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**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)

OMB No 1545-0047

Open to Public Inspection

X Yes

**∕**∩Form **990** (200€

No

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For the 2009 calendar year, or tax year beginning 10/1/2009 and ending 9/30/2010 Please D Employer identification number Check if applicable C Name of organization American Society of Farm Managers & use IRS Doing Business As Address change Rural Appraisers, Inc. Rural Apprais 36-2443304 label or print or Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number type. Initial return 508 303-758-3513 950 S. Cherry St. Specific Terminated City or town, state or country, and ZIP + 4 Instruc-Denver CO 80246 G Gross receipts \$ 1.850.239 Amended return tions Application pending Name and address of principal officer. Yes X H(a) Is this a group return for affiliates? Brian Stockman 950 S. Cherry St., #508, Denver, CO 80246 H(b) Are all affiliates included? If "No," attach a list (see instructions) Tax-exempt status. X 501(c) ( 4947(a)(1) or 527 6 ) **◄** (insert no ) Website: www.asfmra.org H(c) Group exemption number K Form of organization X Corporation Trust Association Other > L Year of formation M State of legal domicile 1971 CO Part I Summary Briefly describe the organization's mission or most significant activities: To promote, without profit to the Society, the professions of rural appraisal, real property review appraisal and farm management by holding meetings for the exchange of ideas, conducting Activities & Governance schools and other devices for disseminating information, as well as administering an accrediting program for the recognition of the professional advancement of individual members and building and maintaining a code of business and professional ethics. 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) . . . . . . . . . . . . . . . . . 12 Number of independent voting members of the governing body (Part VI, line 1b) . . . . 12 5 10 6 Total number of volunteers (estimate if necessary). 150 Total gross unrelated business revenue from Part VIII, column (C), line 12. . . 7a 8,172 Net unrelated business taxable income from Form 990-T, line 34. -2,797 **Current Year** Contributions and grafits (Part VIII, line 1h). . . . . Program service revenue (Part VIII, line 2g) . . . . 8 O 9 1.881.535 1.788.906 Investment in the Part VIII, column (A) lines 3, 4, and 7d) . . . . . . . . . . . Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . 23,676 10 38,211 11 26,454 23,122 1.931.665 12 1,850,239 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . . . . . 13 0 Benefits paid to or formembers (Part IX, column (A), line 4) . . . . . 14 0 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 796,523 15 680.022 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ 0 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . . 17 1,065,558 929,992 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . 18 1,745,580 1,726,515 123,724 Revenue less expenses. Subtract line 18 from line 12. 186,085 **Beginning of Current Year** End of Year HWW Assets Balanc 20 1,014,606 Total assets (Part X, line 16) . . . . 1,371,982 21 Total liabilities (Part X, line 26) . . . . . . . . . . . 540,411 774,063 Net assets or fund balances. Subtract line 21 from line 20 22 474,195 597,919 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Here Type or print name and title Check if Preparer's identifying number Preparer's signature self-(see instructions) Paid employed 2/1/2011 P00544291 Preparer's Firm's name (or yours Hull & Associates, P.C. EIN ▶ 84-1215980 **Use Only** if self-employed), 780 Simms St., Ste. 200, Golden, CO 80401 Phone no ▶ (303) 202-2702 address, and ZIP + 4

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

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

	Statement of Program Service Accomplishments
1	Briefly describe the organization's mission:
,	ASFMRA members protect and serve the rural property owner with trustworthy valuation, management, consulting and
	marketing services.
2	Did the organization undertake any significant program services during the year which were not listed on
2	
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported.
	anocations to differs, the total expenses, and revenue, if any, for each program dervice reported.
	<del></del>
4a	(Code: ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0)
	Services provided by the Society inlude accreditation, educational instruction in all facets of farm management and
	rural appraising and dissemination of pertinent information materials.
	ruiai appraising and dissernination of perinent information materials.
4h	(Code: ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0)
-710	
40	/Code: \/Expenses C
40	(Code: 0 ) (Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0)
74	Other program services. (Describe in Schedule O.)
→u	
	(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ 0)
	Total program service expenses > 0

American Society of Farm Managers & 36-2443304 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 2 Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, 4 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice 5 Х 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," 6 Did the organization receive or hold a conservation easement, including easements to preserve open space. 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 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," 9 Did the organization, directly or through a related organization, hold assets in term, permanent, or 10 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, 11 • Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. Did the organization report an amount for other assets 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. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI, XII, and XIII. 12A Was the organization included in consolidated, independent audited financial statements for the tax Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E....... 13 14a 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 17 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

20

Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21 '	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	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	Ì		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			i
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		- "	` <u>'</u>
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
24	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
20	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II			.,
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I			.,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	33		X
34	III, IV, and V, line 1		,	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	34	X	
33	Schedule R, Part V, line 2	2-		· V
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	35		X
30	organization? If "Yes," complete Schedule R, Part V, line 2	26		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36	$\longrightarrow$	
<i>51</i>	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part		ŀ	
	VI	37		v
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	3/		_X_
SO	19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	,,	Ψ.	
	10. Note. All Form 330 mers are required to complete officuals O	38	X	

	·		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		İ	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	X	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		:	
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 10	, ","" 	· .	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	٠.		1
	instructions)	3.	2 1-	-
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by		ļ. <u>.</u>	<u> </u>
	this return?	3a	X	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Х	
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		İ	ļ
	account)?	4a		X
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	1		,
	and Financial Accounts.	7		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
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	l	
6a	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	x	ŀ
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	Х	
7	Organizations that may receive deductible contributions under section 170(c).	- 4 -	,	
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		
þ	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		
đ	If "Yes," indicate the number of Forms 8282 filed during the year		£.7	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	4		
	benefit contract?	7e		X
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		j
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	٠		
	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		
9	Sponsoring organizations maintaining donor advised funds.			. ``
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	- [£.,		, ·
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:		बहुर भू	
а	Gross income from members or shareholders	ا قواره - ا قواره -	, · · ·	
b	Gross income from other sources (Do not net amounts due or paid to other sources			. '
	against amounts due or received from them.)	3.3		<u>.</u> ش
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		1
	If "Yes." enter the amount of tax-exempt interest received or accrued during the year 12b			

Part VI

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

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body		الله الله الله الله الله الله الله الله	1
b	Enter the number of voting members that are independent		2	3
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	- The	Andrew .	
	any other officer, director, trustee, or key employee?	2_		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5_		Х
6	Does the organization have members or stockholders?	_ 6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	, ×,	1.47 1.61	٠.
	the year by the following:	33		
а	The governing body?	8a	_X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9a		X
	ion B. Policies (This Section B requests information about policies not required by the Internal			
Reve	enue Code.)			,
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	X	
ь	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	X	ļ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990		ب المُها من م د	
12a	· · · ·	12a	Х	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	_X	
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	X	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by	33		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		-111	نخته
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		133	م د و و د و و
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	-	نعقت	1
	with a taxable entity during the year?	16a		_X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	***	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	Alterial State of	*1, 13}	<u>a</u>
	the organization's exempt status with respect to such arrangements?	16b		L
	ion 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s of the control of the contro	nly)		
	available for public inspection. Indicate how you make these available. Check all that apply.			
	Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interesting the second sec	est		
	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne		
	organization: ► Amer Soc of Farm Mgrs & Rural Appraisers 303-758-351	3		
	950 S. Cherry St., #508, Denver, CO 80246			

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compe	(B)	T			C)			(D)	(E)	(F)
Name and Title	Average	Positi	on (c	•	•	that ap	olv)	Reportable	Reportable	
Name and Tide	hours per week	Individual trustee or director			Key employee		Former	reportable compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Jerry Warner Immediate Past Pres.	1.	Х		х				0	0	
Richard Edmunds President	1	X		x				24,000	0	(
Kirk Weih President Elect	1	х		x				0	0	(
Jeffrey Berg First Vice-President	1.	х		X				0	0	(
Gary Schnitkey Academic Vice-Pres.	1.	х		X				0	0,	
Janet Capelle District 1 Vice-Pres.	1.	Х		x				0	0	(
George Baird District 2 Vice-Pres.	1.	Х		x				0	0	(
Kım Heisler District 3 Vıce-Pres.	1.	x		x				0	0	
Howard Audsley District 4 Vice-Pres.	1.	X		x				0	0	
Barbara Lechtenberg District 5 Vice-Pres.	1.	Х		х				0	0	
Michael Krause District 6 Vice-Pres.	1.	X		X				0	0	
Michael Gibbons District 7 Vice-Pres.	1.	х		Х		 		0	0	
Brian Stockman Exec. Vice Pres.	40.				Х	Х		138,424	0	(
	-									

	990 (2009)	American Society of Farm Manage									36-2443	
Par	t VII	Section A. Officers, Directors, Tru	ıstees, Key En	nploy	ees	, and	Hiç	ghest	Co	mpensated Em	ployees (contin	nued)
	•	(A)	(B)			-	C)			(D)	(E)	(F)
	•	Name and title	Average hours per week	or director		Officer	Key employee	Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
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1b 2		umber of individuals (including but no ole compensation from the organization from the organization)		se list	ted a	abov		ho re	. ► eceiv	162,424 ed more than \$1		Yes No
3		organization list any <b>former</b> officer, ee on line 1a? <i>If "Yes," complete Sci</i>										3 X
4	the orga	individual listed on line 1a, is the su anization and related organizations of al	reater than \$1	50,00	0? //	f "Ye	s," c	comp	lete :	Schedule J for s		4 ×
5		person listed on line 1a receive or a rendered to the organization? If "Yo										5 X
Sec	tion B. I	ndependent Contractors										
1		te this table for your five highest consation from the organization.	npensated inde	epend	ent e	contr	acto	ors th	at re	ceived more tha	n \$100,000 of	
		(A) Name and business a	ddress							(B) Description of serv	vices Co	(C) empensation
									_			
			<del></del>						<del> </del>			(
												(
												(
2		umber of independent contractors (in an \$100,000 in compensation from t			ed to	thos	se lis	sted a 0		e) who received		

	390 (200	,	<del></del>		<del> </del>	36-2443	304 Page <b>9</b>	
Par	t VIII	Statement 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
ats	1a	Federated campaigns	1a	0		*		
퍨	Ь	Membership dues	1b	0	. '		• ~	,
g,ë	l c	<b></b>	1c	0	-	-		,
a ii	l d		1d	0	- '	-	7.	
9.8	e		1e					- ;
Si Si	,	All other contributions, gifts, grants, and	<del>-'e </del> -	<u>_</u>	•			ì
ž ž	'					,	,	- 1
문동		<del>-</del>	1f	0	•			. !
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines 1a-1f: \$		0				* ;
	<u> </u>	Total. Add lines 1a-1f		· · · •	0			
횔	_		-	Business Code			·	
Ş.	2a	EDUCATION		11600	438,832	438,832		
æ	b	MEETINGS	6	11600	263,697	263,697		
25	C	PUBLICATIONS	5	11190	18,146	18,146		
Şer	d	ACCREDITATIONS	6	11600	6,765	6,765		
Ē	е	MEMBERSHIP DUES	10	11600	1,061,466	1,054,789	6,677	
Program Service Revenue	f	All other program service revenue			0			
Ğ	g	Total. Add lines 2a-2f			1,788,906	-		
	3	Investment income (including dividends, interest,			, , , , , , , , , , , , , , , , , , , ,			11
	*	other similar amounts)	38,211			00.011		
	4	Income from investment of tax-exempt bond proc			38,211			38,211
	5							<del></del>
÷	3	Royalties	<del></del>					
	6-	Gross Rents		(II) Personal	·			
	6a							1
	b	Less: rental expenses	<u></u>  -			٠ .	5 a	į
	C	Rental income or (loss)	0	0		<del></del>		
	d	Net rental income or (loss)			0			
	7a			(II) Other	,		, ,	
	l	assets other than inventory	0	0	· · · '> ~ '			•
	b	Less: cost or other basis	1			4 ( )	A,	
		and sales expenses	0	0		÷ , ,	•	
	C	Gain or (loss)	0	0			4	1
	d	Net gain or (loss)		<b>.</b>	o			
-	8a	Gross income from fundraising				2 42		
Ĕ		events (not including \$ 0	- 1				4.	
ě		of contributions reported on line 1c).		ŀ	· • • • • • • • • • • • • • • • • • • •			
È		0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	а	o			·	
7	Ь		Б			-		
Other Revenue		Net income or (loss) from fundraising events				<del></del>		<u> </u>
0	92	Gross income from gaming activities.	Ė	· · · · ·	<del>-</del>	n 5		
	30	See Part IV, line 19		ا				
	_		Ь					i i
	b	•						
	C	Net income or (loss) from gaming activities	· .⊢.		0			
	Tua	Gross sales of inventory, less						·
		returns and allowances	_	0	` • /		, -	[
	b	•	ь	0		*		
		Net income or (loss) from sales of inventory			0			
	L	Miscellaneous Revenue	-	Business Code				
-	11a	MANAGEMENT FEE	54	41900	20,000	20,000		-
	b	MISCELLANEOUS	90	00099	3,122	1,627	1,495	
	С				0			
	d	All other revenue			0		<del></del>	
	e	<b>Total.</b> Add lines 11a-11d			23,122			-
	12	Total revenue. See instructions		_	1,850,239	1,803,856	8,172	38 211
			<u> </u>	<u> </u>	1,000,200	1,000,000	0,172	38,211

Part IX Statement of Functional Expenses

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

	All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	0								
3	Grants and other assistance to governments, organizations, and individuals outside the									
	U.S. See Part IV, lines 15 and 16	0		48.3						
4	Benefits paid to or for members	0			,					
5	Compensation of current officers, directors,									
	trustees, and key employees	140,568	140,568	0	0					
6	Compensation not included above, to disqualified	,								
	persons (as defined under section 4958(f)(1)) and									
_	persons described in section 4958(c)(3)(B)	0								
7	Other salaries and wages	435,056	298,750	136,306	0					
8	Pension plan contributions (include section 401(k)				_					
_	and section 403(b) employer contributions)	47,241	35,903	11,338						
9	Other employee benefits	132,959								
10	Payroll taxes	40,699	30,931	9,768	0					
11	Fees for services (non-employees)	. <u>.</u> .	_							
а	Management	1,800	0	1,800						
b	Legal	9,635	7,227	2,408						
С	Accounting	8,150	6,113		0					
d	Lobbying	61,705	61,705	0	0					
е	Professional fundraising services. See Part IV, line 17	0								
f	Investment management fees	0		<del></del>						
g	Other	1,421	1,066	355	0					
12	Advertising and promotion	0								
13	Office expenses	36,086			0					
14	Information technology	36,308	36,308	0	0					
15	Royalties	0								
16	Occupancy	51,387	38,540	12,847	0					
17	Travel	0								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0		-						
19	Conferences, conventions, and meetings	0			i ————————————————————————————————————					
20	Interest	0								
21	Payments to affiliates	60,000	60,000	0	0					
22	Depreciation, depletion, and amortization	33,696	25,234	8,462	0					
23	Insurance	5,153	3,866	1,287	0					
24	Other expenses. Itemize expenses not		· · · · · · · · · · · · · · · · · · ·	· .						
	covered above. (Expenses grouped together			الصب	• - · ·					
	and labeled miscellaneous may not exceed			, , , ,	- ' '					
	5% of total expenses shown on line 25 below.)		-							
а	Education & Continuing education certification	281,640	281,640	0	0					
b	Member meetings & educational events	159,377	159,377	0	0					
C	Membership & chapter services	43,127	43,127	0	0					
d	Governance expenses	99,738								
е	Communications	10,260			0					
f	All other expenses	30,509	22,883	7,626						
25	Total functional expenses. Add lines 1 through 24f	1,726,515	1,491,350	235,165	0					
26	Joint costs. Check here ▶ if following		ļ							
	SOP 98-2. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising	]								
	solicitation	İ								
					Form <b>990</b> (2009)					

**Balance Sheet** Part X (A) (B) Beginning of year End of year 100 1 1 100 2 Savings and temporary cash investments . . . . 404.161 2 560,384 3 3 4 49.780 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 0 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 0 0 7 0 4,605 8 8 5,676 9 Prepaid expenses and deferred charges . . . 66.548 69.500 10a Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10b **b** Less: accumulated depreciation . . . . 80,238 10c 62,886 404.980 11 11 616,959 Investments—other securities. See Part IV, line 11. . . . 12 12 Investments—program-related. See Part IV, line 11. . . . . . . . . 13 0 13 0 14 0 14 0 4,194 15 15 4,194 1.014.606 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . . 16 1,371,982 Accounts payable and accrued expenses . . . . . . . . . . . . . . . 17 73,029 17 152,724 18 18 467.382 19 19 621,339 20 20 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 persons. Complete Part II of Schedule L. . . . . . . . . . . . . . . 22 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0 24 Unsecured notes and loans payable to unrelated third parties . . . . 0 24 0 25 ol 25 26 Total liabilities. Add lines 17 through 25 . . . . . 540.411 26 774.063 Organizations that follow SFAS 117, check here ▶ X and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 474,195 27 28 28 29 29 Organizations that do not follow SFAS 117, check here▶ and complete lines 30 through 34. 30 Paid-in or capital surplus, or land, building, or equipment fund . . . . 31 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 474,195 597.919 33 33 1,371,982 34 1.014.606

		E-1-1000-7		age 12
Par	XI Financial Statements and Reporting			
	Accounting mathed and the second the form 200.	estair	Yes	No
ı	Accounting method used to prepare the Form 990:		1.	TEST.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		15.	K.J. 25
	Schedule O.	See A SEE	200	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in	Service .	7 BAS	3 14.
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:	1	14	7
	X Separate basis Consolidated basis Both consolidated and separate basis	- C. 122-434	Michigan.	700
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			Į
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	25		

Form **990** (2009)

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

### **Political Campaign and Lobbying Activities**

OMB No 1545-0047

**Open to Public** Inspection

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.

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

- Section 501(c)(3) organizations: 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

	ime of organization	ganizations: Complete Part III.		Fmnlova	r identification number
	rican Society of Farm Man	nanere &		Linpioye	36-2443304
		he organization is exempt und	er section 501	c) or is a section 527	
1		the organization's direct and indirect			or garrization.
2	•				
3	•			·	
Pa	rt I-B Complete if t	he organization is exempt und	er section 501	(c)(3).	
1	Enter the amount of any	excise tax incurred by the organizat	ion under section	4955 ► \$	<del></del> ·
2	Enter the amount of any	excise tax incurred by organization	managers under	section 4955	
3		ed a section 4955 tax, did it file Forn			
3 4a	•		•		
→a b	If "Yes," describe in Part				res No
		he organization is exempt und	er section 501	(c), except section 501	(c)(3).
1		y expended by the filing organization			· · · · · · · · · · · · · · · · · · ·
2	Enter the amount of the	filing organization's funds contribute	d to other organiz		
		unction activities			
3	Total exempt function ex	penditures. Add lines 1 and 2. Enter	here and on For	m 1120-POL,	
4	Did the filing organization	n file Form 1120-POL for this year?			Yes No
5		ses and employer identification num			
		or each organization listed, enter the			
		butions received that were promptly			
	a separate segregated fu	und or a political action committee (F	PAC). If additiona	space is needed, provide	information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly
				idide ii fioric, chici -o-	delivered to a separate
					political organization If
					none, enter -0-
				0	
				0	
				0	
				o	
_					
				0	
					-
				0	
				1 01	

Sch	edule C (Form 990 or 990-EZ) 2009					Page 2
Ρ	art II-A Complete if the organiz under section 501(h)).	ation is exem	pt under sect	on 501(c)(3) and	filed Form 5768 (	election
	Check ► if the filing organization	n bolonge to a	n affiliated grou	ın.		
A	Check ► if the filing organization	•	_	•	no onnh	
	Check F in the liting organization	II CHECKED DO	and innited	Control provisio	пь арріу.	<u> </u>
	Limits on Lo (The term "expenditures"	obbying Expen means amour		red.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	ce public opinio	n (grass roots lo	obying)		0
b	Total lobbying expenditures to influence	ce a legislative l	oody (direct lobb	yıng)		0
C	Total lobbying expenditures (add lines	1a and 1b)			0	0
d	Other exempt purpose expenditures .					0
е	Total exempt purpose expenditures (a				0	0
f	Lobbying nontaxable amount. Enter the	e amount from	the following tab	le in both		
r	columns.	<del></del>		<del></del>	0	0
	If the amount on line 1e, column (a) or (b) is:	·	g nontaxable amo	ount is:		
ŀ	Not over \$500,000  Over \$500,000 but not over \$1,000,000		mount on line 1e.		41	
-	Over \$1,000,000 but not over \$1,000,000		s 15% of the exce	ss over \$500,000 ss over \$1,000,000.		a)
ŀ	Over \$1,500,000 but not over \$17,000,000		s 5% of the excess		1	25
Ì	Over \$17,000,000	\$1,000,000.			11	· -
<u>_</u>	Grassroots nontaxable amount (enter	25% of line 1f)			. 0	0
h	Subtract line 1g from line 1a. If zero o	·				
i	Subtract line 1f from line 1c. If zero or	less, enter -0			0	0
j	If there is an amount other than zero of					
	section 4911 tax for this year?					Yes No
	(Some organizations that columns belo	made a section was seen a section with the seet the ins	on 501(h) election tructions for lin	es 2a through 2f	on page 4.)	ve
_	Lobb	ying Expenditu	res During 4-Ye	ear Averaging Per	iod	<del></del>
	Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying nontaxable amount	0		0	0	0
	Lobbying ceiling amount (150% of line 2a, column(e))	1 - , , ,				0
_c	Total lobbying expenditures	0		0	0	0
d	Grassroots nontaxable amount	0	· · · · · · · · · · · · · · · · · · ·	0	0	0
е —	Grassroots ceiling amount (150% of line 2d, column (e))		* • •			0
f	Grassroots lobbying expenditures	0		0		0

Schedule C (Form 990 or 990-EZ) 2009

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NC (election under section 501(h)).	OT file	ed Fo	rm 5768	
	(election dider Section 30 I(III)).	(;	a)	(b	)
		Yes	No	Amo	unt
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:				
a b	Volunteers?	_			
c	Media advertisements?				
d	Mailings to members, legislators, or the public?		ļ		<del></del>
e f	Grants to other organizations for lobbying purposes?		-		<del></del>
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h		<u> </u>			
 	Other activities? If "Yes," describe in Part IV		震步		0
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Saile	1744	
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			n in the things 1	5 '0 £ . ~1
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? till-A Complete if the organization is exempt under section 501(c)(4), section 50	1(0)(	5\ or	Section .	A
rai	501(c)(6).	1(0)(	J), UI	Section	
			-	Ye	es No
1 2	Were substantially all (90% or more) dues received nondeductible by members?				X
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?				T X
Par	Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A "Yes."				d
1	Dues, assessments and similar amounts from members		1	1,	061,466
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year		2a		61,705
b	Carryover from last year	•	2b	·	0
S C	Total		2c 3		61,705 96,593
3 4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible	<b>3</b> .			90,595
	lobbying and political expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		-34,888
	Supplemental Information  plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line complete this part for any additional information.			r	

	American Society of Farm dule C (Form 990 or 990-EZ) 2009	Managers &		36-2	2443304	
				 		Page 4
Pal	t IV Supplemental In	formation (continued	<u>d)</u>	 	<del></del>	
•						
- <b></b> -						
·				 		
·				 		
<b></b> .				 		
		•••••		 		
				 •••••		
				 ••••••		
				 -		
<b></b> .				 		

#### **SCHEDULE D** (Form 990)

**Supplemental Financial Statements** 

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

Inspection Employer identification number

	ican Society of Farm Managers &		36-2443304
Part		or Advised Funds or Other Similar F	unds or Accounts. Complete if
	the organization answered "Yes" to	Form 990, Part IV, line 6.	
	<del></del>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		<del></del>
4	Aggregate value at end of year	<u> </u>	
5	Did the organization inform all donors and d	•	
	funds are the organization's property, subject		
6	Did the organization inform all grantees, dor	<u> </u>	
	used only for charitable purposes and not for		
	purpose conferring impermissible private be	nefit?	Yes No
Parl	Conservation Easements. Comp	lete if the organization answered "Yes	s" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (check all that apply).	
	Preservation of land for public use (e.g.		n of an historically important land area
	Protection of natural habitat		n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organiza	ation held a qualified conservation contribu	ution in the form of a conservation
-	easement on the last day of the tax year.	and their a qualified obligativation bottimet	adon in the form of a conservation
	The same same and the same years		Held at the End of the Tax Year
а	Total number of conservation easements.		
b	Total acreage restricted by conservation eas		
С	Number of conservation easements on a ce		
d	Number of conservation easements include	• •	
3	Number of conservation easements modifie		_ <del></del>
_	during the tax year	, , , , , , , , , , , , , , , , , , , ,	
4	Number of states where property subject to	conservation easement is located	
5	Does the organization have a written policy	•	ion, handling of
	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monito		
	<b>&gt;</b>		g ,
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	asements during the year
	▶ \$	-	<b>,</b>
8	Does each conservation easement reported	on line 2(d) above satisfy the requiremen	its of section
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	· · · · · · · · · · · · · · · · · · ·	<del></del> <del></del>
9	In Part XIV, describe how the organization re		——————————————————————————————————————
	balance sheet, and include, if applicable, the	e text of the footnote to the organization's	financial statements that describes
	the organization's accounting for conservation	on easements.	
Pari		ons of Art, Historical Treasures, or Othe	er Similar Assets.
	Complete if the organization answere	d "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted und		
	art, historical treasures, or other similar asse		
	service, provide, in Part XIV, the text of the f		
b	If the organization elected, as permitted und		
	historical treasures, or other similar assets h		earcn in turtherance of public
	service, provide the following amounts relati		-
	(i) Revenues included in Form 990, Part VII	i, line 1	
_	(ii) Assets included in Form 990, Part X.		
2	If the organization received or held works of		ssets for financial gain, provide the
	following amounts required to be reported up		
a	Revenues included in Form 990, Part VIII, lin	ne 1	· · · · · • • • • • • • • • • • • • • •
b	Assets included in Form 990, Part X		▶ \$

Par		<u>Organizations Maintainin</u>	g Collections of	Art, His	storical 1	reasures,	or Oth	ner Similar Ass	<u>ets (c</u>	<u>ontinu</u>	ıed)
3	_	the organization's acquisition its collection items (check all		ther reco	٦.	-		-	nıfıcan	t	
а		Public exhibition		d [_	Loan	or exchange	progra	ams			
b		Scholarly research		e [	Other						
c		Preservation for future genera	ations		_						
4	Provide Part XI	e a description of the organiz V.	ation's collections	and exp	laın how t	hey further t	he org	anızation's exem	ot purp	ose in	
5	•	the year, did the organization to be sold to raise funds rath			-					es 🗔	No
Pari		Escrow and Custodial Ar							rm 990	), Par	
		V, line 9, or reported an ar	mount on Form 9	90, Par	t X, line	21					
1a	include	organization an agent, trustee ed on Form 990, Part X?							□ Y	es 🔲	No
ь	If "Yes	," explain the arrangement in	Part XIV and com	plete the	following	g table:	Γ-	T			
_	Danier	ing belongs					1-1-		nount		
C	-	ing balance						<del></del>			0
d		ns during the year utions during the year					. 1d				
e f		balance					. 1f				0
_	_								<del></del>		<u>-</u> _
2a		organization include an amo		Part X,	ine 21?.				Y₀	es X	No
Part		," explain the arrangement in Endowment Funds. Com		zotion	anawara.	d "Voo" to E	Form (	OO Port IV line	10		
Part	V	Endowment Funds. Com				T					
4	Danis	ing of your balance	(a) Current year 0		or year	(c) Two years		(d) Three years back	(e) Fo	our years	
1a	_	ning of year balance	0			days of the			4	36 ·	
b		outions			-	The state of the s	- 1995 - 1995		- 19	4 * .	-
С		estment earnings, gains,									2.7
		sses				Same of the fact of the first	- 1 march	· · · · · · · · · · · · · · · · · · ·	1 2 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1 4 1	25 \$ 25 a.s.	- 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
d		or scholarships				or heart many	er and desired	The same	35 Et , 1	-4 Flore - 7	21
е		expenditures for facilities					1. 46 3 6 4 4 5 4 4	倒出手指一		司 🏂	
	-	ograms strative expenses				THE COMPANY TO		अधिकाराव्यक्त । (३६) द्रोक्षण स्थापित है हो अ	- LP		
١		year balance	0			THE SEL			- 1 - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		- = 2 1
g 2		e the estimated percentage o		anco hol	· · · · · · · · · · · · · · · · · · ·	1 1 32 13	42 I	· · · · · · · · · · · · · · · · · · ·	1 3 %		<u> </u>
٠,		designated or quasi-endowm	-	%							
b		nent endowment	%		2						
c		endowment •									
3a		ere endowment funds not in the		he organ	uzation th	at are held :	and ad	ministered for the	,		
- Ou		zation by:	ю россионон он с	o organ	Lauon ui	at are note t	and do		ĺ	Yes	No
	_	inrelated organizations							3a(i)		
	• •	elated organizations							3a(ii)		
b	. ,	to 3a(ii), are the related organization							3b		
4		oe in Part XIV the intended us									
Part	VI	nvestments—Land, Buil	dings, and Equ	pment.	See For	rm 990. Pa	rt X. lir	ne 10.			
		Description of investment	(a) Cost or oti	ner basis	(b) Cos	st or other		Accumulated	(d) Bo	ook value	
			(investm	ent)	basis	s (other)		preciation			
1a				0	<del></del>	0-	المش لحدث ومريدها	Mary Taylor St.			0
b		gs		0	<del></del>	0		0			0
С		old improvements		0	<del></del>	0		0			0
d		nent		<u> </u>		129,177		82,635		62	2,886
<u>e</u>	Other.	<u> </u>		0		0		0			0
Total	. Add lir	nes 1a through 1e (Column (	d) must equal Fori	m 990, F	Part X, col	lumn (B), line	9 10(c)	.) ▶		62	2,886

Part VII Investments—Other Securities	s. See Form 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives	0		
Closely-held equity interests	0		
Other	0		_
	0		
	0		
	0		
	0	<del>                                     </del>	<del></del>
	0		
	0		
	0	<del></del>	<del></del>
	0	· · · · · · · · · · · · · · · · · · ·	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	0		<del> </del>
Part VIII Investments—Program Relate	d. See Form 990, Part X	, line 13.	_
(a) Description of investment type	(b) Book value	(c) Method of valu	ation
(-/ p	\ ','	Cost or end-of-year ma	arket value
	0		
	0		
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	0		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	0		
Part IX Other Assets. See Form 990, F		<u> </u>	
	a) Description		(b) Book value
			0
			0
			0
			0
			0
	<del></del>		0
			0
		<del></del>	0
		·	0
Total. (Column (b) must equal Form 990, Part X,	ool (P) Ino 15 )		0
Part X Other Liabilities. See Form 990			0
1. (a) Description of liability	(b) Amount		
Federal income taxes	(2) / 1/104/1	<u> </u>	رير ساء عاسس جائد
Todatal moomo taxoo	-		, , , , , , , , , , , , , , , , , , , ,
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		O CONTRACTOR OF THE PROPERTY O	
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Total (Column (b) must equal Form 990, Part X, col (B) line 25 )		0	· ·

	American Society of Farm Managers &	36-2443304	
Schedule D (Form	990) 2009		Page 5
Part XIV	Supplemental Information (continued)		
•			<u> </u>
- <b> </b>			
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36-2443304

#### SCHEDULE O (Form 990)

#### Supplemental Information to Form 990

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

OMB No 1545-0047 **Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990.

36-2443304 American Society of Farm Managers & Form 990 Part VI Section B Line 11a The 990 is prepared by an outside CPA and reviewed by the Director of Finance and Administration. The Executive Vice President performs another review and Form 990 Part VI Section B Line 12c The Executive Council of the Society handles minor conflicts of interest. Major conflicts are communicated with the membership. Form 990 Part VI Section B Line 15 The only key employee of the Society is the Executive Vice President. His salary is reviewed and approved by an Executive Committee of the Executive Council and relies on comparable non-profit organization compensation data according to size and location. Form 990 Part VI Section C Line 19 Information on the Society's policies and procedures, staff policies, Articles of Incorporation, Bylaws, Annual report, membership, education, accreditation, financial information and Form 990 are available for viewing at the Society's Denver office. Some of this information is additionally availale on websites independent of the Society.

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. ▶ See separate instructions.

Open to Public OMB No 1545-0047

Department of the Treasury Internal Revenue Service	See separate instructions.	structions.			Open to Public Inspection
Name of the organization American Society of Farm Managers &				Employer Identification number	ion number
Part I Identification of Disregarded Entitles (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)	nization answered "Ye	s" 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
			0		0
			0		0
			0		0
			0	0	
			0		0
			0		0
Part II Identification of Related Tax-Exempt Organizations (Complete if the had one or more related tax-exempt organizations during the tax year.)	izations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it on during the tax year.)	on answered "Ye	s" to Form 990, F	art IV, line 34 be	scause it
(a) Name, address, and EiN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
Education Foundation of ASFMRA 74-2336560 950 S. Cherry St. #508, Denver, CO 80246	Education	co	501(c)(3)	Type I supporting N/A	N/A
		-			

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (HTA)

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American Society of Farm Managers &

Schedule R (Form 990) 2009 American Soci

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34

% % % % % % ŝ managing partner? General or Percentage ownership Ξ Yes Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part Code V—UBI amount in box 20 of end-of-year assets Schedule K-1 (Form 1065) (g) Share of (h)
Disproportionate
allocations? å (f) Share of total income Yes IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) (g)
Share of end-of-year sseets (e)
Type of entity
(C corp, S corp, because it had one or more related organizations treated as a partnership during the tax year. (f) Share of total income (d)

( Direct controlling entity (c) Legal domicile (state or foreign country) (e)
Predomnant
income (related,
unrelated,
excluded from
tax under
sections
512-514) (b) Primary activity (d)

Direct controlling | (c) Legal domicile (state or foreign country) Name, address, and EIN of related organization Primary activity Name, address, and EIN of related organization Part IV

Schedule R (Form 990) 2009

Page 3

# Part V

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

Note	Note Complete line 1 if any antity is listed in Dade II III or IV of this cohedula		>	Voc No	۱,
-	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	arts II–IV?	<u>'</u>   .	4	, [
	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.		1a	×	
<u>a</u>	Gift, grant, or capital contribution to other organization(s).		1b ×	\ \	1
ပ	Gift, grant, or capital contribution from other organization(s)		10	×	
ם ס	Loans or loan guarantees to or for other organization(s)		1d	×	١.,
<b>o</b>	Loans or loan guarantees by other organization(s)		1e	×	١. ـ
		•	٠ ٠	1	$\Gamma$
<b>-</b>	Sale of assets to other organization(s)		-	<b> </b> >	].
5	Purchase of assets from other organization(s)		- 5	( <b>&gt;</b>	1.
	Exchange of assets		21 1	()  -	1.
· -	The state of the s		= ;	\\ <del>\</del>	1.
-	ease of facilities, equipment, or other assets to other organization(s).		= -	<u> </u>	٦
•			3		:
_	Lease of facilities, equipment, or other assets from other organization(s)		1j	× -	[
¥	Performance of services or membership or fundraising solicitations for other organization(s)		1k   X	\ \ \	
_	Performance of services or membership or fundraising solicitations by other organization(s)		11	×	ا. ا
_	Sharing of facilities, equipment, mailing lists, or other assets		1m X	>	
c)	Sharing of paid employees	•	1n×	ļ	l
			H	60	4
0	Reimbursement paid to other organization for expenses		X	. 1	7
	Reimhursement haid by other organization for expenses		╀		
				,	Γ
				·   :	7
<b>.</b>	Outer transfer of cash or property to other organization(s)		<u> </u>	<u> </u>	1
_	Uther transfer of cash or property from other organization(s).		<u>-</u>	×	
7	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.	ionships and transact	ion threst	holds.	-
	(e)	<b>(</b>	<u> </u>		
	Name of other organization	Transaction type (a-r)	Amount involved	volved	
					l
Ξ					0
				i	l
(2)					0
(3)					0
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(4)					0
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(9)					_
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		Schedule	Schedule R (Form 990) 2009	990) 200	6

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

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

of gross reveriue) that was first a related organization. See instructions regarding exclusion for certain investment partnerships.	instructions regarding exc	iusion for cenain II	)vestment	parnersnips.	9		(0)	3	
Name, address, and EIN of entity	Primary activity	Legal domicile	Are all partners		Disproportionate		Code V—UBI	General or	al or
		(state or foreign country)	section 501(c)(3) organizations?	end-of-year assets s?			amount in box 20 of Schedule K-1 (Form 1065)	managing partner?	Buld St.
			Yes No		Yes	8		Yes	2
							0		
					0		0		
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