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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)

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

OMB No 1545-0047

2009

Open to Public Inspection

For the 2009 calendar year, or tax year beginning 10/01 **, 2009, and ending** 9/30 **, 2010**

B Check if applicable
- [ ] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Termination
- [ ] Amended return
- [ ] Application pending

Please use IRS label or print or type. See specific instructions.

C
NATIONAL SUNFLOWER ASSOCIATION
2401 46TH AVE SE #206
MANDAN, ND 58554-4829

D Employer Identification Number
45-0362201

E Telephone number
701-328-5100

G Gross receipts $ 3,444,579.

F Name and address of principal officer LARRY W. KLEINGARTNER
SAME AS C ABOVE

H(a) Is this a group return for affiliates? [ ] Yes [X] No
H(b) Are all affiliates included? [ ] Yes [ ] No
If 'No,' attach a list (see instructions)

I Tax-exempt status [X] 501(c) (5) ◄ (insert no) [ ] 4947(a)(1) or [ ] 527

J Website: ► WWW.SUNFLOWERNSA.COM

H(c) Group exemption number ►

K Form of organization [X] Corporation [ ] Trust [ ] Association [ ] Other ► **L** Year of Formation 1982 **M** State of legal domicile ND

Part I Summary

1 Briefly describe the organization's mission or most significant activities PROMOTION OF SUNFLOWER

2 Check this box ► [ ] if the organization discontinued its operations or disposed of more than 25% of its assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	19
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19
5	Total number of employees (Part V, line 2a)	5	6
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	177,310.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	2,647,450.	3,078,835.
9	Program service revenue (Part VIII, line 2g)	126,641.	145,809.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	56,786.	37,236.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	173,694.	182,699.
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,004,571.	3,444,579.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		506,890.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	332,481.	348,824.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ►		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	3,029,476.	2,459,187.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,361,957.	3,314,901.
19	Revenue less expenses Subtract line 18 from line 12	-357,386.	129,678.

		Beginning of Year	End of Year
20	Total assets (Part X, line 16)	1,946,228.	2,103,827.
21	Total liabilities (Part X, line 26)	222,089.	250,010.
22	Net assets or fund balances Subtract line 21 from line 20	1,724,139.	1,853,817.

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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

► Signature of officer — Date: November 10, 2010

► LARRY KLEINGARTNER — EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ► — Date 11/10/10 — Check if self-employed ► [X] — Preparer's identifying number (see instructions) P01204255

Firm's name (or yours if self-employed), address, and ZIP + 4 ► STEVEN L. WONNENBERG C.P.A.
PO BOX 7183
BISMARCK, ND 58507-7183

EIN ► 45-0424130
Phone no ► (701) 223-4317

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

913-20

5

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No
If 'Yes,' describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No
If 'Yes,' describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code [redacted]) (Expenses $_____ including grants of $_____) (Revenue $_____)
THE MARKET ACCESS PROGRAM & FOREIGN DEVELOPMENT PROGRAM ARE USED TO PROMOTE THE USE, DEVELOPMENT & MARKETING OF SUNFLOWER THROUGHOUT THE WORLD.

4b (Code [redacted]) (Expenses $_____ including grants of $_____) (Revenue $_____)
CONFECTION PROGRAM PROMOTES THE USE, MARKETING & DEVELOPMENT OF CONFECTIONARY SUNFLOWER.

4c (Code. [redacted]) (Expenses $_____ including grants of $_____) (Revenue $_____)
DOMESTIC OIL PROGRAM PROMOTES THE USE, MARKETING & DEVELOPMENT OF OIL SUNFLOWER.

4d Other program services (Describe in Schedule O)
(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ►

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If 'Yes,' complete Schedule A*	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If 'Yes,' complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If 'Yes,' complete Schedule C, Part II*	4		
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If 'Yes,' complete Schedule C, Part III*	5	X	
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If 'Yes,' complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If 'Yes,' complete Schedule D, Part III*	8		X
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		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If 'Yes,' complete Schedule D, Part V*	10		X
11	Is the organization's answer to any of the following questions 'Yes'? *If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable*	11	X	
	• 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 organizaiton'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 statement for the tax year? *If 'Yes,' complete Schedule D, Parts XI, XII, and XIII*	12	X	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? *If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional* (Yes / No: 12 A — No)			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If *'Yes,' complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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	X	
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 United States? *If 'Yes,' complete Schedule F, Part II*	15		X
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 United States? *If 'Yes,' complete Schedule F, Part III*	16		X
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? *If 'Yes,' complete Schedule G, Part I*	17		X
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		X
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		X
20	Did the organization operate one or more hospitals? *If 'Yes,' complete Schedule H*	20		X

Part 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		X
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, and 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
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? *If 'Yes,' complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, 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		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? *If 'Yes,' complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If 'Yes,' complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If 'Yes,' complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If 'Yes,' complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If 'Yes,' complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If 'Yes,' complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1*	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If 'Yes,' complete Schedule R, Part V, line 2*	35		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If 'Yes,' complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If 'Yes,' complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38		X

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	1a	15		
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	6		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* this return (see instructions)				
3a Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?		3a	X	
b If 'Yes' has it filed a Form 990-T for this year? *If 'No,' provide an explanation in Schedule O*		3b	X	
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		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 and Financial Accounts				
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
c 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		
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
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		6b		
7 Organizations that may receive deductible contributions under section 170(c).				
a 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		
c 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	7d			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		8		
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?		9a		
b Did the organization make any distribution to a donor, donor advisor, or related person?		9b		
10 Section 501(c)(7) organizations. Enter:				
a 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	10b			
11 Section 501(c)(12) organizations. Enter:				
a Gross income from other members or shareholders	11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
b 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.*

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a 19		
b	Enter the number of voting members that are independent	1b 19		
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		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		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director or 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		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
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?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O			
12a	Does the organization have a written conflict of interest policy? *If 'No,' go to line 13*	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
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		
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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers of key employees of the organization	15b		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
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		

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ► NONE

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available 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.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► LARRY KLEINGARTNER, EXEC DIREC 2401 46TH AVE SE, SUITE 206 MANDAN ND 58554-4829 701-3

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 organizations'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 compensate any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MIKE CLEMENS DIRECTOR	0	X						810.	0.	0.
DEAN SONNENBERG DIRECTOR	0	X						975.	0.	0.
TIM DEKREY CHAIRMAN	0	X		X				810.	0.	0.
DON SCHOMMER PRESIDENT	0	X		X				1,890.	0.	0.
JOHN SWANSON SEC/TREASURER	0	X		X				0.	0.	0.
KEVIN CAPISTRAN DIRECTOR	0	X						135.	0.	0.
KARL ESPING DIRECTOR	0	X						405.	0.	0.
GUY CHRISTENSEN DIRECTOR	0	X						0.	0.	0.
TIM EGELAND DIRECTOR	0	X						0.	0.	0.
ARNOLD WOODBURY DIRECTOR	0	X						405.	0.	0.
JOHN MCLEAN DIRECTOR	0	X						0.	0.	0.
REGINAL HERMAN DIRECTOR	0	X						1,215.	0.	0.
MICHAEL ODEGAARD DIRECTOR	0	X						0.	0.	0.
TOM YOUNG 1ST VICE PRES	0	X		X				2,160.	0.	0.
LEON ZIMBELMAN 2ND VICE PRES	0	X		X				0.	0.	0.
BRAD BONHORST DIRECTOR	0	X						810.	0.	0.
JEFF OBERHOLTZER DIRECTOR	0	X						540.	0.	0.

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ART RIDL DIRECTOR	0	X						810.	0.	0.
RON SEIDEL DIRECTOR	0	X						270.	0.	0.
LARRY W. KLEINGARTNER EXECUTIVE DIREC	40			X				127,911.	0.	14,349.
1b Total ►								139,146.	0.	14,349.

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 ► 1

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If 'Yes,' complete Schedule J for such individual*	3		X
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		X
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		X

Section 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	(C) Compensation
FLEISHMAN-HILLARD SPAIN, S.A. C/LUCHANA, 23-4 MADRID, 28010 SPAIN	SUNFLOWER PROMOTION	589,488.
HARBINGER 252 ADELAIDE STREET EAST TORONTO, M5A 1N1 CANADA	SUNFLOWER PROMOTION	269,252.
MARKETING SOLUTIONS FIRM SAN JUAN DE LOS LAGOS 52 SANTA MONICA, 540	SUNFLOWER PROMOTION	302,429.
GRUPO DE PROMOCION GUTY CARDENSA 102, COL. GUADALUPE MEXICO CITY,	SUNFLOWER PROMOTION	349,093.
BIODIAGNOSTICS INC 507 HIGHLAND DRIVE RIVER FALLS, WI 54022	SUNFLOWER RESEARCH	226,500.

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 ► 6

Part 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
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e	2,325,452.			
	f All other contributions, gifts, grants, and similar amounts not included above	1f	753,383.			
	g Noncash contribns included in lns 1a-1f:	$				
	h **Total.** Add lines 1a-1f	►	3,078,835.			
PROGRAM SERVICE REVENUE		Business Code				
	2a MEETINGS & SEMINARS		92,303.	92,303.		
	b MEMBERSHIP DUES & ASSESSMENTS		36,925.	36,925.		
	c MAGAZINE SUBS/LISTS		16,581.	16,581.		
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f	►	145,809.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)	►	37,236.			37,236.
	4 Income from investment of tax-exempt bond proceeds	►				
	5 Royalties	►				
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)	►				
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory					
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)	►				
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events	►				
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities	►				
	10a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory	►				
	Miscellaneous Revenue	Business Code				
	11a ADVERTISING SALES	541800	177,310.		177,310.	
	b DIRECTORY SALES		4,944.	4,944.		
	c MISCELLANEOUS		445.	445.		
	d All other revenue					
	e **Total.** Add lines 11a-11d	►	182,699.			
	12 **Total revenue.** See instructions	►	3,444,579.	151,198.	177,310.	37,236.

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).

Do not include amounts reported on lines 6b, 7b, 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	506,890.			
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	160,555.			
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	145,879.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,960.			
9 Other employee benefits	14,042.			
10 Payroll taxes	20,388.			
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	2,925.			
d Lobbying	117,394.			
e Prof fundraising svcs See Part IV, ln 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses	9,410.			
14 Information technology	1,461.			
15 Royalties				
16 Occupancy	26,038.			
17 Travel	58,969.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	58,097.			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	9,055.			
23 Insurance	4,158.			
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)				
a MARKET ACCESS PROGRAM	1,356,999.			
b FOREIGN MARKET DEVELOPMENT	283,467.			
c RESEARCH - SNP	226,500.			
d PRINTING AND PUBLICATIONS	134,925.			
e CONSULTANTS	86,960.			
f All other expenses	82,829.			
25 **Total functional expenses.** Add lines 1 through 24f	3,314,901.			
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				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
ASSETS	1	Cash – non-interest-bearing		68,272.	1	464,479.
	2	Savings and temporary cash investments		1,639,258.	2	991,000.
	3	Pledges and grants receivable, net		184,220.	3	375,189.
	4	Accounts receivable, net		31,438.	4	247,763.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			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 Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		3,206.	9	3,280.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 92,059.			
	b	Less accumulated depreciation.	10b 69,943.	19,834.	10c	22,116.
	11	Investments – publicly-traded securities			11	
	12	Investments – other securities See Part IV, line 11			12	
	13	Investments – program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	**Total assets** Add lines 1 through 15 (must equal line 34)		1,946,228.	16	2,103,827.
LIABILITIES	17	Accounts payable and accrued expenses		193,256.	17	221,955.
	18	Grants payable			18	
	19	Deferred revenue		1,118.	19	977.
	20	Tax-exempt bond liabilities			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	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D		27,715.	25	27,078.
	26	**Total liabilities.** Add lines 17 through 25		222,089.	26	250,010.
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117, check here ► [X] and complete lines 27 through 29 and lines 33 and 34.**				
	27	Unrestricted net assets		1,504,161.	27	1,529,003.
	28	Temporarily restricted net assets		219,978.	28	324,814.
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ► [ ] and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building, and equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,724,139.	33	1,853,817.
	34	Total liabilities and net assets/fund balances		1,946,228.	34	2,103,827.

Part XI Financial Statements and Reporting

		Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b Were the organization's financial statements audited by an independent accountant?	2b	X	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c		X
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 separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	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	3b	X	

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

► **Complete if the organization is described below.**

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

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2009

Open to Public Inspection

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

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

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

Name of organization	Employer identification number
NATIONAL SUNFLOWER ASSOCIATION	45-0362201

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

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 ► $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If 'Yes,' describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) , except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► $

3 Total of exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ► $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☒ No

5 Enter 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) 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 delivered to a separate political organization If none, enter -0-

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule C (Form 990 or 990-EZ) 2009

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ► ☐ if the filing organization belongs to an affiliated group

B Check ► ☐ if the filing organization checked box A and 'limited control' provisions apply

Limits on Lobbying Expenditures — (The term 'expenditures' means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is.
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000

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? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	**(a)** 2006	**(b)** 2007	**(c)** 2008	**(d)** 2009	**(e)** Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a) Yes	(a) No	(b) Amount
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 Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1		X
2 Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		X
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		X

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	294,197.
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).**		
a Current year	2a	123,388.
b Carryover from last year	2b	
c Total	2c	123,388.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	123,388.
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 lobbying and political expenditure next year?	4	0.
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0.

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

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2009

Open to Public Inspection

Name of the organization

NATIONAL SUNFLOWER ASSOCIATION

Employer Identification number

45-0362201

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(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)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? ☐ Yes ☐ No

Part II Conservation Easements Complete if the organization answered 'Yes' 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., recreation or pleasure)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► $ _____

(ii) Assets included in Form 990, Part X ► $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► $ _____

b Assets included in Form 990, Part X ► $ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► _____ %
b Permanent endowment ► _____ %
c Term endowment ► _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations 3a(i)		
(ii) related organizations 3a(ii)		
b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		92,059.	69,943.	22,116.
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ►				22,116.

Part VII Investments—Other Securities See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total *(Column (b) must equal Form 990 Part X, col. (B) line 12.)* ►		

Part VIII Investments—Program Related (See Form 990, Part X, line 13) N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, Col. (B) line 13.)* ►		

Part IX Other Assets (See Form 990, Part X, line 15) N/A

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col (B), line 15)* ►	

Part X Other Liabilities (See Form 990, Part X, line 25)

(a) Description of Liability	(b) Amount
Federal Income Taxes	
ACCRUED VACATION LEAVE	27,078.
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ►	27,078.

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII,column (A), line 12)	3,444,579.
2	Total expenses (Form 990, Part IX, column (A), line 25)	3,314,901.
3	Excess or (deficit) for the year Subtract line 2 from line 1	129,678.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	129,678.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements		1	3,444,579.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines **2a** through **2d**		2e	
3	Subtract line **2e** from line **1**		3	3,444,579.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**			
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines **4a** and **4b**		4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)		5	3,444,579.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements		1	3,314,901.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIV)	2d		
e	Add lines **2a** through **2d**		2e	
3	Subtract line **2e** from line **1**		3	3,314,901.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**			
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIV)	4b		
c	Add lines **4a** and **4b**		4c	
5	Total expenses Add lines **3** and **4c** (This must equal Form 990, Part I, line 18)		5	3,314,901.

Part XIV Supplemental Information

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

Part XIV Supplemental Information *(continued)*

Schedule F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

NATIONAL SUNFLOWER ASSOCIATION

Employer identification number

45-0362201

Part I General Information on Activities Outside the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region. (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures in region
EUROPE	0	0	PROMOTION OF SUNFLOWER - FLEISHMAN HILLARD	PROMOTION OF SUNFLOWER IN SPAIN	589,488.
NORTH AMERICA	0	0	PROMOTION OF SUNFLOWER	PROMOTION OF SUNFLOWER IN CANADA	269,252.
NORTH AMERICA	0	0	PROMOTION OF SUNFLOWER - MARKETING SOLUTIONS FIRM AND GRUPO DE PROMOCION	PROMOTION OF SUNFLOWER IN MEXICO	651,522.
Totals ►	0	0			1,510,262.

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule **F** (Form 990) (2009)

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 ► X
Use Schedule F-1 (Form 990) if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ► 0

3 Enter total number of other organizations or entities ► 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Supplemental Information

Complete this part to provide the information required in Part I, line 2, and any additional information

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.
► **Attatch to Form 990.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
NATIONAL SUNFLOWER ASSOCIATION

Employer identification number
45-0362201

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ► [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALDBECK CONSULTING 5533 LITTLE HICKORY ROAD PHILPOT, KY 42366	27-1063937		5,700.	0.			DOUBLE CROPPING SUNFLOWER ON WHEAT
COLORADO STATE UNIVERSITY 2002 CAMPUS DELIVERY FORT COLLINGS, CO 80523	84-6000545	STATE OF COLORADO	9,725.	0.			DRYLAND CROP ROTATION
KANSAS STATE UNIVERSITY ANDERSON HALL, ROOM 10 MANHATTAN, KS 66506	48-0771751	STATE OF KANSAS	29,385.	0.			LIMITED IRRIGATION OF SUNFLOWER
NORTH DAKOTA STATE UNIVERSITY DEPT 3130 PO BOX 6050 FARGO, ND 58108	45-6002439	STATE OF NORTH DAKOTA	194,180.	0.			RUST, SEED INSECTS & OTHER RESEARCH
OKLAHOMA STATE UNIVERSITY 450 MCHAMARA ALUMNI CENTER STILLWATER, OK 74076	73-6017987	STATE OF OKLAHOMA	13,212.	0.			PLANTING CONSIDERATIONS FOR SUNFLOWER
REGENTS OF THE UNIVERSITY OF MN 200 OAK STREET MINNEAPOLIS, MN 55455	41-6007513	STATE OF MINNESOTA	7,500.	0.			MANAGEMENT PLANTING DATES, INSECTS
SOUTH DAKOTA STATE UNIVERSITY BOX 2201 ADMIN 103 BROOKINGS, SD 57007	46-6000364	STATE OF SOUTH DAKOTA	13,210.	0.			ROW RESEARCH IN SUNFLOWER
UNIVERSITY OF NEBRASKA 4502 AVENUE I SCOTTSBLUFF, NE 69361	47-0049123	STATE OF NEBRASKA	9,400.	0.			ROW RESEARCH IN SUNFLOWER

2 Enter total number of section 501(c)(3) and government organizations ► 9

3 Enter total number of other organizations ► 1

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

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

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION

THE NATIONAL SUNFLOWER ASSOCIATION (NSA) PROVIDES GRANTS TO PUBLIC RESEARCHERS TO STIMULATE NEW OR ADDITIONAL WORK THAT MAY RESULT IN LOWER PRODUCTION COSTS, INCREASED QUALITY AND HIGHER YIELDS.

THE LIST BELOW SPECIFIES 'AREAS OF INTEREST' OUTLINED BY THE NSA RESEARCH COMMITTEE. THIS IS NOT AN EXCLUSIVE LIST AND ALL PRODUCTION AREAS OF RESEARCH WILL BE CONSIDERED BY THE COMMITTEE. ALL APPLICATIONS WILL BE REVIEWED BY THE NSA RESEARCH COMMITTEE IN MIDDLE JANUARY AND THE NSA BOARD OF DIRECTORS WILL MAKE FINAL FUNDING DECISIONS IN LATE FEBRUARY OR EARLY MARCH.

SCHEDULE I-1 (Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

NATIONAL SUNFLOWER ASSOCIATION

Employer identification number

45-0362201

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USDA/APHIS/WS/NWRC 4101 LAPORTE AVENUE FORT COLLINS, CO 80521	41-0696271	US DEPARTMENT OF AGRICULTURE	21,580.				ANTHRAQUINONE - BLACKBIRD REPELLENT
USDA/ARS BUILDING D, SUITE 310 FORT COLLINS, CO 80526	72-0564834	US DEPARTMENT OF AGRICULTURE	183,869.				DISEASE RESISTANCE IN SUNFLOWER

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
NATIONAL SUNFLOWER ASSOCIATION

Employer identification number
45-0362201

Part I Identification of Disregarded Entities (Complete if the organization answered 'Yes' to 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

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

(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
SUNPAC 2401 46TH AVENUE SE, SUITE 206 MANDAN, ND 58554-4829 45-0462303	FUNDRAISING FOR LOBBYING	ND	527		N/A

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

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(F) Share of total income	(G) Share of end-of-year assets	(H) Disproportionate allocations? Yes	(H) Disproportionate allocations? No	(I) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner? Yes	(J) General or managing partner? No

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

(A) Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(G) Share of end-of-year assets	(H) Percentage ownership

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

			Yes	No
	Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			
1	During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV			
a	Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to other organization(s)	1b		X
c	Gift, grant, or capital contribution from other organization(s)	1c		X
d	Loans or loan guarantees to or for other organization(s)	1d		X
e	Loans or loan guarantees by other organization(s)	1e		X
f	Sale of assets to other organization(s)	1f		X
g	Purchase of assets from other organization(s)	1g		X
h	Exchange of assets	1h		X
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		X
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		X
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k		X
l	Performance of services or membership or fundraising solicitations by other organization(s)	1l		X
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		X
n	Sharing of paid employees	1n		X
o	Reimbursement paid to other organization for expenses	1o		X
p	Reimbursement paid by other organization for expenses	1p		X
q	Other transfer of cash or property to other organization(s)	1q		X
r	Other transfer of cash or property from other organization(s)	1r		X

2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		(E) Share of end-of-year assets	(F) Disproportionate allocations?		(G) Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No

SCHEDULE O (Form 990)	Supplemental Information to Form 990	OMB No 1545-0047
Department of the Treasury Internal Revenue Service	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	Employer identification number
NATIONAL SUNFLOWER ASSOCIATION	45-0362201

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

THE NATIONAL SUNFLOWER ASSOCIATION IS A NONPROFIT CORPORATION ORGANIZED TO FOSTER THE DEVELOPMENT, USE AND MARKETING OF SUNFLOWER. THESE OBJECTIVES ARE CARRIED OUT THROUGH THE ASSOCIATION'S INVOLVEMENT IN THE MARKET ACCESS PROGRAM, THE FOREIGN MARKET DEVELOPMENT PROGRAM, LEGISLATIVE ACTIVITIES, SUNFLOWER MAGAZINE, RESEARCH, AND OTHER DOMESTIC SUNFLOWER PROMOTIONS.

FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS

A DRAFT COPY OF THE FORM 990 IS SENT TO EACH BOARD MEMBER FOR THEIR REVIEW & INPUT.

Name of the organization: NATIONAL SUNFLOWER ASSOCIATION

Employer identification number: 45-0362201

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

RESEARCH AREAS OF INTEREST (THESE ARE NOT LISTED IN ORDER OF PRIORITY)

PRODUCTION ISSUES:

1. IRRIGATION TIMING AND OTHER ISSUES RELATED TO IRRIGATION OF SUNFLOWER WITH EMPHASIS ON LIMITED IRRIGATION.

2. BLACKBIRDS: INNOVATIVE AND NEW APPROACHES TO REDUCE DAMAGE.

3. FACTORS RELATED TO ACHIEVING AN ADEQUATE PLANT STAND. THIS COULD INCLUDE: PLANTER CALIBRATION AND OTHER PLANTER ISSUES, SEEDING DEPTH, SOIL TEMPERATURE/MOISTURE, SEEDLING VIGOR, SEED BIOLOGY, INSECTS/DISEASES AND OTHER.

4. ROTATION STUDIES WITH OTHER CROPS BEFORE OR AFTER SUNFLOWER LOOKING AT A BROAD RANGE OF ASPECTS FROM YIELD, SOIL WATER USE, DISEASE AND INSECT INTERACTIONS, NITROGEN UTILIZATION AND MORE. PREFERENCE FOR FARMER FIELD STUDIES.

5. FUNGICIDE APPLICATION FOR CONTROL OF DISEASES AND ENHANCE YIELD. ISSUES OF TIMING AND TANK MIXING WITH INSECTICIDES/HERBICIDES ARE OF INTEREST. THERE IS A STRONG PREFERENCE FOR USING LABELED FUNGICIDES AND THE EFFICACY OF ADJUVANTS. PREFERENCE FOR THE CONTROL OF PHOMOPSIS.

6. DOUBLE CROPPING SUNFLOWER AFTER WINTER WHEAT.

7. FERTILITY MANAGEMENT FOR IRRIGATED SUNFLOWERS. STUDIES RELATING TO TIMING AND QUANTITY OF NITROGEN APPLICATIONS FOR FERTIGATION OF IRRIGATED SUNFLOWERS.

8. IDENTIFY TECHNIQUES TO REDUCE/ELIMINATE COMBINE FIRES IN SUNFLOWER HARVEST.

9. DESIGN PLANTING FORMAT TO MINIMIZE FIELD DAMAGE FOR USE OF HIGHBOY APPLICATORS FOR INSECTS AND DESICCANTS.

INSECTS:

1. LONG-HORNED BEETLE (DECTES): INTEREST IN MULTIPLE APPROACHES TO MINIMIZING DAMAGE INCLUDING DATE OF PLANTING/HARVESTING, EFFICACY OF STAY GREEN HYBRIDS AND THE USE OF EXPERIMENTAL INSECTICIDES.

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

2. CONTROLLING INSECTS THROUGH CONVENTIONAL INSECTICIDE MEANS OR OTHER INNOVATIVE TECHNIQUES.

3. SCREEN HYBRID AND BREEDING MATERIAL FOR MIDGE AND OTHER INSECT RESISTANCE.

WEEDS:

1. PALMER AMARANTH IS A SPECIES OF GREAT CONCERN.

2. INTEREST IN INNOVATIVE WEED CONTROL TECHNIQUES RELATED TO EXISTING LABELS AND TO TEST EXPERIMENTAL OR NEW-TO-MARKET HERBICIDES FOR POTENTIAL SUNFLOWER APPLICATION.

DISEASES:

1. PHOMOPSIS IS OF CONCERN THROUGHOUT THE PRODUCTION REGION. PROPOSALS DEALING WITH SHORT AND LONG TERM CONTROL STRATEGIES WILL BE OF INTEREST. DETERMINING SPECIES OF THE DISEASE IS CONSIDERED VERY IMPORTANT.

2. RUST INCLUDING IDENTIFYING RACES AND THE CONTROL OF RUST VIA GENETIC RESISTANCE AND FUNGICIDE APPLICATION.

3. VERTICILLIUM HAS ALSO BEEN IDENTIFIED AS A DISEASE OF CONCERN. PROPOSALS DEALING WITH SHORT AND LONG TERM CONTROL STRATEGIES WILL BE OF INTEREST.

4. THERE IS CONTINUED INTEREST IN DOWNY MILDEW WITH THE DEVELOPMENT OF NEW RACES AND FUNGICIDE EFFICACY.

5. CHARCOAL ROT IS OF INTEREST SINCE IT IS COMMON TO SUNFLOWER, SOYBEANS AND CORN.

6. SCLEROTINIA PROPOSALS SHOULD BE DIRECTED TO THE NATIONAL SCLEROTINIA INITIATIVE.

MONITORING:

THE RESEARCHERS ARE AWARDED HALF OF THE FUND REQUESTED UPON NOTIFICATION OF A GRANT AWARD AND COMPLETION OF PAPERWORK. THE RESEARCHERS ARE REQUESTED TO PRESENT THEIR RESULTS AT THE ANNUAL NSA RESEARCH FORUM HELD IN JANUARY EVERY YEAR. UPON

PART IV - ADDITIONAL SUPPLEMENTAL INFORMATION (CONTINUED)

COMPLETION OF THEIR PROJECT, THE RESEARCHERS ARE REQUESTED TO PRESENT A FINAL REPORT TO THE NSA. UPON RECEIPT OF THE FINAL REPORT THE SECOND HALF OF THE FUNDS ARE PAID OUT.

FORM 990, PART IX, LINE 24
OTHER EXPENSES

	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT & GENERAL	(D) FUNDRAISING
CONFECTION PROGRAM - OTHER	11,603.			
DOMESTIC OIL PROGRAM - OTHER	2,428.			
DUES, MEMBERSHIPS & SUBSCRIPT	7,444.			
EQUIPMENT LEASE	2,090.			
EQUIPMENT MAINTENANCE	6,887.			
FEES	36.			
GROWER PROMOTION - OTHER	2,741.			
HIGH PLAINS ACTIVITIES	34,970.			
HIGH PLAINS COORD - OTHER	258.			
MISCELLANEOUS	6,258.			
POSTAGE AND SHIPPING	8,114.			
TOTAL	$ 82,829.	$ 0.	$ 0.	$ 0.

CLIENT 4 | NATIONAL SUNFLOWER ASSOCIATION | 45-0362201

11/10/10 09:27AM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF																
FURNITURE AND FIXTURES																
1	OAK TABLE	12/02/84		75							75	75	S/L	5		0
2	SHELVING 75X36X18	2/13/85		282							282	282	S/L	5		0
3	STORAGE CABINET	1/20/88		408							408	408	S/L	5		0
4	TMI SHELVES/CABINET	9/03/91		1,549							1,549	1,549	S/L	5		0
5	MUTIPLEX SLIDE DISPLAY CS	9/24/91		207							207	207	S/L	5		0
6	HMI OFFICE PANELS, ETC	6/30/92		8,619							8,619	8,619	S/L	5		0
7	OFFICE CHAIR - HERMAN MIL	9/21/93	10/15/09	508							508	508	S/L	5		0
8	CHAIRS (2)	8/06/96		979							979	979	S/L	5		0
9	HP DESKJET 720-C	2/27/98	10/15/09	389							389	389	S/L	3		0
10	HANSOL MONITOR	10/11/98	10/15/09	419							419	419	S/L	3		0
11	DISPLAY BOOTH	7/31/99		8,048							8,048	8,048	S/L	5		0
12	OFFICE PANELS - LARRY	8/10/99		4,976							4,976	4,976	S/L	5		0
13	OFFICE PANELS - PAM/DARLN	10/05/98		7,835							7,835	7,835	S/L	5		0
14	OFFICE CHAIR	11/14/00	10/15/09	689							689	689	S/L	5		0
15	UMAX SCANNER 6400	2/28/01	10/15/09	225							225	225	S/L	3		0
16	SAMSUNG 5100P FAX MACHINE	2/23/01		608							608	608	S/L	5		0
17	OFFICE PANELS	5/17/01		6,066							6,066	6,066	S/L	5		0
18	CHAIR - JOHN	1/29/02		676							676	676	S/L	5		0
19	FURNITURE - MAX	1/31/02		2,440							2,440	2,440	S/L	5		0
20	HP 4300 DTNS PRINTER	1/07/03		2,363							2,363	2,363	S/L	3		0
21	HP ENVELOPE FEEDER	1/07/03		281							281	281	S/L	3		0
22	MINOLTA DIGITAL CAMERA	1/07/03	10/15/09	653							653	653	S/L	5		0
23	512 MB RAM - SERVER	2/17/04		226							226	226	S/L	3		0

CLIENT 4 **NATIONAL SUNFLOWER ASSOCIATION** **45-0362201**

11/10/10 09:27AM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR
24	SUNFLOWER MAGAZINE EQUIP	VARIOUS	10/15/09	171							171	171	S/L	7		0
25	LOVE SEAT, CHAIR & TABLE	1/13/06		1,337							1,337	716	S/L	7		191
26	END TABLE & COFFEE TABLE	1/13/06		517							517	277	S/L	7		74
27	MONITOR - TINA'S	10/10/06	10/15/09	234							234	234	S/L	3		0
28	HP COMPAQ DESKTOP DC5100	10/10/06		580							580	580	S/L	3		0
29	HP LASER JET P2015D	12/19/06	10/15/09	403							403	369	S/L	3		34
30	MAP SOFTWARE	1/23/07		261							261	232	S/L	3		29
31	ADOBE ILLUSTRATOR CS2	1/25/07		528							528	469	S/L	3		59
32	APW POWER BATTER - SERVER	5/24/07		541							541	420	S/L	3		121
33	NSA DISPLAY	6/14/07		1,049							1,049	350	S/L	7		150
34	BACK-UP TAPE DRIVE - SRVR	7/19/07		1,474							1,474	1,064	S/L	3		410
35	SERVER	7/23/07		5,871							5,871	4,240	S/L	3		1,631
36	TERMINAL SERVER + SFTWRE	7/30/07		2,298							2,298	1,660	S/L	3		638
37	HP 8510 LAPTOP - TINA	5/27/08		2,031							2,031	903	S/L	3		677
38	HP 2510 LAPTOP - LARRY	6/10/08		2,027							2,027	901	S/L	3		676
39	HP 8510 LAPTOP - BACKUP	12/22/07		1,320							1,320	770	S/L	3		440
40	CONFERENCE PHONE SYSTEM	10/15/08		1,085							1,085	155	S/L	7		155
41	HP LAPTOP/DKG STN - JOHN	11/11/08		2,191							2,191	669	S/L	3		730
42	HP LAPTOP/DKG STN - LERRE	11/12/08		1,495							1,495	457	S/L	3		498
43	LEAP CHAIR - LARRY	11/10/08		784							784	103	S/L	7		112
44	HP CP3525DN PRINTER	12/08/08		913							913	152	S/L	5		183
45	KYOCERA KM3060 COPIER	12/23/08		5,508							5,508	826	S/L	5		1,102
46	2 LEAP CHAIRS - TINA/LERR	12/31/08		1,831							1,831	196	S/L	7		262
47	ARCGIS MAPPING PROGRAM	3/30/09		1,443							1,443	144	S/L	5		289
48	CHAIR	8/06/96	10/15/09	490							490	490	S/L	5		0
49	VACUUM CLEANER	10/01/09		436							436		S/L	7		62
50	WIRELESS HEADSET	10/01/09		584							584		S/L	5		117

CLIENT 4 **NATIONAL SUNFLOWER ASSOCIATION** **45-0362201**

11/10/10 09 27AM

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC BAL DEPR.	SALVAG /BASIS REDUCT	DEPR BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
51	GLASS TOP TABLE W/CHAIRS	10/05/09		477							477		S/L	7		68
52	QUARK EXPRESS SOFTWARE	8/10/10		815							815		S/L	5		27
53	HP LAPTOP - LARRY	8/12/10		1,878							1,878		S/L	3		104
54	HP LAPTOP - TINA	8/12/10		1,593							1,593		S/L	3		89
55	HP LAPTOP - SONIA	8/12/10		1,593							1,593		S/L	3		89
56	OFFICE FURNITURE - SONIA	8/27/10		3,160							3,160		S/L	7		38
57	NIKON CAMERA	9/28/10		801							801		S/L	5		0
	TOTAL FURNITURE AND FIXTURE			96,240		0	0	0	0	0	96,240	65,069				9,055
	TOTAL DEPRECIATION			96,240		0	0	0	0	0	96,240	65,069				9,055
	GRAND TOTAL DEPRECIATION			96,240		0	0	0	0	0	96,240	65,069				9,055
	DEPRECIATION ASSETS SOLD			4,181		0	0	0	0	0	4,181	4,147				34
	DEPR REMAINING ASSETS			92,059		0	0	0	0	0	92,059	60,922				9,021