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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)

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements rear, or tax year beginning and ending

2010

Open to Public Inspection

A	For the	2010 calendar year, or tax year beginning and e	ending						
В	Check if	C Name of organization		D Employer identifi	cation number				
	applicable	RURAL ADVANCEMENT FOUNDATION							
Г	Addres	S T100001100110111		1					
늘	Name	David Business As		56_1	704863				
F	lchang		Doom/ourto						
늗	return Termir	,	Room/suite	E Telephone numbe	•				
Ļ	ated	FO BOX 040		919-542-1396					
Ļ	Ameno	City or town, state or country, and ZIP + 4		G Gross receipts \$	1,346,196.				
L	Applic	PITISBURU, NC 2/312		H(a) Is this a group re	eturn				
	pendir	F Name and address of principal officer: ARCHIE HART		for affiliates?	Yes X No				
		SAME AS C ABOVE		H(b) Are all affiliates inc	cluded? Yes No				
$\overline{}$	Tax-exe	mpt status: X 501(c)(3)	or 527	If "No." attach a	list. (see instructions)				
		e: ► WWW.RAFIUSA.ORG		H(c) Group exemptio	•				
		organization: X Corporation Trust Association Other	I Vear		A State of legal domicile: NC				
	art I	Summary	_ <u>  L 1001</u>	oriorination. 2330[h	or orace or regar dominente. 14C				
Ŀ	<del> </del>	Briefly describe the organization's mission or most significant activities. THE	OTTO A T	A DULA NICEMENIO	EOIDIDAGION				
ö	1	· · · · · · · · · · · · · · · · · · ·							
Ē		<del></del>		ES AND COMM	<del></del>				
Governance	2	Check this box   If the organization discontinued its operations or dispos	ed of more	than 25% of its net as					
<u> </u>	3	Number of voting members of the governing body (Part VI, line 1a)	-	3	9				
∞ ∞		Number of independent voting members of the governing body (Part VI, line Vib) 💭	FIVE	4	8				
Se	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	THE REAL PROPERTY.	5	20				
į	6	Total number of volunteers (estimate if necessary)	9 9 201		16				
Activities	7 a	Fotal unrelated business revenue from Part VIII, column (C), line 12	+ + 401	7a	0.				
⋖	, h	Net unrelated business taxable income from Form 990-T, line 34		181 7b	0.				
_	<del>                                     </del>		EN In	Prior Year	Current Year				
	8	Contributions and grants (Part VIII, line 1h)		701,785.	642,590.				
Revenue				774,457.	663,390.				
Ver	9	Program service revenue (Part VIII, line 2g)	·  -						
æ	10	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		5,081.	4,504.				
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	_	30,596.	26,396.				
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,511,919.	1,336,880.				
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.				
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.				
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,012,158.	999,705.				
use	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.				
Expenses	b	Fotal fundraising expenses (Part IX, column (D), line 25)	39.						
ñ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		639,678.	671,412.				
		Fotal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		1,651,836.	1,671,117.				
		Revenue less expenses Subtract line 18 from line 12		-139,917.	-334,237.				
<u>_</u> 6	3 3	nevenue less expenses Subtract line to nontline 12	- Pa						
ts		F. 1 (D. 1) (D. 1) (1.1)	DE	ginning of Current Year	End of Year				
Net Assets or	20	Fotal assets (Part X, line 16)	<u> </u>	2,031,863.	1,763,050.				
et A	21	Total liabilities (Part X, line 26)	<b>⊢</b>	184,678.	247,610.				
	22_	Net assets or fund balances Subtract line 21 from line 20		1,847,185.	1,515,440.				
_		Signature Block							
		ties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is				
tru	е, соггес	, and complete. Declaration of preparer (other than officer) is based on all information of whi	ich preparer	has any knowledge,	L				
		Kathy Zaunseil		415	<u> </u>				
Sig	gn	Signature of officer		Date .					
He	re	★ KATHY ZAUMSEIL, DIRECTOR OF ADMINISTRA	MOITA						
		Type or print name and title							
		Print/Type preparer's name Preparer's signature	. [	Date Check	PTIN				
₁ Pai	id	Robin Mc Duffie reun Mc Dux	11	self-employ	ed				
-	parer	Firm's name BLACKMAN & SLOOP, CPAS, P.A.		Firm's EIN					
<u>.</u>	e Only			FILITI S EIN					
. U8(	UIIIY			DE /	010\040 0700				
_		CHAPEL HILL, NC 27517		Phone no. (	919)942-8700				
Ma	ry the IF	S discuss this return with the preparer shown above? (see instructions)			X Yes No				
					Larm WHI 1 /0010\				

Forn	n 990 (2010) INTERNATIONAL - USA	<u>56-1704863</u>	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Bnefly describe the organization's mission		
•	THE RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA CUI	ር.ምፕኒፖልጥፑሮ	
			TTOM
	MARKETS, POLICIES AND COMMUNITIES THAT SUPPORT THRIVING	, SOCIALLY J	UST_
	AND ENVIRONMENTALLY SOUND FAMILY FARMS.		
		<u> </u>	
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	X No
	If "Yes," describe these new services on Schedule O		
2	Did the organization cease conducting, or make significant changes in how it conducts, any program services?		X No
3		tes	IAJ 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 exp	penses	
	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 \$313,631. including grants of \$) (Re	evenue \$ 194.	708.)
	FARM SUSTAINABILITY PROGRAM: RAFI PROMOTES POLICIES THAT		
	SUPPORT THRIVING AND SUSTAINABLE SMALL AND MID-SCALE FAM		WE
			ME
	PROVIDE INDIVIDUAL COUNSELING AND ASSISTANCE TO FARMERS		
	<u> </u>	SUMING CASEW	
	THE LIMITED-RESOURCE FARMERS RAFI COUNSELS ARE ON THE BE	RINK OF LOSI	NG
	THE FARM WITHOUT RAFI'S IMMEDIATE SUPPORT. OUR ADVOCACY	HELPS FARME	RS
	SAVE OR GAIN ASSETS TOTALING OVER \$3 MILLION EACH YEAR.	RAFI ALSO	
	EDUCATES FARMERS ABOUT RISK MANAGEMENT PROGRAMS AND WORK		!
	FARMER-FRIENDLY POLICIES AND PROGRAMS. IN PARTNERSHIP WI		
	CAROLINA COUNCIL OF CHURCHES, RAFI ALSO ADMINISTERS "CON		
	A PROJECT WORKING WITH PEOPLE OF FAITH IN NORTH CAROLINA	A TO RELIEVE	<u> </u>
	HUNGER AND SUPPORT LOCAL FARMS.		
4b	(Code) (Expenses \$ 398,858. including grants of \$) (Re	evenue \$	)
	TOBACCO COMMUNITIES AND AG ENTERPRISE DEVELOPMENT PROGRA	AM: THE TOBA	CCO
	COMMUNITIES REINVESTMENT FUND PROVIDES SMALL COST-SHARE	GRANTS TO	
		NING AWAY FR	OM
	TOBACCO AND OTHER COMMODITIES TO NEW FARM-BASED ENTERPRI		.011
			δ,
		FOR NORTH	
	CAROLINA'S FARMERS AND RURAL COMMUNITIES. IN 2010 THE PR		ED
	GRANTS TOTALING \$1.2 MILLION FOR 120 NEW FARMER AND COMM	YTINUN	
	DEMONSTRATION PROJECTS THROUGHOUT NORTH CAROLINA. THE PR	ROGRAM ALSO	
	PROMOTES KNOWLEDGE-TRANSFER THROUGH FARMER-TO-FARMER SHA		AS
	AND RESOURCES AND BY USING TECHNOLOGY AND NEWSLETTERS TO		1110
	LINKAGES AND INFORMATION DISSEMINATION.	CKEATE	
		. 100	261
4c		evenue \$199,	
	JUST FOODS PROGRAM: THE JUST FOODS PROGRAM IS WORKING TO		
	SUSTAINABLE FOOD AND FIBER SYSTEM THAT INCORPORATES ORGA	ANIC INTEGRI	TY,
	AGRICULTURAL BIODIVERSITY AND SOCIAL JUSTICE. THE JUST	FOODS PROGR	AM
	CREATES MEANINGFUL STANDARDS AND CERTIFICATION PROGRAMS		
	MARKET OPPORTUNITIES THAT PROVIDE A FAIR PRICE FOR FARME		
	· · · · · · · · · · · · · · · · · · ·		
			10
	PROMOTE AND MAINTAIN THE INTEGRITY OF THE ORGANIC MARKET		
	REINVIGORATE PUBLIC BREEDING OF ORGANIC SEED. STRATEGIE		
	INCLUDE RESEARCH, ANALYSIS, EDUCATION, ADVOCACY AND COAL	LITION-BUILD	ING.
			<del></del>
		•	
4d	Other program services (Describe in Schedule O)	_	
	(Expenses \$ 205,428 · including grants of \$ ) (Revenue \$ 64,60	)7 <b>.</b> )	
<u>4e</u>	Total program service expenses ► 1,376,984.		
		Form <b>9</b> 5	90 (2010)
03200 12-21			. ,

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Form 990 (2010) INTERNATIONAL - USA
Part IV Checklist of Required Schedules

	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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		
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		Х
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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		х
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		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	x	
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		х
С	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		х
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	x	
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		х
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		_ X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a		20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		L
		Form	990 c	2010)

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Part IV Checklist of Required Schedules (continued) Yes No 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 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, X column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete X Schedule J . . . 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 X 24a 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 X 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 X Schedule L. Part I 25b 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 X 26 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 X Schedule L. Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b 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 X 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X contributions? If "Yes," complete Schedule M 30 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II X 32 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 X 33 Was the organization related to any tax-exempt or taxable entity? X If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization? If "Yes," complete Schedule R, Part V, line 2 X 36 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 Х 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Form **990** (2010)

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2010) INTERNATIONAL - USA

Part V Statements Regarding Other IRS Filings and Tax Compliance Form 990 (2010)

	Check if Schedule O contains a response to any question in this Part V			
_			Yes	No
12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		res	NO
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			$\overline{}$
	filed for the calendar year ending with or within the year covered by this return 2a 20			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	ĺ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
За		За		Х
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		X
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		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С		5c		
6a				
	any contributions that were not tax deductible?	6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7	Organizations that may receive deductible contributions under section 170(c).	6b		<del></del>
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		x
b	remote that the second of the	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	, <u>, , ,</u>		
•	to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			1
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		<del> </del>
	Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter.	9b		<del></del>
10	Initiation fees and capital contributions included on Part VIII, line 12			
a 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.			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.			
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			
				7
	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14a		X
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990	(2010)

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

	to line da, ob, or too below, describe the circumstances, processes, or changes in ochequie o. dec manacitoris.			77
500	Check if Schedule O contains a response to any question in this Part VI			X
<u> </u>	tion A. Governing Body and Management		Yes	
1a	Enter the number of voting members of the governing body at the end of the tax year	٥	165	No
b		8		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	<b>၂</b>		
~	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
J	of officers, directors or trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u>x</u> _
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
, u	governing body?	7a		x
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
Ū	by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	<u> </u>		
J	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	The second production of the second s		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
	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	ò	
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	Х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e for		
	public inspection. Indicate how you make these available. Check all that apply			
	X Own website X Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ncial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	ation: 🕨	·	
	KATHY ZAUMSEIL - 919-542-1396			
	PO BOX 640, PITTSBORO, NC 27312			

032006 12-21-10 Form **990** (2010)

# 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. 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.

(A)	(B)							(D)	(E)	(F)
Name and Title	Average	١		Pos				Reportable	Reportable	Estimated
	hours per week (describe hours for related organizations in Schedule O)	rustee or director	netitutional trustee	all		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
KATHRYN J. WALLER										
BOARD MEMBER	1.00	X				$oxed{oxed}$		0.	0.	0_
ARCHIE HART					l					
PRESIDENT	1.00	X		X		$oxed{oxed}$		0.	0.	0
FLOYD B. MCKISSICK, JR.										
TREASURER	1.00	X		X				0.	0.	0
DR. ALTON THOMPSON										
BOARD MEMBER	1.00	X				Ш		0.	0.	0
TOM TRANTHAM									_	_
BOARD MEMBER	1.00	X			ļ			0.	0.	0
HELEN VINTON	4 00									
BOARD MEMBER	1.00	X			ļ			0.	0.	0
RANDI ROTH	1 00	٠,,			İ				•	•
BOARD MEMBER	1.00	X	-		-			0.	0.	0
ALEX HITT	1 00	v		v					0	^
VICE PRESIDENT	1.00	Α		X		$\vdash$		0.	0.	0
SALLY LEE	40.00	v						37,074.	o .	8,418
STAFF REPRESENTATIVE	40.00	Α			-	$\vdash$		31,014.	0.	0,410
KATHY ZAUMSEIL SECRETARY	40.00			x				67,333.	0.	9,250
LINDA SHAW	40.00			21			-	07,333.	0.	5,250
EXECUTIVE DIRECTOR	40.00			X				67,333.	0.	7,728
ROBIN ITEN PORTER								, , , , , , , , , , , , , , , , , , , ,		
FINANCIAL OFFICER	40.00			x				38,887.	0.	11,442
							_			000,001

Form **990** (2010)

Form 990 (2010) IN	TERNATIONAL -	- U	<u>SA</u>						56-1	70 <u>48</u>	63	Page 8
Part VII Section A. Officers, D	Directors, Trustees, Key	Empl	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)			
· (A)	(B)			-	C)			(D)	(E)	T	(	 F)
Name and title	Average			Pos				Reportable	Reportable			nated
	hours per	(c	heck	( all	that	appl	y)	compensation	compensatio	n	amo	unt of
	week	E						from	from related			her
	(describe	ale et						the	organizations			ensation
	'hours for related	90	stee			safe		organization	(W-2/1099-MIS	(C)		n the
	organization	ig s	aftru		yee	Ē		(W-2/1099-MISC)			•	ization elated
	ın Schedul		Institutional trustee	<sub>15</sub>	Key emptoyee	est	ĕ					zations
	O)	盲	Insti	Officer	ě.	Highest compensated employee	5				0.94	
		+										
		+-										
		+	-		_							
					ļ							
						$\vdash$				<u> </u>		
										ŀ		
						Н						
dh Cub total						Ļ		210,627.		0.	36	,838.
1b Sub-total c Total from continuation shee		•••••	•					0.		0.		, <u>030.</u> 0.
d Total (add lines 1b and 1c)	ets to Part VIII, Section A	•••						210,627.		0.	36	,838.
2 Total number of individuals (in	cluding but not limited to	those	liste	ed al	bove	e) wh	o re		) 000 in reportable			,030.
compensation from the organi	~ .			, u u.		<b>5,</b>			,,000			. 0
									_		Y	es No
3 Did the organization list any fo			e, key	y em	plo	yee, o	or h	nighest compensated er	nployee on			
line 1a? If "Yes," complete Sch										·	3	<u> X</u>
4 For any individual listed on line and related organizations grea									the organization			x
5 Did any person listed on line 1			-						idual for services	-	4	<del> ^</del>
rendered to the organization?							, ici	ca organization of marv	idual for Services		5	x
Section B. Independent Contracto			0, 0.		<del>, , , , , , , , , , , , , , , , , , , </del>	,0,,						
Complete this table for your fix the organization.	ve highest compensated i	ndep	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of com	pensat	tion fro	m
the organization	(A)							(B)			(C)	
Name a	and business address							Description of s	services	Co	mpens	ation
STEVE ETKA												
1301 HANCOCK AVENU	E, ALEXANDRIA	1, 1	VA_	22	230	01	_(	CONSULTING/L	OBBYING		103	<u>,726.</u>
											_	
							$\dashv$					
							4					
2 Total number of independent of		not li	mite	d to	tho	se lis 1	ted	l above) who received n	nore than			
\$100,000 in compensation fro	in the organization	-				<u> </u>	-			F	orm <b>9</b> 9	<b>90</b> (2010)

Form 990 (2010)

INTERNATIONAL - USA

Pa	rt VII	Statement of Rever	nue		<del></del>			<del></del>
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
ts ts	1 a	Federated campaigns	1a					
듣	b	Membership dues	1b					
ğ,ξ	С	Fundraising events	1c					
# E		Related organizations	1d					İ
3,5		Government grants (contribut						
ie ie		All other contributions, gifts, gran						
돌	-	similar amounts not included abo	· I I	642,590.				
들	a	Noncash contributions included in lines		<u> </u>				
Contributions, gifts, grants and other similar amounts	-	Total. Add lines 1a-1f			642,590.			
$\neg$		70	-	Business Code				
ا يو	2 a	SRV CONTRACTS &	HONORA	900099	663,390.	663,390.		
ş	b					33373333		
용필	c		<u> </u>	-				
E 8	d							
Program Service Revenue	-							<del>                                     </del>
품	f	All other program service reve	enue					
	a	Total. Add lines 2a-2f		<b>•</b>	663,390.			
$\neg$	3	Investment income (including	dividends, inter	est, and			-	
		other similar amounts)			4,504.			4,504.
	4	Income from investment of ta	x-exempt bond ;	oroceeds >				
ľ	5	Royalties		•				
		•	(ı) Real	(II) Personal				
	6 a	Gross Rents	35,712.					
	b	Less: rental expenses	9,316.					
	С	Rental income or (loss)	26,396.					
		Net rental income or (loss)	· · · · · · · · · · · · · · · · · · ·	<b>&gt;</b>	26,396.			26,396.
		Gross amount from sales of	(i) Securities	(ii) Other		_		
		assets other than inventory				]		
	b	Less: cost or other basis						
		and sales expenses						
	С	Gain or (loss)						
	d	Net gain or (loss)		<b></b>				
as a	8 a	Gross income from fundraisin	g events (not					
Other Revenue		including \$	of					
eve		contributions reported on line	1c) See					
<u>ام</u>		Part IV, line 18	а					
₩	b	Less direct expenses	b					
٥	С	Net income or (loss) from fund	draising events					
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19	а			}		
	b	Less direct expenses	b			]		
	С	Net income or (loss) from gam	ning activities					
	10 a	Gross sales of inventory, less	returns					
		and allowances .	а					-
	b	Less cost of goods sold	b					
Į	С	Net income or (loss) from sale	s of inventory	▶				ļ
Į		Miscellaneous Revenu	e	Business Code				
1	11 a							
	b							<u> </u>
	С		<u>.                                    </u>					
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>•</b>				
لـــــ	12_	Total revenue. See instructions.			1,336,880 <b>.</b>	663,390.	0	
03200	9 -10							Form <b>990</b> (2010)

#### Part IX | Statement of Functional Expenses

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

	All other organizations must com	, ,,,,	ations must complete all a not required to complet		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				-
_	the U.S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	220,802.	137,903.	68,728.	14,171.
6	Compensation not included above, to disqualified				<u> </u>
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	590,164.	507,440.	1,888.	80,836.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	188,739.	161,945.	1,512.	25,282.
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting .				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	<del></del>			
f	Investment management fees				····
g	Other	37,298.	7,309.	28,452.	1,537.
12	Advertising and promotion		10.050		
13	Office expenses	20,370.	13,262.	1,731.	<u>5,377.</u>
14	Information technology				
15	Royalties	22 140	15 686	1.5 0.54	1 000
16	Occupancy	33,140.	15,676.	16,264.	1,200.
17	Travel	115,370.	111,809.		3,561.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	20,830.	16,799.	3,025.	1 006
19	Conferences, conventions, and meetings	20,030.	10,733.	3,023.	1,006.
20	Interest			<del></del>	<del> </del>
21 22	Depreciation, depletion, and amortization	29,905.	16,236.	9,610.	4,059.
23	Insurance	4,704.	10,230.	4,704.	<u> </u>
24	Other expenses. Itemize expenses not covered	4,7046		<u> </u>	<del></del>
	above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A)			ļ	
	amount, list line 24f expenses on Schedule 0.)	311,726.	207 531	315.	2 000
_	CONSULTANTS ORGANIZATIONAL CONTRACT		307,521.	313.	3,890.
b	ORGANIZATIONAL CONTRACT	38,960.	38,960.	1 542	E 0.7
C	COMMUNICATIONS  DRINGING AND CODVING	25,131. 15,257.	23,002. 9,130.	1,542. 754.	587. 5,373.
d	PRINTING AND COPYING	15,257.	6,836.	6,644.	1,000.
e	EQUIPMENT/MAINTENANCE	4,241.	3,156.	225.	860.
f 25	All other expenses Add lines 1 through 24f	1,671,117.	1,376,984.	145,394.	148,739.
<u>25</u>	Total functional expenses. Add lines 1 through 24f  Joint costs Check here   If following SOP	<u> </u>	1,3/0,304.	140,074.	140,133.
26	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				
					000

Form **990** (2010)

Pa	rt X	Balance Sheet	_		
	,		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	162,318.	1	106,485.
	2	Savings and temporary cash investments	480,968.	2_	489,303.
	3	Pledges and grants receivable, net	355,220.	3	175,682.
	4	Accounts receivable, net	131,772.	4	98,477.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
	İ	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			
S		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventones for sale or use .		8	
	9	Prepaid expenses and deferred charges	2,863.	9	11,529.
	10a	· · · · · · · · · · · · · · · · · · ·			
		basis Complete Part VI of Schedule D 10a 1,129,630.	225 224		
	1	Less accumulated depreciation . 10b 260,994.	887,391.	10c	868,636.
	11	Investments · publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	······································
	13	Investments - program-related. See Part IV, line 11		13_	<del></del>
	14	Intangible assets	11 221	14	12 020
	15	Other assets. See Part IV, line 11	11,331. 2,031,863.	15	12,938.
	16_	Total assets. Add lines 1 through 15 (must equal line 34)	77,482.	16 17	1,763,050. 174,487.
	17	Accounts payable and accrued expenses  Grants payable	11,402.	18	1/4/40/•
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	-	21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
ii ii		highest compensated employees, and disqualified persons Complete Part II	-		
<u>:</u>		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	<del></del>
	24	Unsecured notes and loans payable to unrelated third parties		24	<del>-</del>
	25	Other liabilities Complete Part X of Schedule D	107,196.	25	73,123.
	26	Total liabilities. Add lines 17 through 25	184,678.		247,610.
		Organizations that follow SFAS 117, check here			
တ္တ		lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	1,457,157.	27	1,213,513.
ala	28	Temporanly restricted net assets	390,028.	28	301,927.
DG E	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117, check here   and			
9		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
Z	33	Total net assets or fund balances	1,847,185.	33	1,515,440.
	34	Total liabilities and net assets/fund balances	2,031,863.	34	1,763,050.

Form **990** (2010)

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

X Consolidated basis Both consolidated and separate basis 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

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.

separate basis, consolidated basis, or both

Separate basis

Act and OMB Circular A-133?

Form **990** (2010)

За

 $\mathbf{x}$ 

 $\mathbf{x}$ 

No

X

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Name of t	the organizat	ion RURAL A	DVANCEMENT F	OUNDA	TION			E	mployer i	dentificati	on numb	er
			TIONAL - USA						56	<u>-1704</u>	863	
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t) See ins	tructions.				
The organ	zation is not a	a private foundation	because it is (For lines	1 through	11, check	only one b	ox.)					
1 🖳	A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(i)	).				
2 🖳	A school des	cnbed in section 17	<b>'0(b)(1)(A)(ii).</b> (Attach Sc	hedule E.)								
з 🖳	A hospital or	a cooperative hospi	tal service organization (	described	ın section	170(b)(1)	(A)(iii).					
4 📖	A medical res	search organization	operated in conjunction	with a hos	pital desci	ribed in <b>se</b>	ction 170	(b)(1)(A)(i	ii). Enter th	ne hospital	's name,	
_	crty, and stat											
5 📖	_		benefit of a college or u	niversity o	wned or op	perated by	a governi	mental un	rt describe	d ın		
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6 🖳	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1	I)(A)(v).					
7 LX	•	•	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	e general p	ublic desc	ribed in	
		<b>(b)(1)(A)(vi).</b> (Comple										
8 🖳			section 170(b)(1)(A)(vi).									
9 📖	•	•	eives <sup>.</sup> (1) more than 33						•	_	•	
		•	nctions - subject to certa	•		•			• • •	•		
			axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anızatıon a	iter June 3	10, 1975.	
		<b>509(a)(2).</b> (Complete										
10	-	•	perated exclusively to te	•	-			-			_	
11 🗀	•	•	perated exclusively for the							•		
	-		ations described in secti				2) See sec	ction 509	(a)(3). Che	ck the box	that	
		<u> </u>	organization and compl		•					T	<b>046</b>	
- [	a Type		_ ,,	• •	e III - Fund	•	-	r mara dia		Type III - (		
e	, ,	•	at the organization is not		•	•	•					
		•	han one or more publicly		-				e(a)(1) or s	ection 508	ı(a)(∠)	
f			tten determination from t	ine ino ini	atitisa iy	pe i, Type	ii, or Type	# III			Г	
_		rganization, check th	organization accepted ar		ontributuor	from any	of the follo		 reane?	• •		
g			lirectly controls, either al			-					Yes N	No.
	•	•	upported organization?	one or tog	etrie: with	persons c	iescribed	iii (ii) aria	(III) DEIOW,	11g(i)	TES IN	10
	•	•	n described in (i) above?	••	• •		• •••					
	,,	•	person described in (i) o		۵?	•	•	• •		11g(iii)		—
h	` '	•	about the supported or	• •			• •			[ 1 1 <u>9(111)</u>	<del></del>	—
••	Trovido ano i	onowing intermediation	about the supported of	gameanom	(0).							
(i) Nama	of numberted	/::\ EIN	(iii) Type of	(iv) Is the o	organization	(v) Did voi	ı notify the	(vi)	s the	(vii) An	nount of	_
	of supported anization	l (ii) EIN	organization		sted in your			organizatı (i) organi	on in col. l		port	
Oi ge	31112411011		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	support?	U.S	5.7	Oup	POIL	
			(see instructions))	Yes	No	Yes	No	Yes	No			
	-				i							
								<u></u>				
									<u> </u>			
									1			
									1			
					1							
<u>Totai</u>					L			<u> </u>				
LHA For P	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedu	le A (Form	990 or 99	30-EZ) 20	<b>)10</b>

032021 12-21-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010 INTERNATIONAL - USA

(Form 990 or 990-EZ) 2010 INTERNATIONAL - USA 56-1704863 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III )

	tion A. Public Support						
Caler	idar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")	1194994.	1362911.	1447501.	701,785.	642,590.	5349781.
2	Tax revenues levied for the organ-						
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1194994.	1362911.	1447501.	701,785.	642,590.	5349781.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly		:				
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,			i			
	column (f)						1386370.
	Public support. Subtract line 5 from line 4						3963411.
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
-	Amounts from line 4	1194994.	1362911.	1447501.	701,785.	642,590.	5349781.
	Gross income from interest,						
	dividends, payments received on				:		
	securities loans, rents, royalties	05 505	24 065	27 041	25 526	40 016	150 555
	and income from similar sources	25,507.	34,265.	37,041.	35,726.	40,216.	172,755.
_	Net income from unrelated business						
	activities, whether or not the		-		- 1		
	business is regularly carried on		<del></del>				
	Other income Do not include gain					-	
	or loss from the sale of capital						
	assets (Explain in Part IV.)						EE22E26
	Total support. Add lines 7 through 10					40 1	5522536.
	Gross receipts from related activities,						<u>,990,424.</u>
13	First five years. If the Form 990 is for		nrst, second, triir	u, lourill, or lilill ta	ix year as a sectio	11 50 1(0)(3)	ightharpoonup
Sec	organization, check this box and stor tion C. Computation of Publ	ic Support Pe	rcentage		-	<del></del>	
	Public support percentage for 2010 (i			olumn (fl)		14	71.77 %
	Public support percentage from 2009					15	74.67 %
	33 1/3% support test - 2010. If the o			 Ine 13. and line 1	 4 is 33 1/3% or m		
.00	stop here. The organization qualifies					,	<b>►</b> X
b	33 1/3% support test - 2009. If the o				Iine 15 is 33 1/3%	or more, check th	
_	and stop here. The organization qual	-				·	
17a	10% -facts-and-circumstances tes				13, 16a, or 16b, a	nd line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					J	ightharpoons
b	10% -facts-and-circumstances tes					7a, and line 15 is	10% or
_	more, and if the organization meets the						
	organization meets the "facts-and-circ						▶□
18	Private foundation. If the organization						<u>s</u> ▶□
						edule A (Form 990	

#### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to

Section A. Public Support	iow, piease com	piete i art ii j				<del></del>
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not			İ			
include any "unusual grants ")						
2 Gross receipts from admissions,		_			<u> </u>	
merchandise sold or services per-						
formed, or facilities furnished in				}		
any activity that is related to the organization's tax-exempt purpose						
· · · · F				<del> </del>	+	
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-			•			
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						1
amount on line 13 for the year						1
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)	-					
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on						1
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses			1			
acquired after June 30, 1975						
					-	
c Add lines 10a and 10b						
activities not included in line 10b,	ļ					
whether or not the business is	ļ		ĺ			
regularly carried on			<u> </u>			
12 Other income Do not include gain or loss from the sale of capital	ļ					
assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)			<u> </u>		<u> </u>	
14 First five years. If the Form 990 is for t	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	zation,
check this box and stop here						
Section C. Computation of Public						
15 Public support percentage for 2010 (lir			column (f))	•	15	%
16 Public support percentage from 2009 S					16	%
Section D. Computation of Invest						
17 Investment income percentage for 201		-	ne 13, column (f))		17	%
18 Investment income percentage from 20	009 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2010. If the o	organization did n	not check the box	on line 14, and line	e 15 is more than	33 1/3%, and line <sup>1</sup>	17 is not
more than 33 1/3%, check this box and	d stop here. The	organization qual	ifies as a publicly	supported organia	zation	
b 33 1/3% support tests - 2009. If the o	organization did n	ot check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, chec	k this box and sf	top here. The orga	anızatıon qualıfies	as a publicly supp	oorted organization	▶□
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check tl	his box and see in	structions	▶□

#### **SCHEDULE C**

(Form 990 or 990-EZ)

(Z)

Political Campaign and Lobbying Activities

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

2010

Department of the Treasury Internal Revenue Service ➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part 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) organiza		y 14x), or 1 orin 590-E	.z., Fart v, line 35a (Frox	y rax,, trien
		DVANCEMENT FOUND	ATION	Em	ployer identification number
	INTERNA	TIONAL - USA			56-1704863
Pa	irt I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527	organization.
2	Provide a description of the organiz Political expenditures Volunteer hours	eation's direct and indirect politic	cal campaign activities		\$
Pa	rt I-B Complete if the ord	janization is exempt und	der section 501(c)	(3).	
1	Enter the amount of any excise tax			<del></del>	\$
	Enter the amount of any excise tax	, ,	•	•	\$
	If the organization incurred a section				Yes No
	Was a correction made?	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, ,	•	Yes No
	of "Yes," describe in Part IV	••		• •	
		janization is exempt und	ler section 501(c)	, except section 50	1(c)(3).
<u> </u>	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fund	tion activities	\$
	Enter the amount of the filing organ				
_	exempt function activities				· <b>\$</b>
3	Total exempt function expenditures	s. Add lines 1 and 2. Enter here a	and on Form 1120-POL	•	
•	line 17b			, •	· <b>\$</b>
4	Did the filing organization file Form	1120-POL for this year?		ŕ	Yes No
5	Enter the names, addresses and er	•	IN) of all section 527 pe	olitical organizations to wh	
Ü	made payments. For each organiza	• •	•	•	• •
	contributions received that were pr				· · · · · · · · · · · · · · · · · · ·
	political action committee (PAC). If	additional space is needed, pro-	vide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2010

LHA

Schedule C (Form 990 or 990-EZ) 2010	INTERNAT	ONAL - USA		56-1	704863 Page 2
Part II-A Complete if the org		cempt under sectio	n 501(c)(3) and fil	led Form 5768	
· (election under sec	tion 501(h)).				
A Check 🕨 🗓 if the filing organiza	ition belongs to an	affiliated group			
B Check 🕨 🔛 if the filing organiza	tion checked box	and "limited control" pro	ovisions apply.		
	ts on Lobbying Ex ditures" means an	penditures nounts paid or incurred.	)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infli	uence public opinio	n (grass roots lobbying)		2,742.	2,742.
<b>b</b> Total lobbying expenditures to infli	uence a legislative	body (direct lobbying)		54,971.	54,971.
c Total lobbying expenditures (add I	ines 1a and 1b)			57,713.	57,713.
d Other exempt purpose expenditure	es	•		1,671,117.	
e Total exempt purpose expenditure	es (add lines 1c and	1d)		1,728,830.	2,951,021.
f Lobbying nontaxable amount Ent	er the amount from	the following table in bot	h columns	236,442.	297,551.
If the amount on line 1e, column (a) o	or (b) is: The	obbying nontaxable am	ount is:		:
Not over \$500,000	20%	of the amount on line 1e			
Over \$500,000 but not over \$1,00	0,000 \$100	,000 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	500,000 \$175	,000 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225	,000 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,00	00,000			
g Grassroots nontaxable amount (er	nter 25% of line 1f)			59,111.	74,388.
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	0.
i Subtract line 1f from line 1c If zero	•			0.	0.
j If there is an amount other than ze	ro on either line 1h	or line 11, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this				L	Yes No
		Averaging Period Under			
		a section 501(h) election the instructions for line			
			_ <del></del>	sye 4. <i>)</i>	<del></del> -
	Lobbying Ex	penditures During 4-Yea	ar Averaging Period	ı	<del></del>
Calendar year (or fiscal year beginning in)	(a) 2007	(ь) 2008	<b>(c)</b> 2009	( <b>d</b> ) 2010	(e) Total
2a Lobbying nontaxable amount	214,25	179,038.	270,637.	297,551.	961,478.
b Lobbying ceiling amount					
(150% of line 2a, column(e))					1,442,217.
c Total lobbying expenditures	58,28	45,978.	51,944.	57,713.	213,917.
C Total lobbying expenditures	30,20	23,370	<u> </u>	3/,/13.	210,0110
d Grassroots nontaxable amount	53,563	44,760.	67,659.	74,388.	240,370.
e Grassroots ceiling amount			,		
(150% of line 2d, column (e))					360,555.

4,983

Schedule C (Form 990 or 990-EZ) 2010

341.

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990 EZ) 2010 INTERNATIONAL - USA 56-1704863 Page 3

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)).

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?	'es			(b)
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	65	No	Am	ount
or referendum, through the use of				
a Volunteers? .				
			_	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			]	
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities? If "Yes," describe in Part IV				
j Total. Add lines 1c through 1i				
a 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?				
Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01(c)	(5), or s	ection	
ου .(ο,(ο).	·		Yes	Ti
Were substantially all (90% or more) dues received nondeductible by members?		1		+
Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	<del>                                     </del>	+
Did the organization agree to carryover lobbying and political expenditures from the prior year?		2	-	+
501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III	~, III	ne 3 is a	ection inswered	d
"Yes."	- <b></b> , III			d 
"Yes."  Dues, assessments and similar amounts from members		ne 3 is a		d 
"Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				d 
"Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		1		d 
Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year	- <b>C</b> , III	1		d
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year	- <b>C</b> , III	1 2a 2b		d
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total		2a 2b 2c		d
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		1 2a 2b		d
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		2a 2b 2c		d
Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 politic		2a 2b 2c 3		d
Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		2a 2b 2c		d

#### SCHEDULE D

(Form 990)

Department of the Treasury

#### Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public

Inspection

RURAL ADVANCEMENT FOUNDATION Name of the organization **Employer identification number** 56-1704863 INTERNATIONAL - USA 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 Aggregate contributions to (during year) 2 Aggregate grants from (during year) Aggregate value at end of year 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? 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 > \$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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 (ASC 958), 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 (ASC 958), 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.

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

Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

b Assets included in Form 990, Part X

Schedule D (Form 990) 2010

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 (ASC 958) relating to these items.

		TIONAL - U							04863	
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, c	or Othe	er Simil	<u>ar Asse</u>	<b>ts</b> (contin	ied)
3	Using the organization's acquisition, access	on, and other record	ds, chec	k any of the	following that	t are a si	gnıfıcant	use of its	collection i	tems
	(check all that apply)									
а	Public exhibition	C	: <u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	•	, 🔲	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	hey further t	he organizati	on's exer	mpt purp	ose in Par	t XIV.	
5	During the year, did the organization solicit of	r receive donations	of art, hi	istorical trea	sures, or oth	er sımılar	assets			
	to be sold to raise funds rather than to be m	aintained as part of	the orga	inization's co	ollection?				Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if the	organizatio	n answered	"Yes" to	Form 990	), Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	ns or other as	sets not	ıncluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table <sup>.</sup>						
	,	•	_						Amount	
С	Beginning balance						1c			
	Additions during the year	•	••	•		•	1d			
	Distributions during the year	• •••					1e			<del></del> -
f	Ending balance		••				1f			
2a	Did the organization include an amount on F	orm 990. Part X. line	212			•			Yes	No
	If "Yes," explain the arrangement in Part XIV			•	• •	••				
Par			nswered	"Yes" to Fo	rm 990, Part	IV. line 1	0.			
		(a) Current year		nor year	(c) Two year			ears back	(e) Four y	ears back
12	Beginning of year balance	(a) canon jour			(6) )		(4)	ouro buon	(4), 55. )	Jan D Daon
h	Contributions				†		-			
•	Net investment earnings, gains, and losses	-	<del> </del>		<del></del>	+				
٦	Grants or scholarships									
ů	Other expenditures for facilities					- +				
e										
	and programs									
· ·	Administrative expenses									
9	End of year balance	r and balance hold a			1				l	
2	Provide the estimated percentage of the year									
а	Board designated or quasi-endowment	%	_%							
D	Permanent endowment	% %								
C		• •								
За	Are there endowment funds not in the posses.	ession of the organiz	ation tha	at are neid a	ına aamınıste	rea for tr	ne organiz	zation	[	<b>—</b>
	by.									es No
	(i) unrelated organizations	•							3a(i)	<del></del>
	(ii) related organizations	· · · · · · · · · · · · · · · · · · ·				••			3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	· · · · · · · · · · · · · · · · · · ·						•	3b	
4	Describe in Part XIV the intended uses of the									<del></del>
Par	·	· · · · · · · · · · · · · · · · · · ·	-		., г					
	Description of investment	(a) Cost or o			or other	• •	ccumulate	ŀ	(d) Book	/alue
		basis (investi	ment)		(other)	aer	preciation		4.55	
1a	Land				8,229.		205 5			<u>,229.</u>
b	Buildings			90	8,720.		235,0	<u>U5.</u>	<u>673</u>	<u>,715.</u>
С	Leasehold improvements			ļ .	4 ===					
d	Equipment				1,770.		16,9		24	<u>,796.</u>
e	Other			1	0,911.		9,0	15.l	1	.896.

Schedule D (Form 990) 2010

868,636.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total, (Column (b) must equal Form 990, Part X, col (B) line 15.)	<b>•</b>

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) SECURITY DEPOSITS	2,330.
(3) CHARITABLE GIFT ANNUITY	1,071.
(4) DEFERRED COMPENSATION	69,722.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	<b>▶</b> 73,123.

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 (ASC 740).

(3) Other

(B) (C) (D) (E) (F) (G) (H) **(I)** 

(1) (2) (3)(4) (5) (6) (7) (8) (9) (10)

Schedule D (Form 990) 2010

_	dule D (Form 990) 2010 INTERNATIONAL - USA	<u></u>		56-1704863 F	age 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to	Audited Financi	ial State	ments	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		
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	<u>.</u>	
9	Total adjustments (net). Add lines 4 through 8		9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 are		10		
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	ents With Revenu	ue per Re	eturn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	_2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	•	[	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			_4c	
_5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	<u> </u>		5	
Pai	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Expen	ses per	Return	
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Pnor year adjustments .	2b			
С	Other losses	2c			
ď	Other (Describe in Part XIV.)	2d		=	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b			
С	Add lines 4a and 4b			4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u> </u>		5	
Par	t XIV Supplemental Information			_	
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part I	II, lines 1a and 4, Part	IV, lines 1t	and 2b; Part V, line 4;	Part
X, line	e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp	plete this part to provid	de any add	Irtional information	
PAF	RT X, LINE 2: THE ORGANIZATION REFLECTS IN	THE FINANC	IAL S'	TATEMENTS	
THE	E BENEFIT OF POSITIONS TAKEN IN A PREVIOUS	LY FILED TA	X RET	URN OR	
EXI	PECTED TO BE TAKEN IN A FUTURE TAX RETURN	ONLY WHEN I	T IS	CONSIDERED	
' MC	RE-LIKELY-THAN-NOT' THAT THE POSITION TAK	EN WILL BE	SUSTA:	INED BY A	
TAX	ING AUTHORITY IN ACCORDANCE WITH FASB ACC	OUNTING STA	NDARD:	S CODIFICATI	ON
740	(ASC 740), ACCOUNTING FOR INCOME TAXES.				

THE ORGANIZATION EVALUATES ITS UNCERTAIN TAX POSITIONS USING PROVISIONS OF Schedule D (Form 990) 2010

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Schedule D (Form 990) 2010   INTERNATIONAL - USA   56-1704863   Page 5     Part XIV   Supplemental Information (continued)
•
FASB ASC 450, CONTINGENCIES. ACCORDINGLY, A LOSS CONTINGENCY IS
RECOGNIZED WHEN IT IS PROBABLE THAT A LIABILITY HAS BEEN INCURRED AS OF
THE DATE OF THE FINANCIAL STATEMENTS AND THE AMOUNT OF THE LOSS CAN BE
REASONABLY ESTIMATED. THE AMOUNT RECOGNIZED IS SUBJECT TO ESTIMATE AND
MANAGEMENT JUDGMENT WITH RESPECT TO THE LIKELY OUTCOME OF EACH UNCERTAIN
TAX POSITION. THE AMOUNT THAT IS ULTIMATELY SUSTAINED FOR AN INDIVIDUAL
UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITIONS IN THE AGGREGATE
COULD DIFFER FROM THE AMOUNT RECOGNIZED.
IF APPLICABLE, PENALTIES AND INTEREST ASSESSED BY INCOME TAXING
AUTHORITIES ARE INCLUDED AS EXPENSES IN THE CONSOLIDATED STATEMENT OF
ACTIVITIES. UNDER THE STATUTE OF LIMITATIONS, THE FEDERAL INFORMATIONAL
RETURNS OF THE ORGANIZATION FOR THE YEARS ENDED DECEMBER 31, 2007 THROUGH
2010, ARE SUBJECT TO EXAMINATION BY THE U.S. INTERNAL REVENUE SERVICE.
MANAGEMENT EVALUATED TAX POSITIONS TAKEN IN TAX RETURNS FOR THE YEARS
ENDED DECEMBER 31, 2007 THROUGH 2010, AND CONCLUDED THERE ARE NO UNCERTAIN
TAX POSITIONS AND BELIEVES THERE IS NO INCOME TAX EFFECT ON THE FINANCIAL
STATEMENTS.

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

90 or 990-EZ) Con

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 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA

Employer identification number 56-1704863

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THAT SUPPORT THRIVING, SOCIALLY JUST, AND ENVIRONMENTALLY SOUND FAMILY
FARMS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
CONTRACT AGRICULTURE PROGRAM: RAFI WORKS FOR FAIR AND EQUITABLE
CONTRACT ARRANGEMENTS BETWEEN INDIVIDUAL FARMERS AND LARGE
CORPORATIONS. WE ENGAGE FARMERS DIRECTLY IN EFFORTS TO IMPROVE NATIONAL
POLICY, ADVOCATE FOR JUST CONTRACTS AND FAIR RETURNS, AND TO BUILD
VIABLE MARKET ALTERNATIVES, GIVING FARMERS A FORUM FOR DEFINING THEIR
NEEDS AND ADVOCATING ON THEIR OWN BEHALF FOR FAIRNESS. RAFI PUBLISHES
POLICY REPORTS, FACT SHEETS, AND BRIEFINGS FOR INTERESTED PARTIES ON
ISSUES AND CHALLENGES FACING THIS INDUSTRY, AND SERVES AS A
CLEARINGHOUSE FOR OTHER ORGANIZATIONS AND CONCERNED CITIZENS ON THE
ISSUE OF CONTRACT FAIRNESS.
EXPENSES \$ 205,428. INCLUDING GRANTS OF \$ 0. REVENUE \$ 64,607.
FORM 990, PART VI, SECTION B, LINE 11: UPON COMPLETION, AUDITED FINANCIAL
STATEMENTS AND FORM 990 ARE MAILED TO THE BOARD. AUDIT FINANCE COMMITTEE
MEMBERS MEET BY CONFERENCE CALL WITH AUDITOR TO REVIEW. TREASURER/AUDIT
FINANCE CHAIR PROVIDES REPORT TO THE BOARD. THE BOARD FORMALLY ACCEPTS
AUDITED FINANCIAL STATEMENTS AND FORM 990.
FORM 990, PART VI, SECTION B, LINE 12C: COMPLIANCE WITH THE CONFLICT OF
INTEREST POLICY IS MONITORED WHENEVER A SITUATION ARISES THAT COULD BE A
POTENTIAL CONFLICT OF INTEREST. ADDITIONALLY, DISCLOSURES BY STAFF AND
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  Schedule O (Form 990 or 990-EZ) (2010 032211 01:24-11

Schedule O (Form 990 or 990-EZ) (2010) Page 2 Name of the organization RURAL ADVANCEMENT FOUNDATION **Employer identification number** 56-1704863 INTERNATIONAL - USA BOARD MEMBERS ARE MADE ANNUALLY. FORM 990, PART VI, SECTION B, LINE 15: RAFI HAS A UNIQUE SALARY EQUITY POLICY: A STAFF MEMBER WILL EXPECT TO ENTER EMPLOYMENT AT THE SAME SALARY AS OTHERS ENTER (CURRENTLY \$32,000); SHE OR HE WILL EXPECT TO RECEIVE SALARY RAISES AT THE SAME RATE AS OTHERS; AND SHE OR HE CAN EXPECT TO BE TREATED WITH EQUAL RESPECT REGARDLESS OF JOB RESPONSIBILITIES, EDUCATION OR PAST WORK EXPERIENCES. IN 2008, RAFI MADE AN EXCEPTION TO THE POLICY WHEN WE HIRED A NEW EXECUTIVE DIRECTOR AT THE SENIOR STAFF LEVEL SALARY (\$65,000). THE DECISION WAS MADE BY THE BOARD WITH INPUT FROM STAFF. NONPROFIT COMPENSATION STUDIES SHOWED THIS AMOUNT TO BE ON THE LOW END FOR EDS IN NATIONAL ORGANIZATIONS AND MID-RANGE FOR NC ORGANIZATIONS OF SIMILAR STAFF AND BUDGET SIZE. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT 2,492. PART XII- FINANCIAL STATEMENTS/REPORTING, QUESTION 2C OVERSIGHT OF THE AUDIT THE AUDIT COMMITTEE OVERSEES THE SELECTION OF THE AUDITORS AND THE

AUDIT OF THE FINANCIAL STATEMENTS OF THE ORGANIZATION. NO CHANGES HAVE

BEEN MADE FROM THE PRIOR YEAR.

Department of the Treasury Internal Revenue Service
Name of the organization SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

2010 Open to Public Inspection

OMB No 1545-0047

► See separate instructions.

RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA

Employer identification numbér 56-1704863

> Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Part I

	(e)	(Q)	(0)	<b>(</b> 0)	(e)		( <del>)</del>
	Name, address, and EIN	Primary activity	Legal domicile (state or	Total income	End-of-year assets		Direct controlling
	of disregarded entity		foreign country)			<b>.</b>	entity
							!
Part II	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	itions (Complete if the organization a	inswered "Yes" to Form 990,	Part IV, line 34 beca	ause it had one or	more related tax-exer	npt
	(a)	(q)	(၁)	(p)	(e)	<b>(£)</b>	(6)
	Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13) controlled
	of related organization		foreign country)	section	status (if section	entity	entity?
					501(c)(3))		Yes

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

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Schedule R (Form 990) 2010

Yes No

RURAL ADVANCEMENT

×

INTERNATIONAL POUNDATION

509(A) 3 YPE III

501(C)(3)

NORTH CAROLINA

SUPPORTING ORGANIZATION

RURAL ADVANCEMENT INSTITUTE - 06-1656357

27312

NC

PITTSBORO

PO BOX 640

032161 12-21-10 LHA

INTERNATIONAL - USA Schedule R (Form 990) 2010

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

Page 2

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(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	income elated, tax under 2-514)	(f) Share of total income	(g) Share of Dend-of-year at assets	(h) Disproportionate allocations/	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?	(j) (k) General or Percentáge managing ownership pariner?
Part IV Identification of Related Organizations Taxable as a Corporation organizations treated as a corporation or trust during the tax year)	janizations Taxable as poration or trust during	a Corpo		mplete if the c	organizatio	or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	to Form 990, Part	. IV, line 34	because it had	one or mor	re related
(a) Name, address, and EIN of related organization	V c		(b) Primary activity		(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income		(g) Share of end-of-year assets	(h) Percentage ownership
			-								
032162 12-21-10				32					Schedu	le R (Form	Schedule R (Form 990) 2010

# RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA

Schedule R (Form 990) 2010

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

Page 3

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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	Š
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ins with one or more re	slated organizations listec	In Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				<del>1</del> a		×
<b>b</b> Gift, grant, or capital contribution to other organization(s)				<b>1</b> p		×
c Gift, grant, or capital contribution from other organization(s)				10		×
d Loans or loan guarantees to or for other organization(s)				10		×
e toans or loan quarantees by other organization(s)				9	T	×
				שַ		4
f Sale of assets to other organization(s)				¥		×
g Purchase of assets from other organization(s)				5		×
				=		×
i Lease of facilities, equipment, or other assets to other organization(s)				ï		×
				-		4
j Lease of facilities, equipment, or other assets from other organization(s)				<u>-</u>		×
k Performance of services or membership or fundraising solicitations for other organization(s)	ınızatıon(s)			¥		×
l Performance of services or membership or fundraising solicitations by other organization(s)	nization(s)			=		×
m Sharing of facilities, equipment, mailing lists, or other assets				-TI	×	
n Sharing of paid employees				1n	×	
<ul> <li>Reimbursement paid to other organization for expenses</li> </ul>				10		×
p Reimbursement paid by other organization for expenses				1p	×	
<ul> <li>q Other transfer of cash or property to other organization(s)</li> </ul>				19		×
r Other transfer of cash or property from other organization(s)				1		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete the	ns line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1) RURAL ADVANCEMENT INSTITUTE	М	6,469,	6,469.ACTUAL EXPENSES			
(2) RURAL ADVANCEMENT INSTITUTE	N	296,461.ACTUAL	ACTUAL EXPENSES		•	
(3) RURAL ADVANCEMENT INSTITUTE	Ъ	117,169.ACTUAL	ACTUAL EXPENSES			
(4)						
(9)						
(9)						
032183 12.21.10	33		Schodiile B (Form 000) 2010	) (Eorm	000)	5

Schedule R (Form 990) 2010 INTERNATIONAL - USA

56-1704863 Page 4

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

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

that was not a related organization. See instructions regarding exclusion for certain investment partnerships	lusion for certain investment parriers	sdiu					
(e)	(9)		Đ	(e)	Ξ	(6)	£
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of-	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
			Yes No			of Schedule K-1 (Form 1065)	1.
			-				
			-				
							_
							_
					_		
					_		

Schedule R (Form 990) 2010