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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

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
FOOD EXPORT ASSOCATION OF THE MIDWEST USA

Doing Business As

Number and street (or P O box if mail is not delivered to street address) 309 W WASINGTON

Room/suite

City or town, state or country, and ZIP + 4
CHICAGO, IL 60606

D Employer identification number
36-2691663

E Telephone number
(312) 334-9200

G Gross receipts $ 12,914,532

F Name and address of principal officer
TIMOTHY HAMILTON
309 W WASINGTON SUITE 600
CHICAGO, IL 60606

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (5) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW FOODEXPORT ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1969

M State of legal domicile IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities
TO ASSIST SMALL AND MEDIUM-SIZED COMPANIES OF TWELVE MIDWESTERN STATES IN THE EXPORTATION OF AGRICULTURAL PRODUCTS

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	12
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	12
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	**5**	18
6	Total number of volunteers (estimate if necessary)	**6**	25
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
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)	10,567,933	11,155,089
9	Program service revenue (Part VIII, line 2g)	1,366,525	1,562,829
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14,851	9,557
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	286,341	187,057
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,235,650	12,914,532
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	6,651,738	7,675,504
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,109,921	1,115,396
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	4,360,083	4,023,314
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	12,121,742	12,814,214
19	Revenue less expenses Subtract line 18 from line 12	113,908	100,318

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	3,026,115	2,585,206
21	Total liabilities (Part X, line 26)	1,310,570	769,343
22	Net assets or fund balances Subtract line 21 from line 20	1,715,545	1,815,863

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 — 2011-07-26 — Date

TIMOTHY HAMILTON EXECUTIVE DIRECTOR — Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶☐	PTIN
Firm's name ▶ CROWE HORWATH LLP				Firm's EIN ▶
Firm's address ▶ 70 West Madison Street Suite 700 Chicago, IL 606024903				Phone no ▶ (312) 899-7000

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☐

1 Briefly describe the organization's mission

FOOD EXPORT ASSOCIATION OF THE MIDWEST U S A IS A NONPROFIT ORGANIZATION CHARTERED IN ILLINOIS BY THE DUES PAYING AGRICULTURAL PROMOTION AGENCIES OF TWELVE MIDWESTERN STATES ITS MISSION IS TO ASSIST SMALL AND MEDIUM-SIZED COMPANIES IN THOSE STATES IN THE EXPORTATION OF AGRICULTURAL PRODUCTS

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) (Expenses $ including grants of $) (Revenue $)

MARKET ACCESS PROGRAM (MAP), AN EXPORT PROGRAM OF THE FOREIGN AGRICULTURAL SERVICE OF THE USA DEPARTMENT OF AGRICULTURE (USDA) THE ORGANIZATION ALSO PARTICIPATES IN TRADE SHOWS AND OTHER INTERNATIONAL PROMOTION AND MARKETING ACTIVITIES

4b (Code) (Expenses $ including grants of $) (Revenue $)

4c (Code) (Expenses $ including grants of $) (Revenue $)

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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	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.*	11b		No
c	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.*	11c		No
d	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.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Parts III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
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		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
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**		No
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**		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	**35**		No
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ **Yes** ☑ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☑

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	96		
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** Yes	
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**	18		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			**2b** Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			**3a**	No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			**3b**	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			**4a**	No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for 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**	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			**5b**	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			**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**	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			**6b**	
7	**Organizations that may receive deductible contributions under section 170(c).**				
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 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	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			**7g**	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			**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 a 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 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**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			**13a**	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			**14a**	No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			**14b**	

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

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 12		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 12		
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		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

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		No
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	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		No
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. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

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

ROBERT LOWE
309 W WASHINGTON SUITE 600
CHICAGO, IL 60606
(312) 334-9200

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

Check if Schedule O contains a response to any question in this Part VII . . . . . ☑

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

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(1) TIMOTHY HAMILTON EXECUTIVE DIRECTOR	40			X				157,324	0	16,719
(2) THOMAS JENNINGS BOARD VICE PRESIDENT	1	X		X				0	0	0
(3) JOE KELSAY BOARD SECRETARY TREASURER	1	X		X				0	0	0
(4) DOUG GOEHRING BOARD MEMBER	1	X						0	0	0
(5) JON HAGLER BOARD MEMBER	1	X						0	0	0
(6) GREG IBACH BOARD MEMBER	1	X						0	0	0
(7) BILL NORTHEY BOARD PRESIDENT	1	X		X				0	0	0
(8) WALT BONES BOARD MEMBER - CURRENT YEAR	1	X						0	0	0
(9) BEN BRANCEL BOARD MEMBER - CURRENT YEAR	1	X						0	0	0
(10) DAVE FREDRICKSON BOARD MEMBER - CURRENT YEAR	1	X						0	0	0
(11) DALE RODMAN BOARD MEMBER - CURRENT YEAR	1	X						0	0	0
(12) KEITH CREAGH BOARD MEMBER - CURRENT YEAR	1	X						0	0	0
(13) JAMES ZEHRINGER BOARD MEMBER - CURRENT YEAR	1	X						0	0	0
(14) BILL THORTON BOARD MEMBER - PART YEAR	1	X						0	0	0
(15) DON KOVISTO BOARD MEMBER - PART YEAR	1	X						0	0	0
(16) ROD NILSESTUEN BOARD MEMBER - PART YEAR	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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			
(17) ROBERT BOGGS VICE PRESIDENT BOARD OF DIRECTORS - PART YEAR	1	X		X				0	0	0
(18) WILLIAM EVEN BOARD MEMBER - PART YEAR	1	X						0	0	0
(19) GENE HUGOSON BOARD MEMBER - PART YEAR	1	X						0	0	0
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								157,324	0	16,719

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**		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

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
MARKET MAKERS INC	TRADE SERVICING AND CONSULTING	252,653
CONTACTS INTL	TRADE SERVICING AND CONSULTING	248,937
SMH INTERNATIONAL LTD	TRADE SERVICING AND CONSULTING	205,910
MARKETING SOLUTIONS FIRM	TRADE SERVICING AND CONSULTING	198,790
KOREA BUSINESS SERVICES	TRADE SERVICING AND CONSULTING	175,127

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	11,155,089			
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f $		0			
	h **Total.** Add lines 1a-1f . . . . . ▶		11,155,089			
Program Service Revenue		Business Code				
	2a BRANDED PROGRAM PARTICIPANT FEES		719,595	719,595	0	0
	b US FAS ADMIN FEES		550,000	550,000	0	0
	c GENERIC PROGRAM PARTICIPANT FEES		173,234	173,234	0	0
	d STATE MEMBERSHIP DUES		120,000	120,000	0	0
	e					
	f All other program service revenue		0	0	0	0
	g **Total.** Add lines 2a–2f . . . . . ▶		1,562,829			
	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		9,557	0	0	9,557
	4 Income from investment of tax-exempt bond proceeds . . ▶		0			
	5 Royalties . . . . . ▶		0			
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)	0	0			
	d Net rental income or (loss) . . . . . ▶		0			
		(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)	0	0			
	d Net gain or (loss) . . . . . ▶		0			
Other Revenue	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 . . ▶		0			
	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 . . . ▶		0			
	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 . . ▶		0			
	Miscellaneous Revenue	Business Code				
	11a MANAGEMENT COST SHARING REIMBURSEMENTS		185,212	185,212	0	0
	b MISCELLANEOUS REVENUE		1,845	1,845	0	0
	c					
	d All other revenue		0	0	0	0
	e **Total.** Add lines 11a–11d . . . . . ▶		187,057			
	12 **Total revenue.** See Instructions . . . ▶		12,914,532	1,749,886	0	9,557

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	7,675,504			
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			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	183,482			
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	725,170			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	36,837			
9	Other employee benefits	98,837			
10	Payroll taxes	71,070			
a	Fees for services (non-employees) Management	0			
b	Legal	3,021			
c	Accounting	52,849			
d	Lobbying	0			
e	Professional fundraising services *See Part IV, line 17*	0			
f	Investment management fees	0			
g	Other	1,825,797			
12	Advertising and promotion	287,383			
13	Office expenses	32,072			
14	Information technology	127,173			
15	Royalties	0			
16	Occupancy	150,848			
17	Travel	566,748			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	866,176			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	15,302			
23	Insurance	5,088			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	BAD DEBT EXPENSES	43,991			
b	MINOR EQUIPMENT REPAIRS	17,663			
c	MEMBERSHIPS	11,405			
d					
e					
f	All other expenses	17,798			
25	**Total functional expenses.** Add lines 1 through 24f	12,814,214	0	0	0
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) 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		102,154	1	16,559
	2	Savings and temporary cash investments		983,997	2	979,962
	3	Pledges and grants receivable, net		1,426,980	3	644,446
	4	Accounts receivable, net		285,995	4	684,315
	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)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		203,086	9	237,667
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 307,299			
	b	Less accumulated depreciation	10b 285,042	23,903	10c	22,257
	11	Investments—publicly traded securities			11	
	12	Investments—other securities See Part IV, line 11			12	0
	13	Investments—program-related See Part IV, line 11			13	0
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	0
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		3,026,115	16	2,585,206
Liabilities	17	Accounts payable and accrued expenses		329,359	17	561,195
	18	Grants payable			18	
	19	Deferred revenue		180,266	19	208,148
	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		800,945	25	0
	26	**Total liabilities.** Add lines 17 through 25		1,310,570	26	769,343
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		1,715,545	27	1,815,863
	28	Temporarily restricted net assets			28	
	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 or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,715,545	33	1,815,863
	34	Total liabilities and net assets/fund balances		3,026,115	34	2,585,206

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	12,914,532
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,814,214
3	Revenue less expenses Subtract line 2 from line 1	3	100,318
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	1,715,545
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,815,863

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			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		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated 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	Yes	
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	Yes	

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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.

OMB No 1545-0047

2010

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If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, 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) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization	Employer identification number
FOOD EXPORT ASSOCATION OF THE MIDWEST USA	36-2691663

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 funtion activities ▶ $ _____

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ 0

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 the filing organization made payments 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-

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 on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
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 lines 1c through 1i			0
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	Yes	
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		No

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

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

Identifier	Return Reference	Explanation
NONDEDUCTIBLE DUES	SCHEDULE C, PART III-A, LINE 1	THE ORGANIZATION'S MEMBERSHIP CONSISTS OF THE DEPARTMENTS OF AGRICULTURE OF 12 MIDWESTERN STATES THESE AGENCIES ARE GOVERNMENTAL ENTITIES, THEREFORE, UNDER THE EXCEPTION OF IRC 6033(E)(3) THE ALL DUES PAID BY THE AGENCIES ARE NONDEDUCTIBLE WITH REGARD TO SECTION 162(E)

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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, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FOOD EXPORT ASSOCATION OF THE MIDWEST USA

Employer identification number
36-2691663

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)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–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 taxable 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 easements 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 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 the 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 the 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 Investment earnings or 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				0
b Buildings				0
c Leasehold improvements				0
d Equipment		307,299	285,042	22,257
e Other				0
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				22,257

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

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

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

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

Part IX Other Assets. See Form 990, Part X, line 15.

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

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	0

2. Fin 48 (ASC 740) 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 (ASC740)

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)	1	12,914,532
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,814,214
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	100,318
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	0
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	100,318

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	12,729,320
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	0		
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	12,729,320
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	185,212		
c	Add lines **4a** and **4b**			4c	185,212
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	12,914,532

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

1	Total expenses and losses per audited financial statements			1	12,629,002
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	-185,212		
e	Add lines **2a** through **2d**			2e	-185,212
3	Subtract line **2e** from line **1**			3	12,814,214
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	0		
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	12,814,214

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, 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

Identifier	Return Reference	Explanation
FIN 48 (ASC 740) footnote	Schedule D, Part X, Line 2	FOOD EXPORT - MIDWEST ADOPTED GUIDANCE ISSUED BY THE FASB WITH RESPECT TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AS OF JANUARY 1, 2009 A TAX POSITION IS RECOGNIZED AS A BENEFIT ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WOULD BE SUSTAINED IN A TAX EXAMINATION, WITH A TAX EXAMINATION BEING PRESUMED TO OCCUR THE AMOUNT RECOGNIZED IS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED ON EXAMINATION FOR TAX POSITIONS NOT MEETING THE MORE LIKELY THAN NOT TEST, NO TAX BENEFIT IS RECORDED THE ADOPTION HAD NO EFFECT ON FOOD EXPORT - MIDWEST'S FINANCIAL STATEMENTS
Other revenues in form 990 not in audited financial statements	Schedule D, Part XII, Line 4b	SHARED MANAGEMENT EXPENSE - 185212,
Other expenses in audited financial statements not in form 990	Schedule D, Part XIII, Line 2d	SHARED MANAGEMENT EXPENSE - -185212,

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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

2010

Open to Public Inspection

Name of the organization
FOOD EXPORT ASSOCIATION OF THE MIDWEST USA

Employer identification number
36-2691663

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 V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, 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 for region/investments in region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	ATTENDANCE AND PARTICIPATION AT TRADE SHOWS, FOCUSED TRADE MISSIONS, AND BUYER MISSIONS RELATED TO INCREASING U S AGRICULTURAL SALES	54,882
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	ATTENDANCE AND PARTICIPATION AT TRADE SHOWS, FOCUSED TRADE MISSIONS, AND BUYER MISSIONS RELATED TO INCREASING U S AGRICULTURAL SALES	1,489,510
EUROPE (INCLUDING ICELAND AND GREENLAND)	0	0	PROGRAM SERVICES	ATTENDANCE AND PARTICIPATION AT TRADE SHOWS, FOCUSED TRADE MISSIONS, AND BUYER MISSIONS RELATED TO INCREASING U S AGRICULTURAL SALES	33,055
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	ATTENDANCE AND PARTICIPATION AT TRADE SHOWS, FOCUSED TRADE MISSIONS, AND BUYER MISSIONS RELATED TO INCREASING U S AGRICULTURAL SALES	9,834
NORTH AMERICA (CANADA & MEXICO ONLY)	0	0	PROGRAM SERVICES	ATTENDANCE AND PARTICIPATION AT TRADE SHOWS, FOCUSED TRADE MISSIONS, AND BUYER MISSIONS RELATED TO INCREASING U S AGRICULTURAL SALES	308,346
SOUTH AMERICA	0	0	PROGRAM SERVICES	ATTENDANCE AND PARTICIPATION AT TRADE SHOWS, FOCUSED TRADE MISSIONS, AND BUYER MISSIONS RELATED TO INCREASING U S AGRICULTURAL SALES	260,250
SOUTH ASIA	0	0	PROGRAM SERVICES	ATTENDANCE AND PARTICIPATION AT TRADE SHOWS, FOCUSED TRADE MISSIONS, AND BUYER MISSIONS RELATED TO INCREASING U S AGRICULTURAL SALES	62,103
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			2,217,980

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 . . . . . ▶ ☐
Use Part V 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 . . . . . ▶ _____

3 Enter total number of other organizations or entities . . . . . ▶

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 Part V 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 Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☐ Yes	☑ No

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	ReturnReference	Explanation

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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, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FOOD EXPORT ASSOCATION OF THE MIDWEST USA

Employer identification number
36-2691663

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? . . . ☑ 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. Part II can be duplicated if additional space is needed. . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 0

3 Enter total number of other organizations . . . ▶ 129

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 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.

Identifier	Return Reference	Explanation
Procedures for monitoring use of grant funds	Schedule I, Part I, Line 2	THE ORGANIZATION ADMINISTERS GRANT FUNDS IN COMPLIANCE WITH THE REQUIREMENTS OF THE USDA, AND ALL OTHER STATE AND FEDERAL REGULATORY BODIES TO ENSURE THAT THE GRANTS ARE USED FOR THEIR INTENDED PURPOSES, THE ORGANIZATION CONDUCTS AN INTERNAL REVIEW OF THE GRANTS, AND PARTICIPATES IN AN ANNUAL COMPLIANCE REVIEW OF ITS PROCEDURES AND EXPENDITURES BY THE USDA

Additional Data

Return to Form

Software ID: 10000128
Software Version: v2010.1.0
EIN: 36-2691663
Name: FOOD EXPORT ASSOCATION OF THE MIDWEST USA

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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
AMERICAN POP CORN COMPANYP O BOX 178 SIOUX CITY,IA 51102	42-0113600	N/A	295,558	0	N/A	N/A	MAP PROGRAM
AMMAT INTERNATIONAL WHOLESALE703 IMPERIAL POINT DRIVE LAKE OZARK,MO 65049	20-4082743	N/A	62,086	0	N/A	N/A	MAP PROGRAM
ANAVOX PHARACEUTICALS LLC313 WEST BELTLINE HWY STE 182 MADISON,WI 53713	26-4739035	N/A	12,500	0	N/A	N/A	MAP PROGRAM
ARBORIS LLC1101 W LATHROP AVE SAVANNAH,GA 31415	59-3830188	N/A	32,275	0	N/A	N/A	MAP PROGRAM
ATRIUM RESTURANT GROUP5057 FRANCE AVE S MINNEAPOLIS,MN 554102034	41-1988269	N/A	19,398	0	N/A	N/A	MAP PROGRAM
BELLBOY IMPORT CORPORATION2220 FLORIDA AVE SO ST LOUIS PARK,MN 55426	41-1486622	N/A	5,875	0	N/A	N/A	MAP PROGRAM
BERNATELLO'S PIZZA INC PO BOX 729 MAPLE LAKE,MN 55358	41-1419949	N/A	10,000	0	N/A	N/A	MAP PROGRAM
BLADAN CORPORATIONPO BOX 118 NEW YORK,NY 10021	13-3173687	N/A	65,207	0	N/A	N/A	MAP PROGRAM
BOXER BEVERAGE CO LLC1 S PINCKNEY ST FL 4 MADISON,WI 53703	27-0502497	N/A	534,380	0	N/A	N/A	MAP PROGRAM
BRANDVENTURE GROUP INC3501 N SOUTHPORT AVE 274 CHICAGO,IL 60657	42-1767293	N/A	27,483	0	N/A	N/A	MAP PROGRAM
BUDDYS KITCHEN INC 12105 NICOLLET AVE SO BURNSVILLE,MN 55337	41-1232548	N/A	10,653	0	N/A	N/A	MAP PROGRAM
BUTTER BUDS FOOD INGREDIENTS2330 CHICORY ROAD RACINE,WI 53403	11-2141348	N/A	18,120	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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
CARMI FLAVOR & FRAGRANCE CO910 INDUSTRIAL RD WAVERLY,IA 50677	95-3523969	N/A	72,588	0	N/A	N/A	MAP PROGRAM
CEREAL INGREDIENTS INC 4720 S 13TH STREET LEAVENWORTH,KS 66048	34-1563471	N/A	39,257	0	N/A	N/A	MAP PROGRAM
CITY FOODS INC4230 S RACINE AVE CHICAGO,IL 60609	36-2327829	N/A	21,546	0	N/A	N/A	MAP PROGRAM
CKB MANAGEMENT SERVICES LLC402 GARY LANE JEFFERSON CITY,MO 65109	20-4799255	N/A	60,063	0	N/A	N/A	MAP PROGRAM
CLABBER GIRL CORP900 WABASH AVE BOX 150 TERRE HAUTE,IN 47808	35-2150132	N/A	19,426	0	N/A	N/A	MAP PROGRAM
CLINICAL PRODUCTS LLC 2200 WESTPORT PLAZA DR STE 316 ST LOUIS,MO 63146	16-1765398	N/A	122,465	0	N/A	N/A	MAP PROGRAM
COLBY INTERNATIONAL LLC1967 KAPLAN DR WINDSOR,CO 80550	55-0911457	N/A	8,991	0	N/A	N/A	MAP PROGRAM
COOPERATIVE ELEVATOR COPO BOX 619 PIGEON,MI 487550619	38-0430470	N/A	85,986	0	N/A	N/A	MAP PROGRAM
COUNTRY OVENS LTD229 EAST MAIN ST FORESTVILLE,WI 54213	39-1583709	N/A	7,488	0	N/A	N/A	MAP PROGRAM
DAELIA FOOD COMPANY LTD313 HILTON PLACE CINCINNATI,OH 45219	41-2232209	N/A	13,262	0	N/A	N/A	MAP PROGRAM
DAIRY FARMERS OF AMERICA INC10220 N AMBASSADOR DRIVE KANSAS CITY,MO 64153	43-0905874	N/A	10,839	0	N/A	N/A	MAP PROGRAM
DAIRYCHEM LABORATORIES INC9120 TECHNOLOGY DRIVE FISHERS,IN 46038	35-1884094	N/A	9,565	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
DAKOTA GROWERS PASTA COMPANY INCONE PASTA AVE CARRINGTON,ND 58421	45-0423511	N/A	11,384	0	N/A	N/A	MAP PROGRAM
DAN'S FISH INCPO BOX 641980 PITTSBURG,PA 152641980	39-1797231	N/A	5,609	0	N/A	N/A	MAP PROGRAM
DEERLAND ENZYMES INC 3800 COBB INTERNATIONAL BLVD KENNESAW,GA 30152	20-4140136	N/A	6,874	0	N/A	N/A	MAP PROGRAM
DGB SALES COMPANY1208 14TH STREET MONROE,WI 53566	20-3290628	N/A	300,000	0	N/A	N/A	MAP PROGRAM
DIAMOND V MILLS INC838 1ST STREET NW CEDAR RAPIDS,IA 52405	42-0628408	N/A	24,385	0	N/A	N/A	MAP PROGRAM
DISTINCTIVE FOODS LLC 654 S WHEELING RD WHEELING,IL 600905771	36-4364670	N/A	8,957	0	N/A	N/A	MAP PROGRAM
DIVERSIFIED MARKETING SOLUTION LLCPO BOX 1673 OWASSO,OK 74055	32-0207297	N/A	186,043	0	N/A	N/A	MAP PROGRAM
DOUMAK INC2201 E TOUHY AVE ELK GROVE VILLAGE,IL 600075327	36-3255980	N/A	157,628	0	N/A	N/A	MAP PROGRAM
DREAM PAK LLC2770 SOUTH 171 STREET NEW BERLIN,WI 53151	54-1985805	N/A	10,686	0	N/A	N/A	MAP PROGRAM
DUTCH FARMS INC700 E 107TH STREET CHICAGO,IL 60628	35-1698884	N/A	10,593	0	N/A	N/A	MAP PROGRAM
E FORMELLA AND SONS INC441 E PLAINFIELD RD COUNTRYSIDE,IL 60525	36-3179474	N/A	5,383	0	N/A	N/A	MAP PROGRAM
EARTH HARVEST MILLS INC500 NORTH STREET W HARVEY,ND 58341	04-3707732	N/A	57,691	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
EAST WEST INT'L GROUP INC4920 SOM CENTER RD MORELAND HILLS,OH 44022	20-8872398	N/A	23,512	0	N/A	N/A	MAP PROGRAM
ECO HEAVEN LLC1900 AVE OF THE STARTS 15TH FLOOR LOS ANGELES,CA 90067	11-3820948	N/A	20,040	0	N/A	N/A	MAP PROGRAM
ENM FOODS INTERNATIONAL INC 11860 COMMUNITY ROAD SUITE 100 POWAY,CA 920648879	71-0997394	N/A	299,958	0	N/A	N/A	MAP PROGRAM
EQUITRADE GROUP INC 225 W WASHINGTON STE 2200 CHICAGO,IL 606063561	36-3865350	N/A	36,525	0	N/A	N/A	MAP PROGRAM
EVANGERS DOG & CAT FOOD CO INC221 S WHEELING ROAD WHEELING,IL 60712	36-2416760	N/A	221,240	0	N/A	N/A	MAP PROGRAM
EXCLUSIVELY PET7711 N 81ST STREET MILWAUKEE,WI 53223	39-1761613	N/A	6,282	0	N/A	N/A	MAP PROGRAM
EXPORT MARKETING CORP PO BOX 484 BENSENVILLE,IL 60106	26-2383957	N/A	288,980	0	N/A	N/A	MAP PROGRAM
EXPORT TRADE OF AMERICA44 61 11TH STREET 2ND FL LONG ISLAND CITY,NY 11101	13-3538402	N/A	65,535	0	N/A	N/A	MAP PROGRAM
FARMER ORGANIC FOODS INTERNATIONALPO BOX 23 BLAIR,WI 54616	20-1838316	N/A	27,517	0	N/A	N/A	MAP PROGRAM
FIBERSTAR INC713 SAINT CROIX ST RIVER FALLS,WI 540223600	91-1886061	N/A	91,312	0	N/A	N/A	MAP PROGRAM
FINISH LINE HORSE PRODUCTS INCPO BOX 1000 BENSENVILLE,IL 60106	36-2962016	N/A	20,200	0	N/A	N/A	MAP PROGRAM
FIRST CLASS IMPORTS AND EXPORT1166 E ROCK SPRINGS RD NE ATLANTA,GA 30306	20-1652731	N/A	9,656	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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
FLAX USA INC1661 7TH ST NE GOODRICH,ND 58444	45-0444196	N/A	7,294	0	N/A	N/A	MAP PROGRAM
FROSTY PRODUCTS INC 41160 JOY ROAD PLYMOUTH,MI 48170	35-2253423	N/A	15,745	0	N/A	N/A	MAP PROGRAM
GINSENG AND HERB COOPERATIVE3909 1/2 CTY RD B MARATHON,WI 54448	03-0374040	N/A	8,890	0	N/A	N/A	MAP PROGRAM
GLOBAL DEVELOPMENT AND MANAGEMENT LLC 6058 MONTGOMERY ROAD CINCINNATI,OH 45213	27-1306463	N/A	9,837	0	N/A	N/A	MAP PROGRAM
GOLDEN LINK INC23 HORTON RD WASHINGTONVILLE,NY 10992	06-1482541	N/A	33,197	0	N/A	N/A	MAP PROGRAM
GOOD LIFE FOODS INCPO BOX 22422 LINCOLN,NE 685422422	91-1817034	N/A	338,132	0	N/A	N/A	MAP PROGRAM
GRACELAND FRUIT INC 1123 MAIN STREET FRANKFORT,MI 49635	38-2016646	N/A	88,782	0	N/A	N/A	MAP PROGRAM
GRAIN MILLERS SPECIALTY 10400 VIKING DRIVE SUITE 301 EDEN PRAIRIE,MN 55344	91-1199825	N/A	15,040	0	N/A	N/A	MAP PROGRAM
GRAMINEX LLC95 MIDLAND RD SAGINAW,MI 48638	38-3360436	N/A	10,886	0	N/A	N/A	MAP PROGRAM
HAMMONS PRODUCTS COMPANYPO BOX 140 STOCKTON,MO 65785	44-0581152	N/A	6,485	0	N/A	N/A	MAP PROGRAM
HEARTLAND SWEETENERS LLC14300 CLAY TERRACE BLVD STE 249 CARMEL,IN 46032	20-1938376	N/A	111,928	0	N/A	N/A	MAP PROGRAM
HWD ACQUISITION INCPO BOX 319 MEDFORD,WI 54451	26-3579743	N/A	60,409	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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
IC PRODUCTS LLC1 SOUTH MAIN STREET CHAGRIN FALLS,OH 44022	20-4339568	N/A	15,139	0	N/A	N/A	MAP PROGRAM
INTERNATIONAL MARKETING SERVICES INC 522 4TH STREET SUITE 200 SIOUX CITY,IA 51101	26-4500593	N/A	91,151	0	N/A	N/A	MAP PROGRAM
J&J CORPORATION INC 3260 40TH AVE S SUITE D FARGO,ND 58104	45-0457885	N/A	5,937	0	N/A	N/A	MAP PROGRAM
JA BUTLER COMPANIES INC20573 CTY RD 297 COSBY,MO 64436	41-1993127	N/A	8,132	0	N/A	N/A	MAP PROGRAM
JENEIL BIOTECH INC400 N DEKORA WOODS BLVD SAUKVILLE,WI 53080	39-1805745	N/A	9,655	0	N/A	N/A	MAP PROGRAM
JM GRAIN INC12 NORTH RAILROAD STREET GARRISON,ND 58540	20-3098913	N/A	10,104	0	N/A	N/A	MAP PROGRAM
JM SCHULTZ INVESTMENT CO LLCPO BOX 218 EFFINGHAM,IL 62401	37-1340383	N/A	5,158	0	N/A	N/A	MAP PROGRAM
KENNY B'S COOKIE COMPANYPO BOX 37 NEW GERMANY,MN 55367	41-1966837	N/A	10,334	0	N/A	N/A	MAP PROGRAM
KITCHEN BASICS INC6940 S EDGERTON BRECKSVILLE,OH 44141	34-1832486	N/A	21,264	0	N/A	N/A	MAP PROGRAM
KOEZE COMPANY2555 BURLINGAME AVE SW GRAND RAPIDS,MI 49509	38-2185672	N/A	9,947	0	N/A	N/A	MAP PROGRAM
LAND O' LAKES INC4001 LEXINGTON AVENUE NORTH ARDEN HILLS,MN 55126	41-0365145	N/A	236,509	0	N/A	N/A	MAP PROGRAM
LEE INTERNATIONAL TRADING SERVICES3225 OLD BRAINARD RD PEPPER PIKE,OH 44124	34-1640447	N/A	19,690	0	N/A	N/A	MAP PROGRAM

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

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M A S SALES LTD11225 WEST GRAND AVE NORTHLAKE,IL 60164	36-2809022	N/A	10,174	0	N/A	N/A	MAP PROGRAM
MAMA ROSAS LLC1910 FAIR ROAD SIDNEY,OH 45365	20-5408111	N/A	5,499	0	N/A	N/A	MAP PROGRAM
MASER INDUSTRIES LLC 16931 BELINDER ROAD STILLWELL,KS 660850501	26-0861912	N/A	6,000	0	N/A	N/A	MAP PROGRAM
MASTRONARDI PRODUCE-USA INC6505 COGSWELL ROAD STE 200 ROMULUS,MI 48174	20-3902640	N/A	7,830	0	N/A	N/A	MAP PROGRAM
MIDAMAR CORPORATION 3253 EAST CHESTNUT EXPRESSWAY SPRINGFIELD,MO 65802	42-1244351	N/A	24,097	0	N/A	N/A	MAP PROGRAM
MIDWESTERN PET FOODS INC9634 HEDDEN ROAD EVANSVILLE,IN 47725	35-1058442	N/A	302,091	0	N/A	N/A	MAP PROGRAM
MIES PRODUCTS INC505 COMMERCE STREET WEST BEND,WI 53090	39-0928041	N/A	5,293	0	N/A	N/A	MAP PROGRAM
MORRISON FARMS85824 519TH AVENUE CLEARWATER,NE 68726	47-0652655	N/A	15,107	0	N/A	N/A	MAP PROGRAM
NATIONAL ENZYME COMPANY15366 US HIGHWAY 160 FORSYTH,MO 65653	36-1522557	N/A	28,297	0	N/A	N/A	MAP PROGRAM
NATIONAL PASTEURIZED EGGS LLC2963 BERNICE ROAD LANSING,IL 60438	36-4438561	N/A	11,678	0	N/A	N/A	MAP PROGRAM
NATURAL PRODUCTS INC 2211 6TH AVE GRINNELL,IA 50112	42-1171344	N/A	16,607	0	N/A	N/A	MAP PROGRAM
NEW GRASS ENTERPRISES LLCPO BOX 860033 SHAWNEE,KS 66286	42-1614846	N/A	19,006	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
NIKKI'S COOKIES INC 2018 S 1 ST MILWAUKEE, WI 53207	39-1474554	N/A	41,818	0	N/A	N/A	MAP PROGRAM
NORTHERN MINNESOTA WILD RICE301 TOWER STREET NW CLEARBROOK, MN 566340290	58-1919599	N/A	50,000	0	N/A	N/A	MAP PROGRAM
NORTHLAND ORGANIC FOODS CORP495 PORTLAND AVE SAINT PAUL, MN 55102	41-1758420	N/A	13,289	0	N/A	N/A	MAP PROGRAM
NUTORIOUS LLCPO BOX 28383 GREEN BAY, WI 54324	20-3016620	N/A	15,108	0	N/A	N/A	MAP PROGRAM
OMNIPRO PET CARE LLC PO BOX 278 MADISON, MS 391300278	37-1607540	N/A	24,713	0	N/A	N/A	MAP PROGRAM
ONE BITE SPECIALTY FOODS LLC8602 W 133RD STREET OVERLAND PARK, KS 66213	21-1481393	N/A	8,478	0	N/A	N/A	MAP PROGRAM
ORGANIC VALLEY CROPP CO-OP1 ORGANIC WAY LA FARGE, WI 546396604	39-1605145	N/A	25,081	0	N/A	N/A	MAP PROGRAM
ORGANIC VILLE1200 65TH ST STE 107 EMERYVILLE, CA 94608	54-2153718	N/A	9,440	0	N/A	N/A	MAP PROGRAM
OSKRI ORGANICS INC528 E TYRARENA PARK RD LAKE MILLS, WI 53551	39-1954705	N/A	12,147	0	N/A	N/A	MAP PROGRAM
OXBOW ENTERPRISES INC 29012 MILL ROAD MURDOCK, NE 684072352	47-0711465	N/A	44,935	0	N/A	N/A	MAP PROGRAM
PACIFIC SOYBEAN AND GRAIN INC221 MAIN ST SUITE 888 SAN FRANCISCO, CA 94105	94-2878221	N/A	7,614	0	N/A	N/A	MAP PROGRAM
PAMPERED PET TREATS INC1455 MISS ELLE WAY ALPINE, CA 919013981	41-1776434	N/A	10,215	0	N/A	N/A	MAP PROGRAM

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

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PAPA GEORGEPO BOX 50058 MINNEAPOLIS,MN 55405	41-1979556	N/A	9,475	0	N/A	N/A	MAP PROGRAM
PARKER PRODUCTS INC 2737 TILLAS ST FT WORTH,TX 76107	93-1223321	N/A	56,770	0	N/A	N/A	MAP PROGRAM
PINATA FOODS INC3590 W 58TH ST CLEVELAND,OH 441025663	34-1652229	N/A	11,496	0	N/A	N/A	MAP PROGRAM
PREFERRED POPCORN LLC 1132 9TH ROAD CHAPMAN,NE 68827	47-0809328	N/A	7,878	0	N/A	N/A	MAP PROGRAM
PREMIUM GOLD FLAX PRODUCTS1321 12TH AVENUE NE DENHOFF,ND 58430	75-3023170	N/A	10,733	0	N/A	N/A	MAP PROGRAM
PREMIUM NUTRITIONAL PRODUCTS INC10504 WEST 79TH STREET SHAWNEE,KS 66214	48-1125348	N/A	10,842	0	N/A	N/A	MAP PROGRAM
PS INTERNATIONAL LLC 1414 RALEIGH ROAD STE 205 CHAPEL HILL,NC 27613	27-1577733	N/A	6,176	0	N/A	N/A	MAP PROGRAM
RED ARROW INTERNATIONAL LLCPO BOX 755 MANITOWOC,WI 54220	39-1917822	N/A	286,476	0	N/A	N/A	MAP PROGRAM
REE REE FOODS LLC900 MORSE AVE ELK GROVE VILLAGE,IL 600075108	26-4056366	N/A	200,610	0	N/A	N/A	MAP PROGRAM
RIBUS INC8000 MARYLAND AVE STE 460 ST LOUIS,MO 63105	43-1626254	N/A	19,789	0	N/A	N/A	MAP PROGRAM
ROBERT ROTHCHILD FARM LLC3143 E US HIGHWAY 36 URBANA,OH 430789735	20-2622100	N/A	5,465	0	N/A	N/A	MAP PROGRAM
S P MARKETING INC11100 86TH AVENUE NORTH MAPLE GROVE,MN 55369	41-1701553	N/A	7,437	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
SB AND B FOODS INC 15681 35TH ST SE CASSELTON,ND 58103	45-6451466	N/A	22,747	0	N/A	N/A	MAP PROGRAM
SCHELL AND KEMPETER INCPO BOX 156 META,MO 65058	43-0951994	N/A	182,429	0	N/A	N/A	MAP PROGRAM
SD OIL CO4320 CASANNA WAY APT 1807 OCEANSIDE,CA 920577625	57-0669160	N/A	23,825	0	N/A	N/A	MAP PROGRAM
SHARED VENTURES INC 2808 THOMASON DR MATTOON,IL 61938	41-1906376	N/A	18,156	0	N/A	N/A	MAP PROGRAM
SHORELINE FRUIT GROWERS INC10850 E TRAVERSE HWY STE 4460 TRAVERSE CITY,MI 49684	38-3120635	N/A	70,619	0	N/A	N/A	MAP PROGRAM
SIOUX HONEY ASSOCIATION301 LEWIS BOULEVARD SIOUX CITY,IA 51101	42-0527930	N/A	283,198	0	N/A	N/A	MAP PROGRAM
SK FOOD INTERNATIONAL INC4666 AMBER VALLEY PARKWAY S FARGO,ND 581048612	47-0421017	N/A	22,827	0	N/A	N/A	MAP PROGRAM
SONOMA FARM INC1025 WEST END AVENUE CHICAGO HEIGHTS,IL 60441	02-0772069	N/A	32,793	0	N/A	N/A	MAP PROGRAM
SOY INVESTORS II1210 N 14TH STREET INDIANOLA,IA 50125	26-4017030	N/A	5,070	0	N/A	N/A	MAP PROGRAM
SUNRICH LLCPO BOX 128 HOPE,MN 560460147	41-1945246	N/A	16,685	0	N/A	N/A	MAP PROGRAM
TREEHOUSE BRANDS INC 153 BLUE HERON LANE MARINE ON ST CROIX,MN 55047	26-3140422	N/A	7,545	0	N/A	N/A	MAP PROGRAM
TRUSWEETS LLC648 WHEELING ROAD WHEELING,IL 60090	26-2971546	N/A	5,635	0	N/A	N/A	MAP PROGRAM

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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
US DISTILLED PRODUCTS 25 MAIN STREET SE MINNEAPOLIS,MN 554141024	41-2017672	N/A	40,392	0	N/A	N/A	MAP PROGRAM
VARIED INDUSTRIES CORPPO BOX 1483 MASON CITY,IA 504021483	42-0923693	N/A	120,340	0	N/A	N/A	MAP PROGRAM
WALDRON LLC18220 WALDRON DR WALDRON,MO 640920018	20-3368624	N/A	5,211	0	N/A	N/A	MAP PROGRAM
WEAVER POPCORN COMPANY INC14470 BERGEN BLVD STE 100 NOBLESVILLE,IN 460603377	35-0953313	N/A	128,979	0	N/A	N/A	MAP PROGRAM
WESTERN EXPORT SERVICES INC140 EAST 19TH AVE STE 201 DENVER,CO 80203	84-1163477	N/A	103,711	0	N/A	N/A	MAP PROGRAM
WESTWOOD MARKET LLC 31500 W 13 MILE ROAD 112 FARMINGTON HILLS,MI 48334	20-3535725	N/A	30,049	0	N/A	N/A	MAP PROGRAM
WISCONSIN CRANBERRY CO-OP2110 INDUSTRIAL ST STE A WISCONSIN RAPIDS,WI 54495	39-2041364	N/A	8,750	0	N/A	N/A	MAP PROGRAM
WOEBER MUSTARD MFG CO1966 COMMERCE CIRCLE SPRINGFIELD,OH 45504	31-0816660	N/A	7,493	0	N/A	N/A	MAP PROGRAM
ZETRA USAPO BOX 865 SOMERVILLE,TN 38068	63-1151817	N/A	53,386	0	N/A	N/A	MAP PROGRAM

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FOOD EXPORT ASSOCATION OF THE MIDWEST USA

Employer identification number
36-2691663

Part I Questions Regarding Compensation

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

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) TIMOTHY HAMILTON	(i)	157,324	0	0	9,439	7,280	174,043	0
	(ii)	0	0	0	0	0	0	0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
QUESTIONS REGARDING COMPENSATION	SCHEDULE J, PART I, LINES 1-2	THE ORGANIZATION DOES NOT PROVIDE ANY OF THE BENEFITS LISTED IN SCHEDULE J, PART I, LINE 1, THEREFORE, THESE QUESTIONS ARE NOT APPLICABLE AND HAVE BEEN INTENTIONALLY LEFT BLANK

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
FOOD EXPORT ASSOCATION OF THE MIDWEST USA

Employer identification number
36-2691663

Identifier	Return Reference	Explanation
NON-DEDUCTIBLE CONTRIBUTIONS	FORM 990, PART V, LINE 6A	THE ORGANIZATION'S SOLE CONTRIBUTOR IS A GOVERNMENTAL ENTITY, THEREFORE, DEDUCTIBILITY OF CONTRIBUTIONS RECEIVED IS NOT RELEVANT

Identifier	Return Reference	Explanation
Classes of members or stockholders	Form 990, Part VI, Section A, Line 6	THE ORGANIZATION'S MEMBERSHIP CONSISTS OF THE DEPARTMENTS OF AGRICULTURE OF 12 MIDWESTERN STATES EACH MEMBER HAS THE RIGHT TO DELEGATE A MEMBER OF THE GOVERNING BODY TO SIT ON THE BOARD ON ITS BEHALF UPON DISSOLUTION UNDER THE LAWS OF THE STATE OF ILLINOIS, ASSETS SHALL BE APPLIED FIRST TO THE PAYMENT OF DEBTS AND SECOND AS A PRO RATA RETURN TO REGULAR MEMBERS BASED ON PAST FEES AND ASSESSMENTS ANY REMAINING ASSETS MAY BE RELEASED TO AN ORGANIZATION FULFILLING AS NEARLY AS POSSIBLE THE PURPOSES FOR WHICH FOOD EXPORT - MIDWEST WAS ORGANIZED

Identifier	Return Reference	Explanation
Review of form 990 by governing body	Form 990, Part VI, Section B, Line 11b	PRIOR TO FILING THE RETURN WITH THE IRS, A DRAFT OF THE COMPLETED FORM 990 IS REVIEWED BY THE ORGANIZATION'S INTERNAL MANAGEMENT AND ITS INDEPENDENT PAID TAX PREPARERS AFTER REVIEW, COPIES OF THE FINAL FORM 990 ARE DISTRIBUTED TO THE BOARD SECRETARY/TREASURER FOR REVIEW, AND SUBSEQUENTLY FILED WITH THE IRS

Identifier	Return Reference	Explanation
Conflict of interest policy	Form 990, Part VI, Section B, Line 12c	THE ORGANIZATION HAS DEVELOPED AND IMPLEMENTED A CONFLICT OF INTEREST / FRAUD DETECTION POLICY AS PART OF THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, A QUESTIONNAIRE IS DISTRIBUTED TO THE ORGANIZATION'S INTERESTED PERSONS (OFFICERS, DIRECTORS, TRUSTEES, KEY EMPLOYEES), ON AN ANNUAL BASIS, TO IDENTIFY ANY ISSUES OF CONFLICT THAT MAY HAVE ARISEN ADDITIONALLY, PROACTIVE QUESTIONS ARE ASKED DURING ANY FINANCIAL DECISION-MAKING PROCESS TO ENSURE APPROPRIATE STEPS (RECUSAL, INELIGIBILITY TO BID, ETC) ARE TAKEN THE ORGANIZATION'S DEPUTY DIRECTOR AND THE EXECUTIVE DIRECTOR INITIALLY REVIEW THE QUESTIONNAIRES TO DETERMINE IF ANY POTENTIAL OR ACTUAL CONFLICTS OF INTEREST EXIST WITH THE ORGANIZATION IF IT IS DETERMINED A POTENTIAL OR ACTUAL CONFLICT OF INTEREST EXISTS, THEY DEFER THE MATTER TO THE BOARD BASED ON THE NATURE OF THE ACTIVITY THE BOARD WILL DETERMINE THE APPROPRIATE ACTION STEPS TO DETERMINE WHETHER OR NOT THE TRANSACTIONS CONSTITUTES A CONFLICT AND THE RESTRICTIONS TO BE IMPOSED ON PERSONS WITH A CONFLICT

Identifier	Return Reference	Explanation
Process used to establish compensation of top management official	Form 990, Part VI, Section B, Line 15a	A PERSONNEL SUBCOMMITTEE OF THE BOARD OF DIRECTORS, COMPRISED OF THE BOARD PRESIDENT, PAST PRESIDENT, AND 3 OTHER MEMBERS, CONDUCTS A FORMAL REVIEW ANNUALLY OF THE EXECUTIVE DIRECTOR THAT INCLUDES A COMPENSATION REVIEW AS PART OF THAT PROCESS THE BOARD PERSONNEL COMMITTEE REVIEWS ORGANIZATIONAL GOALS VS RESULTS, INDIVIDUAL GOALS VS RESULTS, AND SALARY SURVEYS/REPORTS WITH DATA ON COMPENSATION FOR SIMILARLY EMPLOYED INDIVIDUALS THIS PROCESS LAST OCCURRED IN JANUARY 2010, AND WAS DOCUMENTED IN A TIMELY MANNER

Identifier	Return Reference	Explanation
Public Disclosure	Form 990, Part VI, Section C, Line 19	FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST POLICIES ARE NOT REQUIRED DISCLOSURES PURSUANT TO INTERNAL REVENUE CODE (IRC) SECTION 6104 THESE DOCUMENTS ARE NOT AVAILABLE TO THE PUBLIC AT THIS TIME

Identifier	Return Reference	Explanation
COMPENSATION OF OTHER OFFICERS AND KEY EMPLOYEES	FORM 990, PART VI, LINE 15B	THE ORGANIZATION DOES NOT HAVE ANY OTHER OFFICERS OR KEY EMPLOYEES PER THE IRS' DEFINITION, THEREFORE THIS LINE HAS BEEN CHECKED "NO "

Identifier	Return Reference	Explanation
TOP MANAGEMENT OFFICIAL	FORM 990, PART VII, LINE SECTION A	PER THE ORGANIZATION'S GOVERNING DOCUMENTS AND THE STATE LAW THE ORGANIZATION IS INCORPORATED IN, THE EXECUTIVE DIRECTOR IS NOT AN OFFICER OF THE ORGANIZATION HOWEVER, PURSUANT TO THE IRS' DEFINITION OF TOP MANAGEMENT OFFICIAL, THE EXECUTIVE DIRECTOR HAS BEEN REPORTED IN PART VII OF THE FORM 990