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DLN: 93493130008472

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public

		alendar year, or tax year beginning 01-01-2011 C Name of organization	and ending 12-31-201	.1	D Employer id	dentification number
_	k if applicable	RURAL ADVANCEMENT FOUNDATION INTERNATIONAL	- USA			
_	ess change	Doing Business As			56-17048 E Telephone r	
_	e change				(919)542	-1396
Initial Termir		Number and street (or P O box if mail is not delivered PO BOX 640	d to street address) Room/su	uite	G Gross receipt	
_	nded return	City or town, state or country, and ZIP + 4 PITTSBORO, NC 27312				
Applica	cation pending			_		
		F Name and address of principal officer ARCHIE HART		H(a) Is the affilia	s a group retu	rn for ┌ Yes
		PO BOX 640				j 163 j. 140
		PITTSBORO,NC 27312		` '	l affiliates inclu	· · ·
Tax-e	exempt status	▼ 501(c)(3)			o," attach a lis p exemption n	t (see instructions)
Web	bsite: ► W\	VW RAFIUSA ORG			p exemption in	amber P
/ Form o	of organization	✓ Corporation Trust Association Other ►		Voor of for	mation 1990	M State of legal domicile NO
Part		mary		L fear of for	mation 1990	M State of legal domicile. No
		escribe the organization's mission or most sign				
		RAL ADVANCEMENT FOUNDATION INTERN		IVATES MARK	ŒTS, POLICI	ESAND
پ		NITIES THAT SUPPORT THRIVING, SOCIA			-	
aovembance						
<u> </u>						
<u> </u>	2 Check t	his box দ if the organization discontinued its	operations or disposed	of more than 2	5% of its net	assets
		of voting members of the governing body (Part			з	11
ĭ		of independent voting members of the governir	•		4	10
		mber of individuals employed in calendar year			5	+
ŧ ː					6	23
		mber of volunteers (estimate if necessary) .				10
		related business revenue from Part VIII, colur Plated business taxable income from Form 990			7a	C
	b Net unr	lated business taxable income from Form 990	-1, line 34		7b	
					r Year	Current Year
		ibutions and grants (Part VIII, line 1h)		642,590	778,133	
	_	am service revenue (Part VIII, line 2g)			663,390	239,037
# l		tment income (Part VIII, column (A), lines 3, 4			4,504	2,170
_ 1		revenue (Part VIII, column (A), lines 5, 6d, 80			26,396	22,125
1		revenue—add lines 8 through 11 (must equal P		ie	1,336,880	1,041,465
1		s and similar amounts paid (Part IX, column (A			0	1,988,501
1.	14 Benet	its paid to or for members (Part IX, column (A)	, line 4)		0	0
1.		es, other compensation, employee benefits (Pa	rt IX, column (A), lines			
1	15 Salar	1			999,705	1,092,645
1	5-10	<i>,</i>				0
1	5-10	, ssional fundraising fees (Part IX, column (A), li	ne 11e)		0	
1	5–10 16a Profe	•			0	0
Expenses	5-10 16a Profe b Total f	ssional fundraising fees (Part IX, column (A), li	881		671,412	812,780
Expenses 1	5-10 16a Profe b Total f 17 Other 18 Total	esional fundraising fees (Part IX, column (A), li indraising expenses (Part IX, column (D), line 25) • 181, expenses (Part IX, column (A), lines 11a–110 expenses Add lines 13–17 (must equal Part I	881 d, 11f-24e) X, column (A), line 25)		671,412 1,671,117	812,780
1. Expenses 1. 1. 1.	5-10 16a Profe b Total f 17 Other 18 Total	esional fundraising fees (Part IX, column (A), listing expenses (Part IX, column (D), line 25) • 181, expenses (Part IX, column (A), lines 11a-11c	881 d, 11f-24e) X, column (A), line 25)		671,412 1,671,117 -334,237	
1. Expenses 1. 1. 1.	5-10 16a Profe b Total f 17 Other 18 Total	esional fundraising fees (Part IX, column (A), li indraising expenses (Part IX, column (D), line 25) • 181, expenses (Part IX, column (A), lines 11a–110 expenses Add lines 13–17 (must equal Part I	881 d, 11f-24e) X, column (A), line 25)	Beginning	671,412 1,671,117	812,780 3,893,926
1. Expenses 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5-10 16a Profe b Total f 17 Other 18 Total 19 Rever	esional fundraising fees (Part IX, column (A), li indraising expenses (Part IX, column (D), line 25) • 181, expenses (Part IX, column (A), lines 11a–110 expenses Add lines 13–17 (must equal Part I	881 d, 11f-24e) X, column (A), line 25) 2	Beginning	671,412 1,671,117 -334,237 of Current	812,780 3,893,926 -2,852,461
1. Expenses 1. 1. 1.	5-10 16a Profe b Total f 17 Other 18 Total 19 Rever	essional fundraising fees (Part IX, column (A), li indraising expenses (Part IX, column (D), line 25) • 181, expenses (Part IX, column (A), lines 11a-110 expenses Add lines 13-17 (must equal Part I inue less expenses Subtract line 18 from line 1	881 d, 11f-24e) X, column (A), line 25) 2	Beginning	671,412 1,671,117 -334,237 of Current ear	812,780 3,893,926 -2,852,461 End of Year
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25 enges 26 enges 27 enges 28 enges 29 enges 20 enges 21 enges 21 enges 22 enges 23 enges 24 enges 25 enges 26	5-10 16a Profe b Total f 17 Other 18 Total	esional fundraising fees (Part IX, column (A), li indraising expenses (Part IX, column (D), line 25) • 181, expenses (Part IX, column (A), lines 11a–110 expenses Add lines 13–17 (must equal Part I	881 d, 11f-24e) X, column (A), line 25)	Beginning	671,412 1,671,117 -334,237 of Current	3,893,92 -2,852,46
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Secure Se	5-10 16a Profe b Total f 17 Other 18 Total 19 Rever 20 Total 21 Total	expenses (Part IX, column (A), line 25) Landraising expenses (Part IX, column (D), line 25) Landraising expenses (Part IX, column (A), lines 11a-11c expenses Add lines 13-17 (must equal Part Inue less expenses Subtract line 18 from line 1 assets (Part X, line 16)	881 i, 11f-24e) X, column (A), line 25) 2	Beginning	671,412 1,671,117 -334,237 of Current ear 1,763,050 247,610	812,780 3,893,920 -2,852,463 End of Year 1,682,629 255,029
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May the IRS discuss this return with the preparer shown above? (see instructions)

-orm	1990 (2011)				Page ∡
Par	Statement of Program S Check if Schedule O contains a				
1	Briefly describe the organization's mis	ssion			
	RURAL ADVANCEMENT FOUNDATIO PORT THRIVING, SOCIALLY JUST AN				ND COMMUNITIES THAT
2	Did the organization undertake any sig the prior Form 990 or 990-EZ?	·	during the year wh	ich were not listed on	┌ Yes ┌ No
	If "Yes," describe these new services	on Schedule O			
3	Did the organization cease conducting services?	ı, or make sıgnıfıcant char	nges in how it condu	cts, any program	┌ Yes ┌ No
	If "Yes," describe these changes on S	chedule O			
4	Describe the organization's program s expenses Section 501(c)(3) and 501 grants and allocations to others, the t	(c)(4) organizations and s	section 4947(a)(1)	trusts are required to re	port the amount of
4a	(Code) (Expenses \$	2,482,213 includ	ling grants of \$	1,983,041) (Revenue \$)
	TOBACCO COMMUNITIES AND AG ENTERPRIS GRANTS TO FARMERS WHO DEMONSTRATE I ENTERPRISES THESE SMALL CAPITAL INVEST INCOME FOR NORTH CAROLINA'S FARMERS A FARMER AND COMMUNITY DEMONSTRATION FARMER-TO-FARMER SHARING OF IDEAS AN DISSEMINATION	NNOVATIVE MODELS FOR TRAN: MENTS HELP PRESERVE EXISTI AND RURAL COMMUNITIES IN 2 PROJECTS THROUGHOUT NOR	SITIONING AWAY FROM NG JOBS AND BUSINESS 2011 THE PROGRAM AW TH CAROLINA THE PRO	TOBACCO AND OTHER COMN ES, LEVERAGE NEW INVESTM ARDED GRANTS TOTALING AI GRAM ALSO PROMOTES KNOV	MODITIES TO NEW FARM-BASED ENT AND CREATE NEW JOBS AND MOST \$2 MILLION FOR 182 NEW WLEDGE-TRANSFER THROUGH
4b	(Code) (Expenses \$	496,501 includ	ling grants of \$	4,500) (Revenue \$	17,416)
	FARM SUSTAINABILITY PROGRAM RAFI PROI WE PROVIDE INDIVIDUAL COUNSELING AND A CASEWORK THE LIMITED-RESOURCE FARMI HELPS FARMERS SAVE OR GAIN ASSETS TOTA WORKS TO CREATE FARMER-FRIENDLY POLI ADMINISTERS "COME TO THE TABLE" A PROJ	ASSISTANCE TO FARMERS FACI ERS RAFI COUNSELS ARE ON TH ALING OVER \$3 MILLION EACH Y CIES AND PROGRAMS IN PART	NG FINANCIAL CRISES, HE BRINK OF LOSING TH 'EAR RAFI ALSO EDUCA' NERSHIP WITH THE NOF	PROVIDING HIGHLY COMPLE) E FARM WITHOUT RAFI'S IMI TES FARMERS ABOUT RISK M RTH CAROLINA COUNCIL OF ((AND TIME-CONSUMING MEDIATE SUPPORT OUR ADVOCACY IANAGEMENT PROGRAMS AND CHURCHES, RAFI ALSO
4c	(Code) (Expenses \$	403,633 includ	ling grants of \$	960) (Revenue \$	128,749)
	JUST FOODS PROGRAM THE JUST FOODS PRINTEGRITY, AGRICULTURAL BIODIVERSITY AT TO GENERATE MARKET OPPORTUNITIES THAT PROGRAM ALSO WORKS TO PROMOTE AND MISTRATEGIES EMPLOYED INCLUDE RESEARCH	ROGRAM IS WORKING TOWARD ND SOCIAL JUSTICE THE JUST T PROVIDE A FAIR PRICE FOR F IAINTAIN THE INTEGRITY OF TH	A MORE SUSTAINABLE I FOODS PROGRAM CREA FARMERS IMPLEMENTING IE ORGANIC MARKET AN	FOOD AND FIBER SYSTEM TH TES MEANINGFUL STANDARD G JUST AND SUSTAINABLE PR ID TO REINVIGORATE PUBLIC	AT INCORPORATES ORGANIC S AND CERTIFICATION PROGRAMS ODUCTION PRACTICES THE
	(0.1	470.405) (D	44.000 \
	(Code) (Expenses \$ CONTRACT AGRICULTURE PROGRAM RAFI V CORPORATIONS WE ENGAGE FARMERS DIRE BUILD VIABLE MARKET ALTERNATIVES, GIVIN PUBLISHES POLICY REPORTS, FACT SHEETS, CLEARINGHOUSE FOR OTHER ORGANIZATION	VORKS FOR FAIR AND EQUITAB ECTLY IN EFFORTS TO IMPROVE G FARMERS A FORUM FOR DEF AND BRIEFINGS FOR INTEREST	: NATIONAL POLICY, ADV INING THEIR NEEDS AN 'ED PARTIES ON ISSUES	OCATE FOR JUST CONTRACT D ADVOCATING ON THEIR OV AND CHALLENGES FACING T	S AND FAIR RETURNS, AND TO VN BEHALF FOR FAIRNESS RAFI
4d	Other program services (Describe ii (Expenses \$ 170,435	n Schedule O) including grants of \$) (Revenue \$	11,889)
4e	Total program service expenses▶\$	3,552,782			

Form 990 (
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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt{2}$	10		Νo
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
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		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		Νo
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2011)

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
		\Box	Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	$\overline{}$		•
	1a 243			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	. 1		
	gaming (gambling) winnings to prize winners?	1c	Yes	
la l	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
L				
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the	,		
u	year?	3a		Νo
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
а	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 or securities			
	account)?	4a		Νo
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			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
_	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
٠	The storing 3a of 3b, did the organization meronii 0000-1	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_		
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	, l		
-	contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νο
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did			
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess	.		
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	, [
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
_	facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
U	sources against amounts due or received from them)			
	,	, [
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
_	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	.		
а	Is the organization licensed to issue qualified health plans in more than one state?	.		
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans			
C	Enter the aggregate amount of reserves on hand			
	13c	,		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Vec " has it filed a Form 7.20 to report these payments? If "Ne " provide an explanation in Schodule O	ايمي		

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

Se	ection A. Governing Body and Management			
			Yes	No
_				
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			NI a
3	other officer, director, trustee, or key employee?	2		No
4	supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		No
	filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Νo
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		No
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		NO
	evenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
h	Other officers or key employees of the organization	15b	Yes	
_	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17				

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

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization F KATHY ZAUMSEIL

PO BOX 640

PITTSBORO,NC 27312

(919) 542-1396

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

◆ 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) Name and Title	(B) Average hours per week (describe hours	director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	for	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former		MISC)	organizations
(1) ARCHIE HART PRESIDENT	1 00	X		Х				0	0	0
(2) ALEX HITT VICE PRESIDENT	1 00	х		Х				0	0	0
(3) RANDI ILYSE ROTH TREASURER(JULY - DECEMBER)	1 00	Х		Х				0	0	0
(4) MARY HENDRICKSON BOARD MEMBER	1 00	Х						0	0	0
(5) TOM TRANTHAM BOARD MEMBER	1 00	X						0	0	0
(6) DR ALTON THOMPSON BOARD MEMBER	1 00	Х						0	0	0
(7) BRENDA BRODIE BOARD MEMBER	1 00	X						0	0	0
(8) FLOYD B MCKISSICK JR TREASURER (JANUARY - JUNE)	1 00	Х		Х				0	0	0
(9) HELEN VINTON BOARD MEMBER	1 00	Х						0	0	0
(10) KATHRYN J WALLER BOARD MEMBER	1 00	Х						0	0	0
(11) JOE SCHROEDER STAFF REPRESENTATIVE	40 00	х						45,670	0	2,267
(12) LINDA SHAW EXECUTIVE DIRECTOR	40 00			Х				53,159	0	7,449
(13) SCOTT MARLOW EXECUTIVE DIRECTOR	40 00			Х				63,840	0	9,484
(14) KATHY ZAUMSEIL SECRETARY	40 00			Х				68,141	0	6,199
(15) ROBIN ITEN PORTER FINANCIAL OFFICER	40 00			Х				62,770	0	12,630

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

	(A) Name and Title	(B) Average hours per week (describe	unles an	on (d e tha	n on son er ai	e bo ıs bo nd a	x, oth		(D) Reportable compensati from the organization 2/1099-MIS	on (W-	(E) Reportable compensation from related organizations (W- 2/1099-		Estima mount o compens from rganizat	ated f other sation the on and
		hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relat organiza	I
1b	Sub-Total				٠.	•		F						
c	Total from continuation sheets				•	•		>	202	,580		0		38,029
2	Total (add lines 1b and 1c) . Total number of individuals (incl \$100,000 of reportable compen		nited to	thos	e lıs			-) who				<u> </u>		36,029
													Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci	hedule J for such	ındıvıd	ual		•	•	•				3		No
4	For any individual listed on line corganization and related organize individual											4		No
5	Did any person listed on line 1a services rendered to the organiz									ion or	individual for •	5		No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio												
	Nar	(A) ne and business add	dress							Descrip	(B) tion of services		(C Comper	
1301	E ETKA HANCOCK AVENUE NNDRIA, VA 22301										LOBBYING			115,120
	Total number of Independent cont	ractors (includir	ng but n	ot lır	nıted	d to	those	liste	d above) who re	eceive	ed more than			

\$100,000 of compensation from the organization \blacktriangleright 1

Part V		Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated campaigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership dues 1b					
ಕಾ≗	_	Fundraising events 1c					
कुंक्	C						
<u>≅.</u> ∂	d	Related organizations 1d					
ωE	e	Government grants (contributions) 1e	320,875				
문'짜	f	All other contributions, gifts, grants, and 1f	457,258		i		
医草	•	sımılar amounts not included above —					
金吉	g	Noncash contributions included in					
듗귳		lines 1a-1f \$					
ပြွန်	h	Total. Add lines 1a-1f	· •	778,133			
		Bu	siness Code				
E	2a	SRV CONTRACTS & HONORA	900099	221 500	231,589		
Æ				231,589	231,369		
<u>æ</u>	b	REGISTRATION FEES	900099	7,448	7,448		
o G	С		$\overline{}$				
<u>.</u> 2	d						
ď	e						
Program Serwce Revenue							
₹	f	All other program service revenue					
š	g	Total. Add lines 2a-2f	<u> </u>	239,037			
	3			237,037			
		Investment income (including dividends, in	. F	2,536			2,536
		and other similar amounts)		2,330			2,330
	4	Income from investment of tax-exempt bond proceed	eds . P				
	5	Royalties	•				
		(ı) Real (ı	ı) Personal				
	6a	Gross rents 25,894					
	ь	Less rental 3,769					
	c	expenses Rental income 22,125					
	`	or (loss)					
	d	Net rental income or (loss)	🟲 [22,125			22,125
		(ı) Securities	(II) Other				
	7a	Gross amount 10,052					
		from sales of assets other					
		than inventory					
	b	Less cost or 10,418 other basis and					
		sales expenses					
	C	Gain or (loss) -366					
	d	Net gain or (loss)	▶	-366			-366
	8a	Gross income from fundraising					
e e		events (not including					
.		sf contributions reported on line 1s)					
Š		of contributions reported on line 1c) See Part IV, line 18					
Other Revenue		a					
<u> </u>	ь	Less direct expenses b					
₹		Net income or (loss) from fundraising event	tc b -				
~	C	İ					
	9a	Gross income from gaming activities See Part IV, line 19					
		see Part IV, line 19					
	b	Less direct expenses b	, 1				
	C	Net income or (loss) from gaming activities	· · · •				
	10a	Gross sales of inventory, less returns and allowances					
		returns and allowances .					
	Ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of inventor	-				
		Miscellaneous Revenue Bu	sıness Code				
	11a						
	ь						
	c						
	d	All other revenue	+				
			+				
	e	Total. Add lines 11a-11d	` . ▶				
	12	Total revenue. See Instructions	▶				
		iotal levelide. See Histractions	-	1,041,465	239,037	0	24,295

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, b, 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 United States See Part IV, line 21	1,093,907	1,093,907		· .
2	Grants and other assistance to individuals in the United States See Part IV, line 22	894,594			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	331,831	531,631		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	331,610	211,832	91,247	28,531
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	570,325	470,774	1,585	97,966
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	190,710	153,746	7,723	29,241
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				_
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	40,767	23,242	14,886	2,639
12	Advertising and promotion	10,707	23,212	11,000	2,033
13	Office expenses	71,810	56,538	3,392	11,880
14	Information technology	. 1,010	30,000	3,632	11,000
15	Royalties				
16	Occupancy	20,704	7,865	10,143	2,696
17	Travel	100,247	98,676	1,020	551
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	100,247	30,070	1,020	
19	Conferences, conventions, and meetings	52,899	47,700	3,439	1,760
20	Interest	32,033	,,,,,,	3,133	2,7.00
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	29,921	16,236	13,685	
23	Insurance	5,339		5,339	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)			2,222	
а	CONSULTANTS	469,655	465,221	875	3,559
b	EQUIPMENT/MAINTENANCE	14,302	8,612	4,613	1,077
c	MEMBERSHIPS/SUBSCRIPTIO	6,526	3,336	1,209	1,981
d	MISCELLANEOUS	610	503	107	
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	3,893,926	3,552,782	159,263	181,881
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 248,381 106,485 1 1 489.303 154.838 2 2 3 175,682 3 356,158 98.477 55.739 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 7 8 9 11.529 9 9.987 Prepaid expenses and deferred charges 1,128,432 Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10a 10b 290,135 868,636 b Less accumulated depreciation 10c 838,297 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 12,938 15 15 19,229 1,763,050 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 1,682,629 174,487 36,348 17 17 Accounts payable and accrued expenses . 18 18 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 150,000 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 73,123 25 68,681 D 26 247,610 26 255,029 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1,213,513 27 Unrestricted net assets 689,016 301,927 28 738,584 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 1,515,440 33 1,427,600 34 Total liabilities and net assets/fund balances 1.763.050 1.682.629 34

	Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1 (041,46!
2	Total expenses (must equal Part IX, column (A), line 25)	2			393,926
3	Revenue less expenses Subtract line 2 from line 1	3		-2,8	352,461
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		1,5	515,440
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2,7	764,621
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1,4	127,600
Pai	T XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			৮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain Schedule O		2 c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ıssued			
	☐ Separate basis ☐ Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Inspection Employer identification number

Name	e of th	e organi	zation	INTERNATIONAL - USA					Employe	r ident if i	cation r	number	•		
KUKAI	_ ADVAI	NCEMENT	FOUNDATION .	INTERNATIONAL - USA					56-1704	863					
Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganizations	s must com	plete this			ions				
				te foundation becaus											
1	Γ	A chur	ch, convent	ion of churches, or a	ssociation o	ofchurches	section 170(b)(1)(A)(i).							
2	Γ	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (A	ttach Sched	ule E)								
3	Γ	A hosp	ital or a cod	perative hospital se	rvice organ	ızatıon descr	rıbed ın secti	on 170(b)(1)(A)(iii).						
4	Γ			h organization opera ity, and state	ted in conju	nction with a	ı hospıtal des	scribed in se	ction 170(b)	(1)(A)(i	iii). Ente	er the			
5	Γ	=	•	erated for the benefi (A)(iv). (Complete P	_	e or universi	ity owned or	operated by	ed by a governmental unit described in						
6	Γ	A feder	al, state, or	local government o	r governmer	ntal unit desc	cribed in sect	ion 170(b)(1)(A)(v).						
7	▽	describ	oed in	at normally receives (A)(vi) (Complete P		ial part of its	support fron	n a governm	ental unit or	from the	genera	l public	:		
8	Г	A com	munity trust	: described in sectio i	n 170(b)(1)	(A)(vi) (Co	mplete Part I	Ί)							
9	Г	An org	anızatıon th	at normally receives	(1) more t	han 331/3%	of its suppor	t from contr	ıbutıons, me	mbership	o fees, a	ınd gro	SS		
		receipt	s from activ	rities related to its e	xempt funct	ions—subjec	t to certain e	exceptions,	and (2) no m	ore than	3 3 1/3%	o of			
		ıts sup	port from gr	oss investment inco	me and unre	elated busine	ess taxable ı	ncome (less	section 511	L tax) fro	rom businesses				
		acquire	ed by the org	ganızatıon after June	30,1975	See section	509(a)(2). (0	Complete Pa	rt III)						
10	Γ	Anorga	anızatıon or	ganızed and operate	d exclusivel	y to test for	public safety	See sectio	1 509(a)(4).						
11	ļ	one or the box	more public	ganized and operated ly supported organiz ibes the type of supp b Type I	ations desc orting orga	ribed in sect ni <u>za</u> tion and	tion 509(a)(1	.) or section es 11e throu	509(a)(2) : ugh 11h	See sect		(a)(3).	Check		
е	Γ	other t	-	ox, I certify that the ion managers and ot	_			•	•		•	•			
f g		If the o	rganization this box	received a written d 2006, has the organ						III sup	porting	organız	zation,		
			ng persons?												
				rectly or indirectly o			_	persons de	scribed in (ii)		Yes	No		
				governing body of th			ation?				11g(i)				
			•	er of a person descri	• •						11g(ii)				
_				lled entity of a perso		., .,					11g(iii)		<u> </u>		
h		Provide	e the followi	ng information about	the suppor	ted organizat	tion(s)								
(i Nam suppo organiz		Type of Isomorphic and Isomorphic an			(iv) Is the organization organi	ne tion in sted in erning	(v) Did you no organiza col (i) o suppo	otify the tion in f your	(vi) Is the organization in col (i) organized in the US?			(vii) A mount of support?			
				(see instructions))	Yes	No	Yes	No	Yes	No					
									1						
									1						

Total

Part II

Support Schedule for Organizations Described in IRC 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.)

	under Part III. If the	e organization f	ails to qualify ur	nder the tests l	isted below, ple	ase co	mplete F	Part III.)
	ection A. Public Support							
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,362,911	. 1,447,501	701,785	642,590		778,132	4,932,919
	Tax revenues levied for the organization'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 5	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a	1,362,911	1,447,501	701,785	642,590		778,132	4,932,919
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							1,054,142
6	Public Support. Subtract line 5 from line 4	ו						3,878,777
	ection B. Total Support							
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011	(f) Total
7	A mounts from line 4	1,362,911	1,447,501	701,785	642,590		778,132	4,932,919
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	34,265	37,041	35,726	40,216		28,430	175,678
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets							
11	Total support (Add lines 7 through 10)							5,108,597
12	Gross receipts from related activiti					12		2,122,197
13	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second,	third, fourth, or fi	fth tax year as a	501(c)(3	3) organız	eation, ►
	ection C. Computation of Pul							
14	Public Support Percentage for 201	•		.1 column (f))		14		75 930 %
15	Public Support Percentage for 201	·	·			15		71 770 %
b	33 1/3% support test—2011. If the and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization states.	alifies as a publicl e organization did n qualifies as a pu — 2011. If the orga	y supported organ not check the box blicly supported o inization did not c	ization on line 13 or 16 organization heck a box on line	a, and line 15 is 3 e 13, 16a, or 16b	33 1/3% and line	or more,	▶ ✓
b	in Part IV how the organization mee organization 10%-facts-and-circumstances test 15 is 10% or more, and if the organ	— 2010. If the orga	inization did not c e "facts and circur	heck a box on line nstances" test, c	e 13, 16a, 16b, o heck this box and	r 17a ar d stop h e	id line e re.	▶ ┌
18	Explain in Part IV how the organiza supported organization Private Foundation If the organizat instructions				-			▶⊏ ▶⊏

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

33 1/3% support tests-2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

Additional Data

Software ID:

Software Version:

EIN: 56-1704863

Name: RURAL ADVANCEMENT FOUNDATION INTERNATIONAL -

USA

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 170,435 including grants of \$) (Revenue \$ 11,889)

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

Political Campaign and Lobbying Activities

DLN: 93493130008472

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

f th	e organization answered "Ye	s," to Form 990, Part IV, Line 3, or	Form 990-EZ, Pa	art V, line 46 (Political C	Campaign Activities),
her			D 110		
	. , . , .	implete Parts I-A and B Do not complet 501(c)(3)) organizations Complete Part		/ Do not complete Part LI	3
	ection 527 organizations Complete		ts FA and C below	Do not complete fait Fi	5
		s," to Form 990, Part IV, Line 4, or	Form 990-EZ, Pa	art VI, line 47 (Lobbying	g Activities), then
	, ,, , =	t have filed Form 5768 (election under	, , , ,	•	•
	· / · / •	t have NOT filed Form 5768 (election u	,	• •	•
	ection 501(c)(4), (5), or (6) organi	s," to Form 990, Part IV, Line 5 (Prezations, Complete Part III	oxy rax) or Form	n 990-E∠, line 350 (Pro)	ky rax), then
Na	me of the organization			Employer id	entification number
RU	RAL ADVANCEMENT FOUNDATION INTER	RNATIONAL - USA		56-170486	3
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c		
1	Provide a description of the or in opposition to candidates for	ganization's direct and indirect politic	cal campaign acti	vities on behalf of or	
2	Political expenditures	pasite emee in traiter.		.	\$
3	V olunteer hours				1
				\ <u>\</u>	
		ganization is exempt under		:)(3).	
1		e tax incurred by the organization und			\$
2		e tax incurred by organization manage		4955 ►	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?		Yes No
4a	Was a correction made?				Yes No
b	<u> </u>		=0.1.		24 / \/2\
	-	ganization is exempt under			01(c)(3).
1		ended by the filing organization for se			\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to otl	her organizations	for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	D-POL, line 17b	\$
4	Did the filing organization file I	Form 1120-POL for this year?			☐ Yes ☐ No
5	Enter the names, addresses a	nd employer identification number (EI	N) of all section	527 political organizatio	ns to which the filing
	amount of political contribution	For each organization listed, enter the ns received that were promptly and dipolitical action committee (PAC) If a	rectly delivered t	o a separate political or	ganızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	contributions received
			ļ		
		i		I	I

section 4911 tax for this year?

┌ Yes ┌ No

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

4	Check	굣	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
			expenses, and share of excess lobbying expenditures)

	Limits on Lobbying E (The term "expenditures" means ar	•	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	6,608	6,608
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	66,164	66,164
c	Total lobbying expenditures (add lines 1a and 1i	p)	72,772	72,772
d	Other exempt purpose expenditures		3,821,154	3,821,154
е	Total exempt purpose expenditures (add lines 1	c and 1d)	3,893,926	3,893,926
f	Lobbying nontaxable amount Enter the amount foolumns	rom the following table in both	344,696	344,696
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	86,174	86,174
h	Subtract line 1g from line 1a If zero or less, ent	er-0-	0	0
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -	0	0
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 472	0 reporting	

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

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) Total beginning in) 179,038 270,637 297,551 344,696 Lobbying non-taxable amount 1,091,922 Lobbying ceiling amount 1,637,883 (150% of line 2a, column(e)) 45,978 51,944 57,713 72,772 228,407 Total lobbying expenditures Grassroots non-taxable amount 44,760 67,659 74,388 86,174 272,981 Grassroots ceiling amount 409,472 (150% of line 2d, column (e)) 224 9,915 341 2,742 6,608 Grassroots lobbying expenditures

_	edule C (Form 990 or 990-EZ) 2011				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768
		(a)	(b)
		Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	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?				
е	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	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion
			_	Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

Part IV Supplemental Information

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

Identifier | Return Reference | Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493130008472

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	me of the organization RAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA		Employer identification number
ĸŪ	RAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA		56-1704863
Pa	organizations Maintaining Donor Acorganization answered "Yes" to Form 99		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the o		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the bender		
D-	conferring impermissible private benefit	t the organization answered "Ves" t	<u> </u>
	rt II Conservation Easements. Complete		o Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreations)		historically importantly land area
	Protection of natural habitat		certified historic structure
	Preservation of open space	,	
2	Complete lines 2a-2d if the organization held a quali easement on the last day of the tax year	fied conservation contribution in the form	of a conservation
	,,	[Held at the End of the Year
а	Total number of conservation easements	İ	2a
b	Total acreage restricted by conservation easements	İ	2b
c	Number of conservation easements on a certified his	toric structure included in (a)	2c
d	Number of conservation easements included in (c) ac	quired after 8/17/06	2d
3	Number of conservation easements modified, transfe	rred, released, extinguished, or terminate	ed by the organization during
	the taxable year ►		
4	Number of states where property subject to conserva	tion easement is located ►	<u> </u>
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	nents during the year ►
7	Amount of expenses incurred in monitoring, inspectir \$\blue{\text{*}} \\$	ng, and enforcing conservation easements	s during the year
8	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of t		
Par	the organization's accounting for conservation easement III Organizations Maintaining Collectio	nents	
	Complete if the organization answered "	Yes" to Form 990, Part IV, line 8.	or other ommar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or researc	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ - \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1		▶ \$

b Assets included in Form 990, Part X

Par	Titl Organizations Maintaining Co	llections of Ar	t, His	tori	<u>cal Tr</u>	easu	res, or O	the	r Similar As:	sets (continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	y of th	he fol	lowing t	hat are	e a significa	ant u	se of its collect	ion	
а	Public exhibition		d	\vdash	Loan	orexch	nange progi	rams			
ь	Scholarly research		e	\vdash	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and eval	ain hoi	w tha	v furtha	rthao	raanizatior	1'c av	emnt nurnose i	n	
7	Part XIV									11	
5	During the year, did the organization solicition assets to be sold to raise funds rather than t									_ Yes	□ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organı	zation			<u>`</u>		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						r other ass	ets		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follov	vıng t	able		F				
							-		Am	ount	
С	Beginning balance						-	1c			
d	Additions during the year							1d			
е	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lir	ne 21?	,					ſ	_ Yes	┌ No
ь	If "Yes," explain the arrangement in Part XIV	1									
Pai	rt V Endowment Funds. Complete										
		(a)Current Year	(b) Prior	Year	(c) Two	o Years Back	(d)	Three Years Back	(e) Four '	Years Back
1a	Beginning of year balance							+			
Ь	Contributions							+-			
C	Investment earnings or losses										
d	Grants or scholarships							_			
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as								
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment 🕨										
С	Term endowment ►										
3a	Are there endowment funds not in the posse	ssion of the organiz	zation	that	are helo	d and a	dmınıstere	d for	the		
	organization by	J								Yes	No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(i		<u> </u>
	If "Yes" to 3a(II), are the related organizatio							•	3b	<u> </u>	<u> </u>
4	Describe in Part XIV the intended uses of th										
Pali	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa				Ī				
	Description of property				ı) Cost oı sıs (ınves		(b)Cost or basis (oth		(c) Accumulated depreciation	(d) i	Book value
1a	Land						168	3,229			168,229
b I	Buildings						908	3,720	257,56	59	651,151
c I	Leasehold improvements										
d I	Equipment						40	0,573	23,1	52	17,421
e	Other						10	0,910	9,4:	14	1,496
	I. Add lines 1a-1e (Column (d) should equal Fo), line	10(c).)		·				838,297
	, ,		. ,	•	. , ,				Schedule D	(Form	

Part VII Investments—Other Securities. See	e Form 990, Part X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		,
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line :	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	<u> </u>	
Part IX Other Assets. See Form 990, Part X, (a) Description		(b) Book value
(a) Desci	приоп	(b) Book value
Tabel (Calumn (b) should say 15 and 5 and 5	15)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line		<u> </u>
Part X Other Liabilities. See Form 990, Part (a) Description of Liability		
	(b) A mount	
Federal Income Taxes		
SECURITY DEPOSITS	830	
CHARITABLE GIFT ANNUITY	1,071	
DEFERRED COMPENSATION	66,780	
	+	
Tabel (Column /h) should a 15 000 0 11 15 15 15	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	68,681	

Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,041,465
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,893,926
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-2,852,461
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	-1,825
9	Total adjustments (net) Add lines 4 - 8	9	-1,825
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,854,286
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,128,578
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 88,938		
e	Add lines 2a through 2d	2e	87,113
3	Subtract line 2e from line 1	3	1,041,465
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)		
C	Add lines 4a and 4b	4 c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,041,465
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	3,982,865
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d 88,939		
e	Add lines 2a through 2d	2e	88,939
3	Subtract line 2e from line 1	3	3,893,926
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)		
c	Add lines 4a and 4b	4 c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	3,893,926
Pa	rt XIV Supplemental Information		

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	IN ACCORDANCE WITH FINANCIAL ACCOUNTING STANDARDS BOARD ACCOUNTING STANDARDS CODIFICATION ("ASC") 740-10 ACCOUNTING FOR INCOME TAXES, THE ORGANIZATION REFLECTS IN THE FINANCIAL STATEMENTS THE BENEFIT OF POSITIONS TAKEN IN A PREVIOUSLY FILED TAX RETURN OR EXPECTED TO BE TAKEN IN A FUTURE TAX RETURN ONLY WHEN IT IS CONSIDERED 'MORE-LIKELY-THAN-NOT' THAT THE POSITION TAKEN WILL BE SUSTAINED BY A TAXING AUTHORITY THE ORGANIZATION EVALUATES ITS UNCERTAIN TAX POSITIONS USING PROVISIONS OF 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 POSITION OR FOR ALL UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN TAX POSITION OR FOR ALL UNCERTAIN THE SASESSED BY INCOME TAXING AUTHORITIES AND INTEREST ASSESSED BY INCOME TAXING AUTHORITIES ARE INCLUDED IN GENERAL AND ADMINISTRATIVE EXPENSES UNDER THE STATUTE OF LIMITATIONS, THE TAX RETURNS OF THE ORGANIZATION FOR 2008 THROUGH 2010 ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES MANAGEMENT EVALUATED TAX POSITIONS FOR THE 2008 THROUGH 2010 RETURNS, AND CONCLUDED THAT THERE ARE NO UNCERTAIN TAX POSITIONS AND BELIEVES THERE IS NO INCOME TAX EFFECT ON THE FINANCIAL STATEMENTS
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT - 1,825
PART XII, LINE 2D - OTHER ADJUSTMENTS		IN KIND CONTRIBUTIONS 88,938
PART XIII, LINE 2D - OTHER ADJUSTMENTS		IN KIND CONTRIBUTIONS 88,939

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Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990 OMB No 1545-0047

2011

DLN: 93493130008472

Inspection

Employer identification number

RURAL ADVANCEMENT FOUNDATION	ON INTERNATION.	A				1 ' '	
RORAL ADVANCEMENT FOUNDATION	ON INTERNATION	AL - USA				56-1704863	
Part I General Informatio	n on Grants and	l Assistance				•	
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	vard the grants or as	sıstance? .					∀ Yes
Part II Grants and Other A Form 990, Part IV, line Part IV and Schedule	e 21 for any recip	ient that received r	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 50 3 Enter total number of other orga		_				<u>-</u>	9 57

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

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES	145	894,594			

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

Identifier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE ORGANIZATION SELECTS DEMONSTRATION PROJECTS FOR FUNDING THROUGH
MONITORING GRANTS	·	A COMPETITIVE APPLICATION PROCESS FIRST, RAFI STAFF MEMBERS WORK WITH POTENTIAL APPLICANTS TO
IN THE U S		ACCESS APPLICATION MATERIALS AND UNDERSTAND PROJECT REQUIREMENTS ONCE APPLICANTS HAVE
		COMPLETED AND SUBMITTED PROPOSALS FOR FUNDING, THE PROPOSALS ARE TURNED OVER TO A REVIEW
		COMMITTEE COMPRISED OF FARMERS, MEMBERS OF FARMER SUPPORT ORGANIZATIONS, AGRIBUSINESS
		EXPERTS, RURAL CLERGY, AND UNIVERSITY RESEARCHERS THE REVIEW COMMITTEE SCORES THE PROPOSALS
		USING A STANDARDIZED RATINGS SHEET REVIEWERS THEN SELECT FINALISTS FROM AMONG THE TOP SCORING
		APPLICANTS THE FINALISTS ARE THEN INTERVIEWED AFTER THE INTERVIEWS, THE REVIEW COMMITTEE MAKES
		RECOMMENDATIONS FOR FUNDING TO THE RAFI'S TOBACCO COMMUNITIES REINVESTMENT FUND (TCRD)
		OVERSIGHT COMMITTEE THE COMMITTEE THEN APPROVES FUNDING FOR EACH SPECIFIC PROJECT ONCE
		FUNDING IS APPROVED, RAFI STAFF MEMBERS WORK WITH DEMONSTRATION PROJECT AWARD WINNERS TO
		DEVELOP DEMONSTRATION CONTRACTS THE CONTRACTS CLEARLY STATE THE REQUIREMENTS FOR FUNDING
		BY THE AWARD WINNERS AND THE TIMETABLE FOR REPORTING RAFI MONITORS DEMONSTRATION CONTRACT
		ACTIVITIES THROUGH SITE VISITS AND PROJECT REPORTS SITE VISITS ARE CONDUCTED FOR TWO REASONS
		FIRST, TO ENSURE THAT DEMONSTRATION INITIATIVES ARE BEING CARRIED OUT AS PROPOSED IN
		ACCORDANCE WITH THE APPROVED PLAN AND BUDGET SECOND, RAFI STAFF MEMBERS AIM TO ASSIST FARMER
		PARTICIPANTS TO OVERCOME BARRIERS AND TAKE ADVANTAGE OF THE RESOURCES THAT ARE AVAILABLE TO
		THEM EACH DEMONSTRATION PROJECT IS VISITED AT LEAST TWICE BY RAFI STAFF MEMBERS AND SOME MORE
		OFTEN, DEPENDING UPON THE NEEDS OF THE SPECIFIC PROJECT DEMONSTRATION CONTRACT PARTICIPANTS
		ARE REQUIRED TO SUBMIT INTERIM AND FINAL REPORTS ON PROJECT PROGRESS THE REPORTS ASK
		PARTICIPANTS TO DETAIL PROGRESS BEING MADE TOWARDS PROJECT COMPLETION, TRACKS IMPACTS, AND
		REQUIRES DETAILED ITEMIZATION OF EXPENDITURES (INCLUDING APPROPRIATE DOCUMENTATION)
		ADDITIONALLY, RAFI STAFF MEMBERS ARE IN CONSTANT CONTACT WITH PROJECT PARTICIPANTS DURING THE
		CONTRACT PERIOD IN ORDER TO ARRANGE INTERVIEWS, MEDIA COVERAGE, AND ASSIST FARMERS TO ACCESS
		OTHER RESOURCES

Software ID: **Software Version:**

EIN: 56-1704863

Name: RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA

ates

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable		(e) A mount of		(g) Description of non-cash assistance	
AMERICAN PRAWN COOPERATIVE831 MEADOW RD WALSTONBURG, NC 27888	26- 2686548		26,500		outlet)		FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
AVERY CO FARMERS MARKETING & EDUCATIONAL ASSOC805 CRANBERRY ST NEWLAND, NC 28657	27- 2596808		5,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CAROLINA BLUEBERRY COOPERATIVE ASSOCIATION 11421 HWY 701 N PO BOX 368 GARLAND, NC 28441	56- 0554059		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CAROLINA FARM STEWARDSHIP ASSOCIATIONPO BOX 448 PITTSBORO, NC 273120448	24- 0040340	501C3	28,150				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CATAWBA VALLEY CATTLEMEN'S ASSOCIATION4391 HALL DAIRY RD CLAREMONT, NC 28610	56- 1202751		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CNTR FOR NE COALITION OF MINORITY SLO & F 469 NEW RD 9 ELIZABETH CITY, NC 27909	90- 0683417	501C3	30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
COUNTY OF COLUMBUS111 WASHINGTON ST WHITEVILLE, NC 28472	56- 6000289	GOV	30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CR NATURALPO BOX 494 BETHEL,NC 27812	45- 0708606		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
FAYETTEVILLE FARMERS MARKET ASSOCIATION THE PO BOX 53182 FAYETTEVILLE, NC 28305	26- 2112283		8,500				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
JACKSON COUNTY CHRISTMAS TREE ASSOCIATIONPO BOX 425 GLANVILLE,NC 28736	80- 0672040		13,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
LENOIR COUNTYPO BOX 3289 KINSTON, NC 28502	56- 6000314	GOV	22,596				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
LOOKING BACK FARMS589 CHINQUAPIN RD TYNER,NC 27980	20- 0479891		30,500				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
NAGS HEAD PRODUCE INC317 NAGS WAY CT NAGS HEAD, NC 27959	26- 4720155		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
NC AGRICULTURAL FOUNDATION INC THECAMPUS BOX 7207 RALEIGH, NC 276957207	56- 6049304	501C3	29,680				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
NC COALITION OF FARM AND RURAL FAMILIES THE1820 S NC HWY 11 ROSE HILL, NC 28458	58- 1788656	501C3	31,500				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
NC SWEET POTATO COMMISSION FOUNDATION700 E PARRIS DR STE C BENSON,NC 27504	56- 2260618		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
ORANGE COUNTY PO BOX 8181 HILLSBOROUGH, NC 27278	56- 6000327	GOV	34,323				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
PIEDMONT CONSERVATION COUNCIL721 FOSTER ST RM 228 DURHAM,NC 27701	58- 1798988		7,700				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
POLK SOIL AND WATER CONSERVATION DISTRICTPO BOX 236 COLUMBUS,NC 28722	56- 1176838		19,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
REEDY FORK FARM 7092 SOCKWELL RD ELON, NC 27244	56- 1287403		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES

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

Form 990,Schedule	I, Part II, G	rants and C	ther Assis	tance to Go	vernments	and Organiz	ations in the United S
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RICHMOND COUNTY BEEKEEPERS427 SYCAMORE LN JACKSON SPRINGS, NC 27281	23- 7084869		5,300		July 1		FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
ROBERSONVILLE MEAT PACKING COMPANY INC800 W GREEN ST ROBERSONVILLE, NC 27871	56- 1907524		8,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
ROCKINGHAM COUNTY GOVERNMENTPO BOX 41 WENTWORTH, NC 273750041	56- 6001527	GOV	30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
SPARTA ALLEGHANY CHOOSE & CUT FARM ALLIANCE127 LUCAS ST SPARTA,NC 28675	45- 1682511		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
SW NC RESOURCE CONSERVATION & DEV COUNCIL INC PO BOX 1230 WAYNESVILLE, NC 28786	58- 1767801		17,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
TOWN OF STARPO BOX 97 STAR, NC 27356	56- 6010163	GOV	30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
UNIVERSITY OF NC- WILMINGTON601 SOUTH COLLEGE RD WILMINGTON, NC 284035934	56- 1258660		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
WATAUGA COUNTY FARMERS MARKET INCPO BOX 614 VALLE CRUCIS, NC 28691	56- 2132544		18,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
WEST CRAVEN HIGH SCHOOL2600 STREETS FERRY RD VANCEBORO, NC 28586	56- 1286861		30,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
WNC COMMUNITIES 594 BREVARD ROAD ASHEVILLE,NC 28806	56- 0797766		20,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
YADKIN FARMERS MARKET1742 HUNTER DAIRY RD HAMPTONVILLE,NC 27020	26- 2465942		29,975				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
ADDISON FARMS LLC4003 NEW LEICESTER HW LEICESTER, NC 28748	26- 4188502		9,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
BLUEBIRD FARM 4178 BLUEBIRD DR MORGANTON, NC 28655	27- 1644557		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
BUCK PIGG PLANTATION420 SUTTON RD MADISON, NC 27025	27- 3368337		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
C & C DAIRY INC572 AM CHEEK RD FLEETWOOD, NC 28626	26- 2643142		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CAROLINA COUNTRY FRESH LLC PO BOX 685 BETHEL,NC 27812	27- 4644544		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CAROLINA FISH HATCHERY INC2424 THOMPSON AVE TURKEY,NC 28393	20- 3951098		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CENTURY FARM ORCHARDS1614 RICE RD REIDSVILLE, NC 27320	26- 0787370		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CORRELL FARMS LLC 1185 WOODLEAF- BARBER RD CLEVELAND, NC 27013	56- 6082738		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
CROMARTIE BLUEBERRY FARMS INC4094 BEATTYS BRIDGE RD ATKINSON, NC 284219388	90- 0514421		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES

Form 990,Schedule	I, Part II, G	irants and C	ther Assis	tance to Go	vernments	and Organiz	ations in the United S
(a) Name and address of organization or government	(b) EIN		(d) Amount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DONNA S SMITH214 TAPP FARM RD PINK HILL, NC 28572	56- 1029019		10,000		James,		FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
FULLER FARMS INC 2694 HESTER RD OXFORD,NC 27565	20- 2694618		9,512				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
GREEN POND FARM 457 STILLWATER DR ROCKY MOUNT,NC 27804	20- 1379766		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
GREENSLAND FARMS 668 MIDWAY RD BOLIVIA,NC 28422	27- 1877905		9,500				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
H2O FARMPO BOX 701 MURPHY,NC 28906	32- 0179797		6,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
HANKS PLACE155 MORNING RD EXT WINDSOR, NC 27983	45- 1318403		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
HARDIN FARM & STABLES INC8208 MILLRUN R STOKESDALE, NC 27357	20- 2867282		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
HEADWATERS OF POVERTY FARM465 POVERTY BRANCH ROAD BARNARDSVILLE,NC 28709	27- 3962805		6,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
INN AT CELEBRITY DAIRY THE144 CELEBRITY DAIRY WAY SILER CITY,NC 27344	56- 2071173		8,657				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
J & B HERB PLANT FARMS INC620 WELDON WRENN RD ROXBORO, NC 27574	56- 1987405		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
J & J CONCEPTS LLC 971 LLOYD HOOPER ROAD CULLOWHEE,NC 28723	26- 3102558		6,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
JACKSON'S AGRI SERVICES INCPO BOX 42 GLANVILLE,NC 28736	56- 1771398		9,808				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
MISS ANGELS HEAVENLY PIES INC 253 HEART LN MOUNT AIRY, NC 27030	27- 3998434		10,100				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
RABBIT CREEK BEE COMPANY LLC260 CORBIN COVE DR FRANKLIN, NC 28734	27- 0561655		6,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
RASCOE'S GOAT FARM1724-B INDIAN WOOD RD WINDSOR, NC 27983	45- 1495779		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
SAND DOLLAR FARMS LLC7209 CAVINESS JORDAN RD CEDAR GROVE,NC 27231	55- 0831513		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
SHILOH'S GARDEN LLC841 SAND RIDGE RD MILLERS CREEK,NC 28651	20- 5128255		9,816				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
SLEEPY HOLLOW FARM & FRIENDS LLS PO BOX 2489 BRYSON CITY, NC 28713	99- 0065203		6,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
SMITHFIELD FLOWERS2080 YELVERTON GROVE RD SMITHFIELD,NC 27577	24- 4573239		7,225				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
SUNBURST TOMATO COMPANY481 BASS RD NASHVILLE, NC 27856	56- 2079736		10,000				FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THOMPSON PRAWN FARM INC 5919 ALLIE MAE RD CEDAR GROVE,NC 27231	26- 4379612		10,000			FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
TUCKER FAMILY FARM5510 CAMILLA DR CHARLOTTE,NC 28226	26- 2728971		7,416			FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
TUMBLING RUN FARMS INC 16628 RED BUD RD CASTALIA, NC 27816	56- 1887286		8,460			FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
JULIAN MEADOWS INC5434 AMICK RD JULIAN,NC 27283	26- 3105030		10,000			FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
K&F HONEY103 HOWELLS LN HERTFORD, NC 27944	90- 0677838		9,500			FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES
LATHAM FARM LLC 196 LATHAM FARM ROAD MOCKSVILLE,NC 27028	27- 0644511		10,000			FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES

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SCHEDIII E O

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2011

Open to Public Inspection

Name of the organization RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA

Employer identification number

56-1704863

Identifier	Return Reference	Explanation
	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 BOARD MEMBERS ARE MADE ANNUALLY
	FORM 990, PART VI, SECTION B, LINE 15	IN THE FALL OF 2010, RAFI COMMISSIONED A MARKET COMPENSATION STUDY THE STUDY WAS BASED ON MARKET RATES FOR COMPARABLE JOBS IN COMPARABLE ORGANIZATIONS (SIZE, NONPROFIT, ETC.) SALARIES FOR THE FINANCIAL OFFICER, DEVELOPMENT OFFICER AND TWO PROGRAM DIRECTORS WERE FOUND TO BE SUBSTANTIALLY BELOW MARKET RATES AT ITS 12/13/10 MEETING, THE BOARD OF DIRECTORS AUTHORIZED THE EXECUTIVE DIRECTOR TO MAKE SALARY ADJUSTMENTS EFFECTIVE 1/1/11 BASED ON THE COMPARABILITY DATA
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT -1,825 TRANSFER OF RURAL ADVANCEMENT INSTITUTE NET ASSETS 2,766,446 TOTAL TO FORM 990, PART XI, LINE 5 2,764,621
OVERSIGHT OF THE AUDIT	FORM 990, PART XII- FINANCIAL STATEMENTS/REPORTING, LINE 2C	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

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DLN: 93493130008472

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA				Employer id 56-170486	lentification number			
Part I Identification of Disregarded Entities (Co	mplete if the organizati	on answered "Ye	s" on Form 990, F					
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (sta or foreign country	(d) ate Total income	(e) End-of-year assets	(f) Direct controlling entity			
Part II Identification of Related Tax-Exempt Orgor more related tax-exempt organizations duri	anizations (Complete	of the organization	on answered "Yes	" on Form 990, P	art IV, line 34 becaus	se it had	one	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direct controlling entity		(g) Section 512(b)(13 controlled organization	
(1) RURAL ADVANCEMENT INSTITUTE						Yes	No	
PO BOX 640	SUPPORTING ORGANIZATION	NC	501(C)(3)	509(A) 3 TYPE III	RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA		No	
PITTSBORO, NC 27312 06-1656357							ļ	
For Privacy Act and Paperwork Reduction Act Notice, see the Instr	uctions for Form 990.	Cat No !	50135Y	1	Schedule R (I	 Form 990)	2011	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No	
												i

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

(a) Name, address, and EIN of related organization	(b) Рптагу 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

(4)

(5)

(6)

Pa	rt V Transactions With Related Organizations (Complete if the organization answered "Yo	es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV				Ye	es	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related orga	anızatıons lısted ın Pari	ts II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1:	3		No
b	Gift, grant, or capital contribution to related organization(s)			1	b		No
c	Gift, grant, or capital contribution from related organization(s)			10	c		No
d	Loans or loan guarantees to or for related organization(s)			10	1		No
е	Loans or loan guarantees by related organization(s)			10	•		No
f	Sale of assets to related organization(s)			1:	F		No
g	Purchase of assets from related organization(s)			19	3		No
h	Exchange of assets with related organization(s)			1	h Ye	es	
i	Lease of facilities, equipment, or other assets to related organization(s)			1	1		No
j	Lease of facilities, equipment, or other assets from related organization(s)			1	i		No
k	Performance of services or membership or fundraising solicitations for related organization(s)			1	k		No
ı	Performance of services or membership or fundraising solicitations by related organization(s)			1			No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1	m		No
n	Sharing of paid employees with related organization(s)			1	n		No
0	Reimbursement paid to related organization(s) for expenses			10	<u> </u>		No
р	Reimbursement paid by related organization(s) for expenses			1	p		No
q	O ther transfer of cash or property to related organization(s)			10	1		No
r	O ther transfer of cash or property from related organization(s)			1	r		No
				_			
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relat	ionships and transact	ıon thresholds			
	(a)	(b) Transaction	(c)	(d) Method of determ	nınıng	amou	nt
	Name of other organization	type(a-r)	Amount involved	involv	ed		
(1) R	URAL ADVANCEMENT INSTITUTE	Н	2,784,478	GRANTS REC BOOK	VALUE		
(2) R	URAL ADVANCEMENT INSTITUTE	Н	65,734	ACCTS REC BOOK V	ALUE		
3)							

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on 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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate alloc		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
TRANSACTIONS	SCHEDULE R,	ALL ACTIVITES OF RURAL ADVANCEMENT INSTITUTE WERE ASSUMED BY RAFI-USA EFFECTIVE JANUARY 1, 2011 ON THIS DATE, RURAL
WITH RELATED	PART V,	ADVANCEMENT INSTITUTE TRANSFERRED GRANTS RECEIVABLE OF \$2,784,478 AND ACCOUNT RECEIVABLE OF \$65,734 TO RAFI-USA IN
ORGANIZATIONS	LINES 1 & 2	ADDITION, ACCOUNTS PAYABLE OF \$83,766 AND NET ASSETS OF \$2,766,446 WERE TRANSFERRED FROM RURAL ADVANCEMENT INSTITUTE
		TO RAFI-USA

Schedule R (Form 990) 2011