

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990** 

Department of the Treasury
Internal Revenue Service

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

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

2009

OMB No 1545-0047

Open to Public Inspection

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

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010 D Employer identification number B Check if applicable Please NORTH DAKOTA BARLEY COUNCIL use IRS label or 45-0380578 Address change E Telephone number Doing Business As print or type. See Name change (701) 239-7200 pecific Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 505 40TH ST SW SUITE E No E **G** Gross receipts \$ 1,070,087 Instruc-Terminated tions. City or town, state or country, and ZIP + 4 FARGO, ND 58103 Amended return Application pending Name and address of principal officer **H(a)** Is this a group return for STEVEN EDWARDSON affiliates? 505 40TH ST SW SUITE E FARGO, ND 58103 H(b) Are all affiliates included? If "No," attach a list (see instructions) **✓** 501(c) (5) **◄** (insert no ) **✓** 4947(a)(1) or **✓** 527 Tax-exempt status Group exemption number 🕨 Website: ► ndbarlev net K Form of organization 
✓ Corporation 
✓ Trust 
✓ Association 
✓ Other ► L Year of formation 1983 M State of legal domicile ND Part I Summary Briefly describe the organization's mission or most significant activities TO GENERATE FUNDS EQUITABLELY FROM BARLEY PRODUCERS FOR THE ESTABLISHMENT OF MARKET DEVOLPMENT, PUBLIC RELATIONS, PROMOTION AND RESEARCH TO BENEFIT PRODUCERS Activities & Governance Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . Number of independent voting members of the governing body (Part VI, line 1b) . . . Total number of employees (Part V, line 2a) . . 5 Total number of volunteers (estimate if necessary) . 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. Net unrelated business taxable income from Form 990-T, line 34 **7**b 0 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 0 Program service revenue (Part VIII, line 2g) . 1,045,875 642,310 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 15,470 10 29,180 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,500 8,742 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 672,990 1,070,087 212,323 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 166,970 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-Expenses 194,259 173,260 Professional fundraising fees (Part IX, column (A), line 11e) . . 16a 0 ь Total fundraising expenses (Part IX, column (D), line 25)  $\blacktriangleright$ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . 455,801 353,836 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 817,030 739,419 Revenue less expenses Subtract line 18 from line 12 . -144,040 330,668 19 Net Assets or Fund Balances **Beginning of Current End of Year** Year 1,336,753 20 Total assets (Part X, line 16) . 1,032,919 21 Total liabilities (Part X, line 26) . 2,280 29,114 Net assets or fund balances Subtract line 21 from line 20 1,003,805 1,334,473 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sian \*\*\*\*\* 2010-11-12 Here Signature of officer STEVEN EDWARDSON EXECUTIVE ADMINISTRATOR Type or print name and title Date Check if Preparer's identifying number Preparer's WILLIAM F FERCHO 2010-11-12 (see instructions) Paid empolyed 🕨 🦵 Preparer's Firm's name (or yours ANDERSON & FERCHO PLLC EIN ▶ if self-employed), **Use Only** 

3209 FIECHTNER DR S BOX 9014

FARGO, ND 581069014

May the IRS discuss this return with the preparer shown above? (see instructions) . . .

address, and ZIP + 4

Phone no (701) 235-8095

Cat No 11282Y

#### Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

TO GENERATE FUNDS EQUITABLELY FROM BARLEY PRODUCERS FOR THE ESTABLISHMENT OF MARKET DEVELOPMENT, PUBLIC RELATIONS, PROMOTION AND RESEARCH TO BENEFITPRODUCERS

2	_	on undertake any significant p 0 or 990-EZ?	rogram services during the year whi	ch were not listed on	Yes 🔽 No
	If "Yes," describe	these new services on Schedu	ıle O		
3		on cease conducting, or make	significant changes in how it conductions.		Yes ▽ No
	If "Yes," describe	these changes on Schedule O			
4	Section 501(c)(3	and 501(c)(4) organizations	each of the organization's three larg and section 4947(a)(1) trusts are re venue, if any, for each program serv	equired to report the amount	
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	ESTABLISHMENT OF	MARKET DEVELOPMENT, PUBLIC REL	ATIONS, PROMOTION AND RESEARCH TO BE	NEFIT BARLEY PRODUCERS	,
4b	(Code	) (Expenses \$	ıncludıng grants of \$	) (Revenue \$	)
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d		ervices (Describe in Schedule			
	(Expenses \$	ıncludıng	g grants of \$	(Revenue \$	)
4e	Total program se	ervice expenses►\$			

Dort TV	Chacklist	of Required	Schodulos
2.11414	CHECKHSL	oi keauirea	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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νο
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		Νο
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	Yes	
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		No
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		No
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		No
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		No
	◆ 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 12A No			
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? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		No
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," complete Schedule F, Part II</i>	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		No
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> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," 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		No
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
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		_
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		No
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? <i>If "Yes," complete Schedule L, Part III </i>	27		Νo
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			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
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? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "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		Νο
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? <i>If</i> " <i>Yes,"</i> complete Schedule R, Part I	33		Νο
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		Νο
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		Νο
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "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?	38	Yes	

•	•
Part 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 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		V	
2a	gaming (gambling) winnings to prize winners?	1c	Yes	
_	return			
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	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
Ь	If "Yes," enter the name of the foreign country   See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
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		
ā	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		
7	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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	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		
3	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.	-		
	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		
LO	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			
l <b>1</b>	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 )			
12a	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			

505 40TH ST SW SUITE E FARGO, ND 58103 (701) 239-7200

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	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
ь	Enter the number of voting members that are independent 1b 5			
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		Νo
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		No
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		No
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	Yes	
b	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	
b	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		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal			
KE	evenue Code.)		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990	11		No
43-	December 1997 to 1997	42-	V	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	to conflicts?	12b	Yes	
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	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	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		
	List the States with which a copy of this Form 990 is required to be filed.			
17 18	List the States with which a copy of this Form 990 is required to be filed.  Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
10	(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 th	e orga	ınızatıor	n 🕨
	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											
<b>(A)</b> Name and Title	(B) A verage hours	<b>(C)</b> Position (check all that apply)						( <b>D</b> ) 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	
JAMES BROTEN CHAIRMAN	8 00	х		х				0	0	0	
DOYLE D LENTZ VICE CHAIRMAN	7 00	Х		Х				0	0	0	
GREORY A KESSEL DIRECTOR	5 00	х						0	0	0	
DOYLE D LENTZ DIRECTOR	6 00	х						О	0	0	
WAYNE NARUM DIRECTOR	5 00	х						О	0	0	
CHARLES OTTEM DIRECTOR	5 00	х						0	0	0	
MARK E SEASTRAND DIRECTOR	5 00	х						0	0	0	
STEVEN EDWARDSON EXECUTIVE ADMINISTRATOR	60 00			Х				97,500	0	20,522	
LOUIS ARNOLD FORMER CHAIRMAN	8 00						х	0	0	0	

For	n 990 (2009)			Page <b>8</b>
<b>1</b> b	Total	0		20,522
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶0			
			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		No
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	5		No
S	ection B. Independent Contractors			
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		( <b>C</b> Compe	
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 \( \mathbb{E} \) 0			
		F	orm <b>99</b>	<b>0</b> (2009)

Form 99			6 B					Page <b>9</b>
Part V	<u> </u>	Statement of	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
nts ots	1a	Federated cam	paigns 1a					
ar our	ь	Membership du	es <b>1b</b>					
કું ઉ am	С	Fundraising eve	ents 1c					
<u>a</u> ⊒	d		ations 1d					
ns, ami	е	Government grants						
Contributions, gifts, grants and other similar amounts	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above					
e iri	g		butions included in					
on ind	h			▶				
				Business Code				
Program Service Revenue	2a	BARLEY ASSESSME	NTS	Business code	1,045,875	1,045,875		
ev ea	b				, ,			
Fe F	С		_					
ē.	d							
S =	e							
ୁ ଅନ୍ତ	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a-2f		1,045,875			
	3	Investment inc	ome (including dividen	ds, interest				
			aramounts)		15,470			15,470
	4		tment of tax-exempt bond					
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross Rents	(i) iteal	(ii) i cissilai				
	ь	Less rental expenses						
	с	Rental income						
	d	or (loss) Net rental incoi	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of						
		assets other than inventory						
	Ь	Less cost or other basis and						
	c	sales expenses Gain or (loss)						
	d	Net gain or (los	s)					
	8a	Gross income f						
Other Revenue		events (not inc \$						
∌ ≿		of contributions See Part IV, lin	reported on line 1c)					
ά		See rait IV, iiii	a a					
the	ь		penses <b>b</b>					
Ö	С		(loss) from fundraising	events 📴				
	9a	Gross income f See Part IV, lin	rom gaming activities le 19					
			а					
	Ь		penses b					
	С 10а	Gross sales of	loss) from gaming acti	vities				
	100	returns and allo						
	Ь		oods sold <b>b</b>					
	С	Net income or (	loss) from sales of inve	Business Code				
	11a	RENT	2 IVEACUME	Dusiliess Code	6,000	6,000		
	ь	MISCELLANEC			2,742	2,742		
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		8,742			
	12	Total revenue.	See Instructions .	<b>*</b>				
	_			-	1,070,087	1,054,617	0	15,470

# Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B</b> ) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	212,323							
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	97,500							
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	33,933							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	12,183							
9	Other employee benefits	19,857							
10	Payroll taxes	9,787							
11	Fees for services (non-employees)								
а	Management								
b	Legal	714							
c	Accounting	1,145							
d	Lobbying								
е	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g	Other								
12	Advertising and promotion	1,516							
13	Office expenses	8,183							
14	Information technology	3,612							
15	Royalties								
16	Occupancy	35,912							
17	Travel	93,358							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	13,591							
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization								
23	Insurance								
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	DUES & MEMBERSHIPS	121,411							
Ь	STIPENDS	25,605							
С	A WARDS, REWARDS & PRIZE	23,053							
d	TELEPHONE	6,712							
е	POSTAGE & SHIPPING	4,933							
f	All other expenses	14,091							
25	Total functional expenses. Add lines 1 through 24f	739,419							
26	Joint costs. Check here ► ☐ If following SOP 98-2  Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Parit X Balance Sheet (A) (B) Beginning of year End of year 98.919 525.721 1 1 Cash—non-interest-bearing . . . . . . . . . . . . 825.000 2 626,000 2 Savings and temporary cash investments . . . . . . 3 3 4 109.000 4 185.032 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 . . . . . 8 Inventories for sale or use . . . . . . Prepaid expenses and deferred charges . . . . . . 9 Land, buildings, and equipment cost or other basis Complete Part 10a 10a VI of Schedule D 10b b Less accumulated depreciation . . . . 10c 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 1,032,919 16 1,336,753 29.114 17 2.280 17 Accounts payable and accrued expenses 18 18 19 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 21 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 . . . . 24 25 25 Other liabilities Complete Part X of Schedule D . . . . . 26 **Total liabilities.** Add lines 17 through 25 . . . . . 29,114 26 2,280 Organizations that follow SFAS 117, check here ▶ 
☐ and complete lines 27 Balances through 29, and lines 33 and 34. 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 0 30 0 Capital stock or trust principal, or current funds . . . Assets 0 0 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 31 1,003,805 32 32 1,334,473 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances . . . . 33 1,003,805 1,334,473 34 Total liabilities and net assets/fund balances . . . . . 1.032.919 1,336,753 34

			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		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b		Νo
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		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated 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?	3a		Νo
Ь	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)

#### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 45-0380578

Name: NORTH DAKOTA BARLEY COUNCIL

#### 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
DUES & MEMBERSHIPS	121,411			
STIPENDS	25,605			
A WA RDS, REWA RDS & PRIZE	23,053			
TELEPHONE	6,712			
POSTAGE & SHIPPING	4,933			

DLN: 93493319020160

#### OMB No 1545-0047

Open to Public Inspection

#### **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

**Political Campaign and Lobbying Activities** 

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

f the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (respection 501(c)(4), (5), or (6) organizations. Complete Part III  Name of the organization NORTH DAKOTA BARLEY COUNCIL  Provide a description of the organization is exempt under section 501(c) or is a section.  Provide a description of the organization's direct and indirect political campaign activities in Part IV  Political expenditures  Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  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?	ide 578	ntıfıc 8	ation numb	er
Part I-A Complete if the organization is exempt under section 501(c) or is a section  1 Provide a description of the organization's direct and indirect political campaign activities in Part IV  2 Political expenditures  3 Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955  2 Enter the amount of any excise tax incurred by organization managers under section 4955	578	8		
Part I-A Complete if the organization is exempt under section 501(c) or is a section  Provide a description of the organization's direct and indirect political campaign activities in Part IV  Political expenditures  Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  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			ganizatio	n.
Provide a description of the organization's direct and indirect political campaign activities in Part IV  Political expenditures  Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  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	52	<del>7 or</del> \$ _	ganizatio	n.
Part I-B Complete if the organization is exempt under section 501(c)(3).  Enter the amount of any excise tax incurred by organization managers under section 4955  Enter the amount of any excise tax incurred by organization managers under section 4955		\$_		
Volunteer hours  Part I-B Complete if the organization is exempt under section 501(c)(3).  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		\$_		
Part I-B Complete if the organization is exempt under section 501(c)(3).  1 Enter the amount of any excise tax incurred by the organization under section 4955  2 Enter the amount of any excise tax incurred by organization managers under section 4955				
<ul> <li>Enter the amount of any excise tax incurred by the organization under section 4955</li> <li>Enter the amount of any excise tax incurred by organization managers under section 4955</li> </ul>		_		
2 Enter the amount of any excise tax incurred by organization managers under section 4955				
	-	\$_		
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	-	\$_		
- 1. Int I game and a decide the start and telling the start and t			┌ Yes	┌ No
4a Was a correction made?			☐ Yes	┌ No
<b>b</b> If "Yes," describe in Part IV				
Part I-C Complete if the organization is exempt under section 501(c) except section	<u>50</u>	)1(c`	)(3).	
1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	-	\$_		
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? ┌ Yes 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

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

e Grassroots ceiling amount (150% of line 2d, column (e))

**f** Grassroots lobbying expenditures

Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under	section 501(c	)(3) and file	d Form 5768	(election	
	Check   If the filing organization belongs to a Check   If the filing organization checked box		d" provisions apply	,			
<u> </u>	Limits on Lobbying E  (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals	
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	ıbyıng)				
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)				
c	Total lobbying expenditures (add lines 1a and 18	b)					
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures (add lines 1						
f	f Lobbying nontaxable amount Enter the amount from the following table in both columns						
	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	e excess over \$500,00	0			
	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 lin	ne 1 f)					
h	Subtract line 1g from line 1a If zero or less, enter	er -0-					
i	i Subtract line 1f from line 1c If zero or less, enter -0-						
j	j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?						
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five	
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı	
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	( <b>d)</b> 2009	<b>(e)</b> Total	
2a	Lobbying non-taxable amount						
b	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
d	Grassroots non-taxable amount						

Sche	edule C (Form 990 or 990-EZ) 2009				age <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and have (election under section 501(h)).	s NOT f	iled Fo		8
		(:	i) (b)		
		Yes	No	A mou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	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?				
е	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 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				
С	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?				
Par	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c	)(5), oı	r sectio	n
_	W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		<u> </u>	1	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		_	2 Yes	<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	Νo
Par	Tt III-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 Paanswered "Yes".				n
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a	<u> </u>		
b	Carryover from last year	2b			
С	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			
Pa	art IV Supplemental Information				
	omplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5 so, complete this part for any additional information	, and Part	II-B, line	11	
		anation			

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493319020160

Schedule I (Form 990)

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

**Inspection** 

Employer identification number

ORTH DAKOTA BARLEY COU	JNCIL					45	-0380578	
Part I General Inform	nation on Grants	and Assistance				•		
Form 990, Part I'	to award the grants of ganization's procedure to the transfer Assistance to V, line 21 for any re	rassistance?	of grant funds in the United Transfer of Granizations in Immore than \$5,000.	Jnited States  the United States. Check this box if no	. Complete if the ord	ganızatıo	on answered re than \$5,0	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)		cription of assistance	(h) Purpose of grant or assistance
NORTH DAKOTA STATE UNIVERSITYPO BOX 5405 FARGO,ND 581055405	456002439	501 (c)(3)	202,323					GRANT PAYMENTS SUPPORT RESEARCH AND DEVELOPMENT WORK FOR DEVELOPING NEW BARLEY VARIETIES, IMPROVING CROP MANAGEMENT PRACTICES FOR BARLEY, AND ADVANCING THE UTILIZATION OF BARLEY IN LIVESTOCK FEEDING
NATIONAL BARLEY FOODS COUNCILW 905 RIVERSIDE SUITE 501 SPOKANE, WA 99201	911507684	501 (c)(6)	10,000				!	GRANT PAYMENTS SUPPORT RESEARCH, DEVELOPMENT, AND PROMOTION OF BARLEY ASAN INGREDIENT IN

1

HUMAN FOOD PRODUCTS

Schedule I	(Form 990) 2009	
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, I	Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	( <b>b)</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

Part IV	Supplemental Informa	tion. Complete this part t	o provide the information	required in Part I, line 2.	and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 GRANT FUNDS ARE MONITORED IN ACCORDANCE WITH GRANT CONTRACT PROVISIONS

OMB No. 1545 0047

**SCHEDULE 0** 

Department of the Treasury
Internal Revenue Service

(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

Name of the organization
NORTH DAKOTA BARLEY COUNCIL

45-0380578

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		BARLEY GROWERS IN EACH COUNTY IN NORTH DAKOTA ELECT A REPRESENTATIVE FOR THE COUNTY THE COUNTY REPRESENTATIVES IN EACH DISTRICT MEET TO ELECT A REPRESENTATIVE TO SERVE ON THE BARLEY COUNCIL BOARD OF DIRECTORS ELECTIONS ARE HELD EVERY 4 YEARS
Form 990, Part VI, Section B, line 11		FORM 990 IS REVIEWED BY THE EXECUTIVE ADMINSTRATOR PRIOR TO FILING A COPY OF FORM 990 IS RETAINED AT THE ORGANIZATION'S OFFICE FOR REVIEW BY THE BOARD OF DIRECTORS AT THEIR REQUEST
Form 990, Part VI, Section B, line 12c		THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY OR AS NEEDED IF A POTENTIAL CONFLICT OF INTEREST IS IN QUESTION
Form 990, Part VI, Section B, line 15		THE BOARD OF DIRECTORS REVIEWS COMPENSATION OF OTHER COMMODITY BOARD EXECUTIVES, AND REVIEWS COMPENSATON GUIDELINES OUTLINED BY THE STATE OF NORTH DAKOTA TO ASSIST IN DETERMINING COMPENSATION OF THE EXECUTIVE ADMINISTRATOR THE COMPENSATION IS THEN VOTED UPON BY THE BOARD OF DIRECTORS AND RECORDED IN THE MINUTES
Form 990, Part VI, Section C, line 19		THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST AT ITS OFFICES