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Short Form
Return of Organization Exempt From Income Tax

2010

Open to Public
Inspection

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

- Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form
- The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2010 calendar year, or tax year beginning 10/01 , 2010, and ending 9/30 , 2011																																																																																								
B Check if applicable																																																																																								
<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending																																																																																								
C Oregon Seed Growers League 865 Sommerville Loop Harrisburg, OR 97446-9543																																																																																								
D Employer identification number 93-0637051																																																																																								
E Telephone number 541-995-6079																																																																																								
F Group Exemption Number																																																																																								
G Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ►																																																																																								
I Website: ► www.seedleague.org																																																																																								
J Tax-exempt status (ck only one) — <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (5) ▶ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527																																																																																								
K Check ► <input type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)																																																																																								
L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 47,378.																																																																																								
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)																																																																																								
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Combine lines 18 through 20</td> <td>21</td> <td>33,232.</td> </tr> </table>		1 Contributions, gifts, grants, and similar amounts received	1	1,505.	2 Program service revenue including government fees and contracts	2	5,715.	3 Membership dues and assessments	3	15,425.	4 Investment income	4	63.	5a Gross amount from sale of assets other than inventory	5a		b Less: cost or other basis and sales expenses	5b		c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c		6 Gaming and fundraising events	6a		a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a		b Gross income from fundraising events (not including \$ _____ from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b		c Less: direct expenses from gaming and fundraising events	6c		d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d		7a Gross sales of inventory, less returns and allowances	7a		b Less: cost of goods sold	7b		c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		8 Other revenue (describe in Schedule O)	8	24,670.	9 Total revenue. 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BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2010)

Part II Balance Sheets. (see the instructions for Part II.)

Check if the organization used Schedule O to respond to any question in this Part II.

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments ..	34,986.	22 33,232.
23 Land and buildings ..		23
24 Other assets (describe in Schedule O) ..		24
25 Total assets ..	34,986.	25 33,232.
26 Total liabilities (describe in Schedule O) ..	0.	26 0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	34,986.	27 33,232.

Part III Statement of Program Service Accomplishments (see the instrs for Part III.)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Schedule O

What is the organization's primary exempt purpose? [See Schedule C](#)
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28 See Schedule 0

28 a

29

293

30

308

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (see the instructions for Part IV.)

List of Officers, Directors, Trustees, and Key Employees. List each one even if not paid. Check if the organization used Schedule Q to respond to any question in this Part IV.

Part V Other Information (Note the statement requirements in the instructions for Part V.)Check if the organization used Schedule O to respond to any question in this Part V **33** Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O

	Yes	No
33	X	

34 Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)

34	X
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35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.

35a	X
-----	---

a Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?

35b	
-----	--

b If 'Yes,' has it filed a tax return on **Form 990-T** for this year (see instructions)?

36	X
----	---

36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N

37a	0
-----	---

37a Enter amount of political expenditures, direct or indirect, as described in the instructions **► 37a**

37b	X
-----	---

b Did the organization file **Form 1120-POL** for this year?

38a	X
-----	---

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?**

38b	N/A
-----	-----

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved

39a	N/A
-----	-----

39 Section 501(c)(7) organizations Enter:

39b	N/A
-----	-----

a Initiation fees and capital contributions included on line 9.

39a	N/A
-----	-----

b Gross receipts, included on line 9, for public use of club facilities

39b	N/A
-----	-----

40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under:

40b	0
-----	---

section 4911 ► N/A, **section 4912 ► N/A**; **section 4955 ► N/A**
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I

40c	
-----	--

c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 **► 0**

40d	0
-----	---

d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization **► 0**

40e	X
-----	---

e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T

40f	
-----	--

41 List the states with which a copy of this return is filed **► None****42a** The organization's books are in care of **► Lynne R. Bronson** Telephone no. **► 541-995-6079**Located at **► 865 Sommerville, Harrisburg, OR** ZIP + 4 **► 97446****b** 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)?If 'Yes,' enter the name of the foreign country **►**

42b	X
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See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts**.**c** At any time during the calendar year, did the organization maintain an office outside of the U.S.?If 'Yes,' enter the name of the foreign country **►**

42c	X
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43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here and enter the amount of tax-exempt interest received or accrued during the tax year **► 43**

43	N/A
----	-----

44a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

44a	X
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b Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

44b	X
-----	---

c Did the organization receive any payments for indoor tanning services during the year?

44c	X
-----	---

d If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O

44d	
-----	--

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)?

	Yes	No
45		X
45a		X

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,' Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see Inst.)

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

46		X
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Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

	Yes	No
47		
48		
49a		
49b		

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ►

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

► Yes No

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	► <i>Lynne R. Bronson</i>	Date
	► <i>Lynne R. Bronson, Secretary</i>	<i>Jan. 25, 2012</i>
Type or print name and title		
Paid Preparer Use Only	Print/Type preparer's name Melinda Handy	Preparer's signature <i>Melinda Handy</i>
	Firm's name ► Focus 4 CPA	Date 1/14/12
	Firm's address ► 1782 5th St	Check <input type="checkbox"/> if self-employed
	Springfield, OR 97477	PTIN P00547769
Firm's EIN ► 51-0490656		
Phone no (541) 744-0000		

May the IRS discuss this return with the preparer shown above? See instructions

► Yes No

BAA

Form 990-EZ (2010)

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.

Name of the organization

Employer identification number

Oregon Seed Growers League

93-0637051

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

To promote the production of seeds for which Oregon has trade advantages, potential trade advantages, market outlets, and to stabilize and improve marketing conditions. Analyze costs and charges for seed growers. Assemble and disseminate data on farm seeds and other agricultural products. Work for equitable freight and other rates. Standardize farm seeds with use of grades, inspection services, brands, trade-marks and reduce wastes in production and handling.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

Promoted the production of seeds. Analyzed costs and charges for production. Assembled and disseminated data on farm seeds and other agricultural products. The Oregon Seed Growers League meets annually in December to discuss matters of technical importance to the industry. The two-day event is normally attended by 350-400 growers and industry representatives. In addition, a trade show runs concurrently with the education program. Thirty-five to 40 exhibitors are expected each year.

Oregon Seed Growers League

93-0637051

Form 990-EZ, Part I, Line 8
Other Revenue

Advertising & Sponsorship	\$ 24,670.
Total	\$ 24,670.

Form 990-EZ, Part I, Line 16
Other Expenses

Conferences, Conventions, and Meetings	\$ 23,477.
Dues	1,300.
Liability Ins	900.
Office Expenses	336.
Travel	240.
Total	\$ 26,253.

Form 990-EZ, Part IV
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compensation	Contri-bution to EBP & DC	Expense Account/Other
Bill Young Crop Science Bldg, Rm 127, OSU Corvallis, OR 97331	Prog Chairman 1	\$ 2,000.	\$ 0.	\$ 0.
Lynne R. Bronson 865 Sommerville Loop Harrisburg, OR 97446	Secretary-Treas 9	9,707.	0.	0.
Jason Hunton 28410 Milliron Road Junction City, OR 97448	Director 1	0.	0.	0.
Drew Bell 31906 Meadowlark Loop Tangent, OR 97389	Treasurer 1	0.	0.	0.
Brenda Kirsch 4380 Mahony Rd NE St. Paul, OR 97137	Vice President 1	0.	0.	0.
Karl Dettwyler 7017 Quarry Ave NE Silverton, OR 973831	President 1	0.	0.	0.
Tom Silberstein 3180 Center Street, NE Room 13 Salem, OR 97301	Prog Chairman 1	1,250.	0.	0.

Oregon Seed Growers League

93-0637051

Form 990-EZ, Part IV (continued)
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
John Jenks 32539 Hwy 99E Tangent, OR 97389	Director 1	0. \$	0. \$	0.
Jon Iverson 33502 S Meridian Road Woodburn, OR	Director 1	0.	0.	0.
Chelle Davis PO Box 1007 Albany, OR 97321	Director 1	0.	0.	0.
Donnie Blades PO Box 7 Woodburn, OR 97071	Director 1	0.	0.	0.
Larry Venell 30742 Venell Lane Corvallis, OR 97333	Director 1	0.	0.	0.
Total	\$ 12,957.	\$ 0.	\$ 0.	