and o and regulations, and brings matters to t	
4a	(Code) (Expenses \$	266,655	including grants of \$) (Revenue \$)
4	Section 501(c)(3)		ons and section	on 4947(a)(1) trusts a	largest program services by expo re required to report the amount ervice reported	
	If "Yes," describe t	hese changes on Schedu	le O			
3	Did the organization services?	n cease conducting, or m	ake sıgnıfıcar	nt changes in how it cor		res ✓ No
	If "Yes," describe t	hese new services on Scl	nedule O			
2	the prior Form 990	n undertake any significa or 990-EZ?	nt program se	ervices during the year		'es ✓ No

Part TV	Check	list of	Peguired	Schedules
	CHECK	IIISL UI	Reuulleu	Juliculies

			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		Νο
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
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		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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		Νο
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		Νο
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
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		Νo
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	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets 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 Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	ĺ		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	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		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> " <i>Yes,"</i> complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
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	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	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		
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		Νο
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		Νο
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		Νο
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		N o
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 owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		N o
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	Yes	
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	Yes	
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		No
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		Νο
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	Yes	
		F	orm 990	(2009)

	(2005)
Part V	Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
.a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
а	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			
L	return	-		
D	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	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		Νo
b	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	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		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	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 to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a]		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
	Section 501(c)(12) organizations. Enter			
а	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)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	vear 12b			

20 fst nw No 300 Washington, DC 20001 (202) 554-1600

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

Se	ction A. Governing Body and Management			
			Yes	No
_				
1a	Enter the number of voting members of the governing body 1a 27			
ь	Enter the number of voting members that are independent 1b 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
ке	venue Code.)		Yes	No
100	Does the organization have local chapters, branches, or affiliates?	10a	165	No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	104		NO
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11		11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		No
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c		Νο
13	Does the organization have a written whistleblower policy?	13		Νο
14	Does the organization have a written document retention and destruction policy?	14		Νο
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?			
а	The organization's CEO, Executive Director, or top management official	15a		Νο
b	Other officers or key employees of the organization	15b		Νο
	If "Yes" to line a or b, 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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	ınızatıor	ı -
	The Organization			

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, and **current** key employees 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, or 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

Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours	Posit	(0	chec	:k al			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
ROB WELLS Trustee/part-time	2 00	Х						0	0	0
DAVID COKER Trustee/part-time	2 00	х						0	0	0
JOAQUIN CONTENTE Trustee/part-time	2 00	Х						0	0	0
GARY TURNER Trustee/part-time	2 00	Х						0	0	0
norbert brauer trustee/part-time	2 00	х						0	0	0
JIM BENHAM Trustee/part-time	2 00	Х						0	0	0
CHRIS PETERSON Trustee/part-time	2 00	Х						0	0	0
DONN TESKE trustee/part-time	2 00	Х						0	0	0
MARILYNN MOMBER trustee/part-time	2 00	Х						0	0	0
DOUG PETERSON trustee/part-time	2 00	X						0	0	0
RUSS KREMER trustee/part-time	2 00	Х						0	0	0
ALAN MERRILL trustee/part-time	2 00	Х						0	0	0
JOHN HANSEN Trustee/part-time	2 00	X						0	0	0
annie cheatham Trustee/part-time	2 00	Х						0	0	0
ROBERT CARLSON Trustee/part-time	2 00	Х						0	0	0
ROGER WISE Trustee/part-time	2 00	Х						0	0	0
terry detrick Trustee/part-time	2 00	Х						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours	Posi t	((tion (hat a	che		I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Ke) employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DAN JOYCE Trustee/part-time	2 00	х						0	0	0
LARRY BREECH Trustee/part-time	2 00	Х						О	0	0
KENT PEPPLER Trustee/part-time	2 00	Х						0	0	0
DOUG SOMBKE Trustee/part-time	2 00	Х						0	0	0
WES SIMS Trustee/part-time	2 00	Х						0	0	0
kent bushman Trustee/part-time	2 00	Х						0	0	0
JIM DAVIS Trustee/part-time	2 00	Х						0	0	0
SUE carlson Trustee/part-time	2 00	х						0	0	0
Roger Johnson PRESIDENT	40 00	Х		х				153,030	0	9,675
CLAUDIA SVARSTAD VICE PRESIDENT	20 00	Х		х				0	0	0
KATRINA THOMAS VICE PRESIDENT OF GOV'T	40 00	х		х				126,796	0	5,793
DAVID VELDE GENERAL COUNSEL	40 00	Х		х				103,709	0	3,961
CLAY PEDERSON ADMINISTRATIVE VICE PRES	40 00	Х		х				109,622	0	0
1b Total					•		>	493,157	0	19,429
2 Total number of individuals (includin			+	ا ما م			\L		_	

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►4

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual			
	on time 1a* 17 Yes, comprete schedule 7101 such marviadar	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	1		N.I.
	Tomacroa to the organization 17 res, comprete senegares 70, such person 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5		Νo

Section R Independent Contracto

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►0

Form 99								Page 9
Part V	/1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
表表	1a	Federated camp	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b	908,331				
%. E	c	Fundraising eve	ents 1c					
Æ æ	d	Related organiz	ations 1d					
يَّ £`ي	e	Government grants	s (contributions) 1e					
ਜੂ ਜੂ	f	All other contribution	ons, gifts, grants, and 1f	13,996				
5 2 €	g		butions included in					
뒫	-	lines 1a-1f \$ _						
လူမှ	h		s 1a-1f	►	922,327			
				Business Code				
ìШ	2a	convention		900,099	219,065	219,065		
e Eg	ь	newsletter		900,099	32,253	32,253		
	c							
er E	d							
S E	e							
Program Service Revenue	f	All other progra	ım service revenue					
<u>ر</u> آ	_	Total Addiss	: 2a_2f		354 340			<u> </u>
	д 3		ome (including dividence		251,318			
			ar amounts)	. F	490,997			490,997
	4		tment of tax-exempt bond p	· · ·	·			
	5	Royalties		▶ ↑				
			(ı) Real	(II) Personal				
	6a	Gross Rents	98,368					
	ь	Less rental expenses	44,552					
	c	Rental income	53,816					
	d	or (loss) Net rental incor	ll me or (loss)		53,816		53,816	
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory						
	b	Less cost or other basis and	118,888					
		sales expenses Gain or (loss)	-118,888					
	c d	· · ·	s)	b -	-118,888	-118,888		
	8a	Gross income fi			110,000	110,000		
Other Revenue		events (not incl \$	reported on line 1c)					
ŧ	Ь		penses b					
0	C		loss) from fundraising (events 🕦				
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19 a					
	b c	Net income or (penses b loss) from gaming activ	/ities►				
	10a	Gross sales of returns and allo						
	ь	Less cost of go	oods sold b					
	С		loss) from sales of inve					
		Miscellaneous	s Revenue	Business Code				
	11a	use of name fee	es .	900,099	1,186,443	1,186,443		
	Ь	Other revenue		900,099	149,809	149,809		
	C	LIFE MEMBERS		900,099	8,800	8,800		
	d	All other revenu	l		775	775		
		Total revenue		· · · •	1,345,827			
	12	rotai revenue. S	See Instructions	· · ·	2,945,397	1,478,257	53,816	490,997

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations mu			(5)	
	ll other organizations must complete column (A) but are not required to		ns (B), (C), and (B)	(D). (C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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	171,060	171,060		
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	993,637	993,637		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	300,147	300,147		_
10	Payroll taxes	92,985	92,985		
11	Fees for services (non-employees)				
а	Management				
ь	Legal	46,607	46,607		
c	Accounting	56,947	56,947		
d	Lobbying	77,410	77,410		
e	Professional fundraising See Part IV, line 17				_
f	Investment management fees				
g	Other	179,077	179,077		_
12	Advertising and promotion	13,464	13,464		_
13	Office expenses	65,573	65,573		
14	Information technology	,	,		
15	Royalties				
16	Occupancy	321,996	321,996		
17	Travel	231,316	231,316		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	251,610	231,313		
19	Conferences, conventions, and meetings	255,827	255,827		_
20	Interest	,,	, = 1		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	23,364	23,364		
23	Insurance	29,710	29,710		
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	special allocations	246,599	246,599		
b	directors fees	158,069	158,069		-
С	publications	63,040	63,040		_
d	repairs and maintenance	53,283	53,283		-
e	media	35,465	35,465		
f	All other expenses	88,524	88,524		
25	Total functional expenses. Add lines 1 through 24f	3,504,100	3,504,100	0	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in	2,23 ,1230			
	column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) (B) Beginning of year End of year 306.421 272.748 1 1 Cash—non-interest-bearing 2 2 3 3 4 377.085 4 279.185 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net Inventories for sale or use 18,298 159,169 119,720 Land, buildings, and equipment cost or other basis Complete 1.141.430 10a 10a Part VI of Schedule D 519,280 **10c** 10b 696.467 444.963 b Less accumulated depreciation 11 11 17.509.417 12 19,139,542 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 51.080 15 15.047 15 16 18,940,750 16 20,271,205 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 234.348 17 172,420 17 Accounts payable and accrued expenses . 18 18 145,583 19 121,699 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 60,000 24 1.801.801 1,481,172 25 Other liabilities Complete Part X of Schedule D 25 26 **Total liabilities.** Add lines 17 through 25 2,241,732 1,775,291 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 16,699,018 18,495,914 27 Unrestricted net assets 27 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 16,699,018 33 18,495,914 34 Total liabilities and net assets/fund balances 18.940.750 34 20.271.205

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

DLN: 93493195012020

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

1

4

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

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

- ◆ 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
- ◆ 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) or Form 990-EZ, line 35a (regarding proxy tax), then

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

Name of the organization
The Farmers Educational and Cooperative
Union of America

Employer identification number

84-0200555

art I-A	Comple	ete if t	the org	<u>ganizatio</u>	<u>n is exer</u>	<u>npt unde</u>	r section	1501((C)	or is	<u>a se</u>	<u>ction</u>	527	org	<u>ja niza</u>	tion.
					•											

- Provide a description of the organization's direct and indirect political campaign activities in Part IV 2 Political expenditures
- 3 Volunteer hours

art I-B	Complete i	if the orga	<u>anization is</u>	exempt und	<u>er section</u>	501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- If the organization incurred a section 4955 tax, did it file Form 4720 for this year? □ No
- 3 Was a correction made? Yes **4a**

If "Yes," describe in Part IV

- Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).
- Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527
- exempt funtion activities
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year?
- State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments

were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter - 0 directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

☐ Yes ☐ No

P	art II-A Complete if the organization under section 501(h)).	n is exempt under section 501(c)(3) a	nd filed Form 5768	(election
A B	Check If the filing organization belongs to Check If the filing organization checked by	an affiliated group ox A and "limited control" provisions apply		
	Limits on Lobbying (The term "expenditures" means a		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legis	lative body (direct lobbying)	77,410	
c	Total lobbying expenditures (add lines 1a and 1	b)	77,410	
d	Other exempt purpose expenditures		3,504,100	
е	Total exempt purpose expenditures (add lines 1	Lc and 1d)	3,581,510	
f	Lobbying nontaxable amount Enter the amount columns	329,076		
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of l	ne 1f)	82,269	_
h	Subtract line 1g from line 1a If zero or less, en	ter - 0 -	0	
i	Subtract line 1f from line 1c If zero or less, ent	er - 0 -	0	

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expend	litures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount			1,782	329,076	330,858
b	Lobbying ceiling amount (150% of line 2a, column(e))					496,287
c	Total lobbying expenditures			8,909	77,410	86,319
d	Grassroots non-taxable amount			446	82,269	82,715
е 	Grassroots ceiling amount (150% of line 2d, column (e))					124,073
f	Grassroots lobbying expenditures					

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1:						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
2611	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

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DLN: 93493195012020

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

ernal	Revenue Service	► Attach to Fo	orm 990. F See separate instructions.			Inspec	tion
	me of the organi			Emp	loyer identificati	on numbe	er
	Farmers Educations on of America	агани соорегание		84-	0200555		
Pa			dvised Funds or Other Similar F			Comple	te if the
	organiz	zation answered "Yes" to Form 99			The Foundation of the		
1	Total number a	t and of year	(a) Donor advised funds	•	(b) Funds and oth	ier accou	nts
•		tributions to (during year)					
- }		nts from (during year)					
ļ	33 3 3	ue at end of year					
•	Did the organiz	zatıon ınform all donors and donor advı	sors in writing that the assets held in do organization's exclusive legal control?	nor adv	sed	☐ Yes	Г№
i	used only for c	- , , , , , , , , , , , , , , , , , , ,	donor advisors in writing that grant fund efit of the donor or donor advisor, or for a	•		┌ Yes	┌ No
Pai	t III Conse	rvation Easements. Complete	ıf the organızatıon answered "Yes"	to Forn	n 990, Part IV,	lıne 7.	
<u>.</u>	Preservati Protection Preservati Complete lines	of natural habitat ion of open space	on or pleasure) Preservation of a Preservation of a	certifie	d historic structu	ıre	
				-	Held at the E	nd of the	Year
а		of conservation easements		2a			
b	_	restricted by conservation easements		2b			
C		servation easements on a certified his	, ,	2c			
d	Number of cons	servation easements included in (c) a	cquired after 8/17/06	2d			
3 -	the taxable yea	ar ▶	rred, released, extinguished, or terminat	ted by th	ie organization di	uring	
;	Does the organ	tes where property subject to conserva nization have a written policy regarding f the conservation easements it holds?	the periodic monitoring, inspection, hai	ndling of	violations, and	☐ Yes	┌ No
•	Staff and volun	iteer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ments d	uring the year 🛌		
,	A mount of exp	enses incurred in monitoring, inspecti	ng, and enforcing conservation easemen	ts durin	g the year 🟲 🕏		
i		nservation easement reported on line 2) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of se	ection		┌ Yes	☐ No
)	balance sheet,	<u>-</u>	onservation easements in its revenue ar the footnote to the organization's financia nents		•		
ar	t III Organ Comple	izations Maintaining Collectio ete if the organization answered '	ns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Ot	her Similar A	ssets.	
la	art, historical t	treasures, or other similar assets held	116, not to report in its revenue statem for public exhibition, education or resea ancial statements that describes these	rch ın fu			е,
b	historical treas		116, to report in its revenue statement public exhibition, education, or research				
	(i) Revenues II	ncluded in Form 990, Part VIII, line 1			► \$		
	(ii) Assets Incl	luded in Form 990, Part X			► \$		
2	If the organizat	•	orical treasures, or other similar assets S 116 relating to these items	for finan	-		
а	Revenues inclu	uded in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

Part	Till Organizations Maintaining Co	llections of Art	t, His	tori	cal Ti	reasui	res, or C	the	r Similar A	ssets	(cor	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e foll	owing	that are	a signific	ant u	se of its colle	ction		
а	Public exhibition		d	Γ	Loan	orexch	ange prog	rams				
b	Scholarly research		e	Γ	O the	r						
с	Preservation for future generations											
4	Provide a description of the organization's co	allections and expla	ain how	thev	furthe	er the o	rnanizatioi	n's ex	emnt nurnose	ın		
•	Part XIV	meetions and expla	1111 110 1	rtiicy	Taren	or the or	rgamzatioi	15 CA	empt purpose			
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	ΓYe		□ No
Par	t IV Escrow and Custodial Arrang								es" to Form			, 110
	Part IV, line 9, or reported an an						answere	- C	C5 (0 1 0 1 11 1	,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	ediary	for c	ontribu	ıtıons o	rotherass	sets r	not	ΓYe	:s	∏ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng ta	ble		-					
									Α	mount		
c	Beginning balance						ļ	1c				
d	Additions during the year						ļ	1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?				_			┌ Ye	s	 ∏ No
ь	If "Yes," explain the arrangement in Part XIV	,										
	rt V Endowment Funds. Complete		n ans	were	d "Ye	s" to F	orm 990	, Par	t IV, line 10			
	•	(a)Current Year	(b)	Prior Y	'ear	(c) Two	Years Back	(d)	Three Years Back	(e) Fo	ur Yea	ars Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance							1				
2	Provide the estimated percentage of the yea	r end balance held	as			<u> </u>						
– a	Board designated or quasi-endowment	%										
ь	Permanent endowment 🕨 %											
c 3a	Term endowment % Are there endowment funds not in the posses	ssion of the organiz	ation t	hat a	re hel	d and ac	lministere	d for	the			
	organization by	, or on the organiz						u		Y	'es	No
	(i) unrelated organizations								3a	ı(i)		
	(ii) related organizations								3a	(ii)		
	If "Yes" to 3a(II), are the related organizatio							•		3b		
4	Describe in Part XIV the intended uses of th					00 D-	ort M. Joseph	10				
Раг	t VI Investments—Land, Buildings	s, and Equipme	nt. 5			•	i '			. T		
	Description of investment					or other stment)	(b)Cost or basis (oth		(c) Accumulat depreciation	1 74	d) Boo	ok value
	Description of investment			Das	is (ilive	<u> </u>	basis (oti					
1a	Land		•	Das			`	0,330	·			320,330
			•	Das			`		·			320,330
b I	Land		•	Das	is (ilive	surient)	`		·			320,330
b	Land	· · · · · · · · · · · · · · · · · · ·	· · ·	Das	is (iiive	surienty	`		·			320,330
b c d	Land		· · · ·	Das	is (liive	suilent)	32			467		320,330

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
O ther investments	19,139,542	C
investments	19,139,342	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	19,139,542	
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, Im		
(a) Descrip	tion	(b) Book value
Total (Column (b) about a good Form 000 Port V and (B) lime 1	<i>r</i> \	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:		
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
accrued pension costs	816,982	
life members payable	664,190	
	1 101 173	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	1,481,172	

Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,945,397
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,504,100
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-558,703
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	2,355,599
9	Total adjustments (net) Add lines 4 - 8	9	2,355,599
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	1,796,896
_	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		<u> </u>
1	Total revenue, gains, and other support per audited financial statements	1	2,989,949
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		, ,
а	Net unrealized gains on investments		
ь	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 44,552		
e	Add lines 2a through 2d	2e	44,552
3	Subtract line 2e from line 1	3	2,945,397
4	A mounts 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		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,945,397
Par	XIIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret	urn
1	Total expenses and losses per audited financial	₁	3,548,652
2	statements		
a	Donated services and use of facilities		
ь	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)	1	
e	Add lines 2a through 2d	2e	44,552
3	Subtract line 2e from line 1	3	3,504,100
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		2,00.,200
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
ь	Other (Describe in Part XIV) 4b	-	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	3,504,100
_	rt XIV Supplemental Information	<u> </u>	,,

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

Ident if ier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		equity in subsidiary 21899 unrealized GAIN on investments 2011539 pension liability adjustment 322161
Part XII, Line 2d - Other Adjustments		rental 44552
Part XIII, Line 2d - Other Adjustments		rental 44552

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Schedule I (Form 990)

Department of the Treasury

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

OMB No 1545-0047

2009

DLN: 93493195012020

Open to Public Inspection

Internal Revenue Service			Attach to Form 990				Inspect ion
Name of the organization						Employer identificat	ion number
The Farmers Educational and Cooper Union of America	atıve					84-0200555	
Part I General Information	on on Grants and	l Assistance				·	
 Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	ward the grants or as	sıstance [?]				•	┌ Yes ┌ N
Form 990, Part IV, lin Part IV and Schedule	ne 21 for any recip	ent that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000). Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran e or assistance
See Addıtıonal Data Table							

Е	nter	tota	l number	ofsec	tion 5:	01	(c)(3	3) and	governmen	t organizations
---	------	------	----------	-------	---------	----	-------	--------	-----------	-----------------

	,	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 9	990, Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Ident if ier	Return Reference	Explanation	

Software ID:

Software Version:

EIN: 84-0200555

Name: The Farmers Educational and Cooperative Union of America

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

						1	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA FARMERS UNION2881 GEER RD STE D TURLOCK,CA 95381		501C5	12,923				MEMBER SERVICE GRANTS
IOWA FARMERS UNIONPO BOX 8988 AMES,IA 50014		501C5	10,733				MEMBER SERVICE GRANTS
ALASKA FARMERS UNION 490 N MAIN 236 WASILLA,AK 99654		501C5	278				MEMBER SERVICE GRANTS
IDAHO FARMERS UNION 3417 HILAND AVE BURLEY,ID 83318		501C5	248				MEMBER SERVICE GRANTS
ILLINOIS FARMERS UNION 40 ADLOFF LANE SPRINGFIELD,IL 62703		501C5	9,150				MEMBER SERVICE GRANTS
INDIANA FARMERS UNION 50 SOUTH MADISON STREET MORRESVILLE,IN 46158		501C5	9,405				MEMBER SERVICE GRANTS
MICHIGAN FARMERS UNION3280 9 MILE RD NW SPARTA,MI 49345		501C5	5,933				MEMBER SERVICE GRANTS
MISSISSIPPI FARMERS UNION20 F ST NW STE 300 WASHINGTON,DC 20001		501C5	11,310				MEMBER SERVICE GRANTS
NEW ENGLAND FARMERS UNION5 STATE STREET 3RD FLOOR SHELBURNE FALLS, MA 01370		501C5	33,523				MEMBER SERVICE GRANTS
OREGON FARMERS UNION 532 OLIVE STREET EUGENE, OR 97401		501C5	143				MEMBER SERVICE GRANTS

<u>Form 990,</u> Schedule I, Par	<u>rt II, Grants an</u>	<u>ıd Other Assistanc</u>	to Governments	and Organization	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENNSYLVANIA FARMERS UNION776 STETLER RD MIFFLINTOWN,PA 17059		501C5	5,925				MEMBER SERVICE GRANTS
TEXAS FARMERS UNIONPO BOX 7276 WACO,TX 76714	_	501C5	12,218				MEMBER SERVICE GRANTS
WASHINGTON FARMERS UNION1195 ROAD 1 NE COULEE CITY, WA 99115	_	501C5	578				MEMBER SERVICE GRANTS
WISCONSIN FARMERS UNION20 F ST NW STE 300 WASHINGTON,DC 20001	_	501C5	12,735				MEMBER SERVICE GRANTS

DLN: 93493195012020

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

ın Part III

section 53 4958-6(c)?

Name of the organization

The Farmers Educational and Cooperative

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

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

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Uni	on of America		84-0200555			
Pa	rt I Questions Regarding Compensation		<u> </u>			
					Yes	Νo
1a	Check the appropiate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III t					
	First-class or charter travel		Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments					
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org reimbursement orprovision of all the expenses descri			1b		
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive [2		
3	Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all tha		у			
	Compensation committee	Ļ	Written employment contract			
	Independent compensation consultant	। 	Compensation survey or study			
	Form 990 of other organizations	10	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Pa or a related organization	art VI	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control p	aymer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplement	alnor	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-bas	ed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro-	vide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mus	t com	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, li compensation contingent on the revenues of	ne 1a	, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, li compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue any			
а	The organization?			6a		
ь	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, I payments not described in lines 5 and 6? If "Yes," de			7		
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in		·			

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

8

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name (B) Brakkdown of W-2 and/or 1099-MISC compensation (i) Base compensation (i) Base compensation (ii) Date compensation (iii) D						,				
(i) Base incentive compensation incentive compensation compensation Roger Johnson (i) 153,030 compensation compensation per compensation compensation per comp	(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation		(D) Nontaxable	(E) Total of columns	(F) Compensation	
Roger Johnson (i) 153,030 9,675 162,705			(i) Base compensation	ıncentive	(iii) Other reportable compensation		benefits	(B)(ı)-(D)	Form 990 or	
	Roger Johnson	(I) (II)	153,030			9,675		162,705		

Part III Supplemental Information

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

_			
	Ident if ier	Return Reference	Explanation
	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

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DLN: 93493195012020

OMB No 1545-0047

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SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

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.

Name of the organization
The Farmers Educational and Cooperative
Union of America

Employer identification number

84-0200555

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		a copy of the form 990 was provided to the organization's governing body before it was filed
Form 990, Part VI, Section C, line 19		the organization makes its governing documents, conflict of interest policy, and financials statements available upon request
		THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR

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

Cat No 51056K

Schedule O (Form 990) 2009

DLN: 93493195012020

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

84-1502516

Name of the organization The Farmers Educational and Cooperative Union of America 84-0200555

Employer identification number

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)						
(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	
national farmers union service agency 20 F St NW Washington, DC 20001	protect and ehhance the economic well-being and quality of life of farmers	CO	21,899	2,888,118		

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one Part II or more related tax-exempt organizations during the tax year.)

(d) (a)
Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling or foreign country) (if section 501(c)(3)) entity

to sponsor research

national farmers union foundation

31-1582315

20 f st nw affecting farmers and rural communities washington, DC 20001

CO 501(c)(3) 170(b)(1)(a)(v)(ı)

(j)

General or

managing

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

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

al (d)
cile Direct controlling
or entity
gn

(e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations? ai

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

hedule K-1 partner? form 1065)

Yes No

Yes

No

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

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

(4)

(5)

(6)

Cile	udle K (Form 990) 2009		Pag	ge .
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	N
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		N
b	Gift, grant, or capital contribution to other organization(s)	1b		Ž
c	Gift, grant, or capital contribution from other organization(s)	1c		N
d	Loans or loan guarantees to or for other organization(s)	1d		Ž
e	Loans or loan guarantees by other organization(s)	1e		N
f	Sale of assets to other organization(s)	1f		N
g	Purchase of assets from other organization(s)	1g		N
h	Exchange of assets	1h		Ž
i	Lease of facilities, equipment, or other assets to other organization(s)	1 i		N
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		N
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		Ż
ı	Performance of services or membership or fundraising solicitations by other organization(s)	1 I		Ŋ
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		Ž
n	Sharing of paid employees	1n		N
o	Reimbursement paid to other organization for expenses	10		N
р	Reimbursement paid by other organization for expenses	1p		N
q	O ther transfer of cash or property to other organization(s)	1q		N
r	O ther transfer of cash or property from other organization(s)	1r		N
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			
	(a) Name of other organization (b) Transaction Ar type(a-r)		(c) : involve	ed
1) 2)				
• \				
3)				

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)** Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Additional Data

Software ID:

Software Version:

EIN: 84-0200555

Name: The Farmers Educational and Cooperative

Union of America

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
special allocations	246,599	246,599		
directors fees	158,069	158,069		
publications	63,040	63,040		
repairs and maintenance	53,283	53,283		
media	35,465	35,465		