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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)

Department of the Treasury Internal Revenue Service

SCANNED UN 0 5

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

Open to Public Inspection

OMB No. 1545-0047

A F	or the 2	2011 calendar year, or tax year beginning $$ FEB $$ 1, $$ 2011 $$ and $$ e	nding J	AN 31, 2012							
B C	heck if oplicable	C Name of organization		D Employer identific	eation number						
	Address change	AMERICAN SUGAR CANE LEAGUE OF THE USA									
	Name change	Doing Business As		72-01	118440						
	initial return	Number and street (or P 0 box if mail is not delivered to street address)	Room/suite	E Telephone number							
	Termin- ated	PO DRAWER 938		(985)	448-3707						
	Amende	City or town, state or country, and ZIP + 4		G Gross receipts \$	2,685,192.						
L	Applica- tion pending	THIBODAUX, LA 70302-0938	-	H(a) Is this a group re							
	,	F Name and address of principal officer:WALLACE ELLENDER II	. 1	for affiliates?	Yes X No						
		239 HWY 55, BOURG, LA 70343		H(b) Are all affiliates incl							
		npt status:501(c)(3) _X501(c)(5) ◀ _(insert no_)4947(a)(1) or : ▶ WWW.AMSCL.ORG	r 527	H(c) Group exemption	list. (see instructions)						
		rganization X Corporation Trust Association Other ►	1 Vear		State of legal domicile LA						
		Summary	L 1001	or formation = = = = WI	Otato of legal definions ====						
		riefly describe the organization's mission or most significant activities: TO DE	VELOF	, ADVANCE A	ND —						
Activities & Governance	E	NCOURAGE THE SUGAR CANE GROWING AND PROC	ESSIN	G ACTIVITIES	S IN EVERY						
rua		heck this box 🕨 🔲 if the organization discontinued its operations or dispose									
ove.	3 N	umber of voting members of the governing body (Part VI, line 1a)		3	44						
8	4 N	umber of independent voting members of the governing body (Part VI, line 1b)		4	44						
ies		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	6						
tivit		otal number of volunteers (estimate if necessary)		6	30, 760						
Ac		otal unrelated business revenue from Part VIII, column (C), line 12		7a	39,760. 0.						
	b N	et unrelated business taxable income from Form 990·T, line 34		7b Prior Year	Current Year						
	9 0	entributions and grants (Part VIII, line 1h)		20,000.	O.						
nue		ontributions and grants (Part VIII, line 1h) rogram service revenue (Part VIII, line 2g)		2,755,687.	2,421,397.						
Revenue		vestment income (Part VIII, column-(A), lanes 3-4- and 7d)		93,096.	72,698.						
ď		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		177,942.	190,521.						
		otal revenue · add lines B through 11 (must equal Part Vitt column (A), line 12)		3,046,725.	2,684,616.						
		rants and similar amounts paid (நிழ்ர் IX), சூபழிநிழ்(A), Im									
		enefits paid to or for members (Part IX, column (A), line		0.	0.						
es		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<u> </u>	504,475.	480,803.						
Expenses		rofessional fundraising fees (Part-IX, column (A), line 11e)-	, -	0.	0.						
Ϋ́			0.	1 027 045	986,146.						
_	l	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	-	1,037,045. 3,123,438.	3,273,183.						
	1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) evenue less expenses. Subtract line 18 from line 12	-	<76,713.							
e or	19 R	evenue less expenses. Subtract line 10 mont line 12	Re	eginning of Current Year	End of Year						
Net Assets or Fund Balances	20 T	otal assets (Part X, line 16)		5,183,023.	4,572,991.						
ASS	21 T	otal liabilities (Part X, line 26)		18,773.	10,520.						
돌	22 N	et assets or fund balances. Subtract line 21 from line 20		5,164,250.	4,562,471.						
		Signature Block									
		es of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is						
true,	correct,	and complete, Declaration of prepare (other than officer) is based on all information of whi	ich prepare	r has any knowledge	/ 2						
		Signature of officer		Date / Date							
Sig	Ι.			Date							
Her	e	Type or print name and title									
		Print/Type preparer's name Preparer's signature /	0.00	Date , Check	PTIN						
Paid		VILLIAM G. STAMM, CPA William /)	CPH	10-4-12 if self-employe							
	-	Firm's name DUPLANTIER, HRAPMANN, HOGAN & MA	HER,	LLP Firm's EIN	72-0567396						
		Firm's address 1615 POYDRAS STREET, SUITE 2100									
		NEW ORLEANS, LA 70112		Phone no (<u>504) 586-8866</u>						
May	the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No						

	990 (2011) AMERICAN SUGAR CANE LEAGUE OF THE USA 72-0118440 Page 2
Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO DEVELOP, ADVANCE AND ENCOURAGE THE SUGAR CANE GROWING AND
	PROCESSING ACTIVITIES IN EVERY SENSE; AGRICULTURAL, MECHANICAL,
	SCIENTIFIC, ETC.
2	Did the organization undertake any significant program services during the year which were not listed on
_	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	bit the organization course contacting, or make digitimetric charges in new k contaction, any program contacting
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$
	THE MAJOR FUNCTION OF THE LEAGUE SINCE IT'S INCEPTION IS THE PROMOTION
	OF AGRICULTURAL RESEARCH OF SUGAR CANE PRODUCTION. THE LEAGUE ALSO
	PUBLISHES THE SUGAR BULLETIN ON A MONTHLY BASIS
46	/o
4b	(Code) (Expenses \$
	BULLETIN AND OTHER MEMBER SERVICES
	DOLLETIN AND OTHER MEMBER SERVICES
4c	(Code) (Expenses \$
	PUBLIC AWARENESS AND RELATIONS
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶
	Form 990 (2011

			Yes_	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5	X	
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	-		——
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
Ŭ	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			ĺ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	<u> </u>
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		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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	ادمدا		x
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 11e	X	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116	71	
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
19a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>X</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	16		x
47	located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	'''		<u> </u>
	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
. •	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990	(2011)

Part IV Checklist of Required Schedules (continued)

•		i	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		۱	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			۱
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		١.,
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		}	_U
	Schedule K. If "No", go to line 25	24a	<u> </u>	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	-	-
¢	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	l		
	any tax-exempt bonds?	24c		-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	├
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			1
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
Þ	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	051		
••	Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	26		X
07	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	20		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
		27		х
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20				
-	instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	İ	Х
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	X
34	Was the organization related to any tax-exempt or taxable entity?	1		i
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X	<u> </u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35ь		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	-	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		1,7	
	Note. All Form 990 filers are required to complete Schedule O	38	X	<u></u>
		Form	990	(2011)

13 Section 501(c)(29) qualified nonprofit health insurance issuers.

a is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13b 13c X 14a

Form **990** (2011)

12b

13a

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

•	and the state of t					(V)		
	Check if Schedule O contains a response to any question in this Part VI					X		
Sec	tion A. Governing Body and Management					••		
		1.	1.4	······	Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	44					
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0	4.	44					
	Enter the number of voting members included in line 1a, above, who are independent	1b		1				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ıp wıtı	any other	2		X		
_	officer, director, trustee, or key employee?	ho diror	t augangalan	-				
3	Did the organization delegate control over management duties customarily performed by or under the	ie direc	a supervision	3		X		
	of officers, directors, or trustees, or key employees to a management company or other person?	000	e filed?	4		X		
4	Did the organization make any significant changes to its governing documents since the prior Form Did the organization become aware during the year of a significant diversion of the organization's as		is illed i	5		X		
5 6	Did the organization become aware during the year of a significant diversion of the organization's as	3003		6	Х			
7a	Did the organization have members of stockholders, or other persons who had the power to elect or a	nnoint	one or					
10	more members of the governing body?	ppoint	One of	7a	X			
.	Are any governance decisions of the organization reserved to (or subject to approval by) members,	etockh	olders or					
	persons other than the governing body?	Stockin	3,0013, 01	7b	Х			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ear hy th	e following	·····	 -			
	The governing body?	oar by th	o lonowing	8a	Х			
	Each committee with authority to act on behalf of the governing body?			8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached :	at the					
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	401104	at 1110	9		Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenu	e Code)					
					Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a		X		
	If "Yes," did the organization have written policies and procedures governing the activities of such	hapter	s, affiliates,					
	and branches to ensure their operations are consistent with the organization's exempt purposes?							
11a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
	2a Did the organization have a written conflict of interest policy? If "No," go to line 13							
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	e to con	flicts?	12b				
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "							
	in Schedule O how this was done			12c				
13	Did the organization have a written whistleblower policy?			13		X		
14	Did the organization have a written document retention and destruction policy?			14		X		
15	Did the process for determining compensation of the following persons include a review and approx	val by ir	dependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?						
а	The organization's CEO, Executive Director, or top management official			15a		X		
ь	Other officers or key employees of the organization			15b		X		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	vith a					
	taxable entity during the year?			16a	ļ	X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization	anızatıc	n's		•			
	exempt status with respect to such arrangements?			16b	<u> </u>	<u> </u>		
<u>Sec</u>	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► NONE							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	-Γ (Sect	ion 501(c)(3)s only)	avaılab	le			
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website Another's website X Upon request			-1.5				
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	ot interest policy, an	o finar	icial			
••	statements available to the public during the tax year.			Þ				
20	State the name, physical address, and telephone number of the person who possesses the books JAMES SIMON - (985) 448-3707	and red	ords of the organiza	on: •				
	206 EAST BAYOU ROAD, THIBODAUX, LA 70301							
13200 01-23	5 12			Form	990	(2011)		

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

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	(C) Position (do not check more than o						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	stee or director		Officer	recto		tee)	from the	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JAMES H. SIMON										
GENERAL MANAGER	40.00	X		X		$oxed{oxed}$		130,560.	0.	0.
(2) WALLACE ELLENDER, III							1			•
PRESIDENT	1.00	X	ļ	Х		<u> </u>		0.	0.	0.
(3) MIKE DAIGLE						1				
VICE PRESIDENT	1.00	X		X	L	<u> </u>	<u> </u>	0.	0.	0.
(4) MICHAEL MELANCON										•
SECRETARY	1.00	X		X		_	$ldsymbol{ldsymbol{ldsymbol{eta}}}$	0.	0.	0.
(5) CHARLIE SCHUDMAK										
TREASURER	1.00	X		X			ļ	0.	0.	0.
(6) CRAIG CAILLIER			ĺ				1			
BOARD MEMBER	1.00	X	ļ					0.	0.	0.
(7) DANIELS DUPLANTIS, JR		l								_
BOARD MEMBER	1.00	X	<u> </u>	L.			<u> </u>	0.	0.	0.
(8) JOHN F. GAY										
BOARD MEMBER	1.00	Х	ļ		<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(9) WARREN HARANG, III										^
BOARD MEMBER	1.00	X	ļ			_	ļ	0.	0.	0.
(10) JOEL LANDRY										
BOARD MEMBER	1.00	X	<u> </u>	_		<u> </u>	╙	0.	0.	0.
(11) TODD LANDRY		l								_
BOARD MEMBER	1.00	X	<u> </u>		<u> </u>		<u> </u>	0.	0.	0.
(12) DAVID THIBODEAUX		-			ì					
BOARD MEMBER	1.00	X	<u> </u>			<u> </u>	_	0.	0.	0.
(13) JIM SIMON							1			_
BOARD MEMBER	1.00	X	<u> </u>	ļ	_	_	L	0.	0.	0.
(14) WINDELL R. JACKSON			ļ							
BOARD MEMBER	1.00	X	╙	ļ	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	ļ	0.	0.	0.
(15) JOHN CONSTANT		1		1						_
BOARD MEMBER	1.00	X		-		 	┡	0.	0.	0.
(16) NANNETTE NICKENS	, , ,									_
BOARD MEMBER	1.00	X	_	<u> </u>	 	<u> </u>		0.	0.	0.
(17) HERMAN WAGUESPACK, JR.										
BOARD MEMBER	1.00	X	1	<u> </u>	L_		<u> </u>	0.	0.	0 . Form 990 (2011)

132007 01-23-12

Form **990** (2011)

(B)		•	•	1		(D)	(E)	(F)	
hours per week (describe	offic	not c	heck ss pe	more rson recto	than is bot or/trus	n an tee)	compensation from the	compensation from related organizations	Estimated amount of other compensation
related	Individual trustee or di	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
1.00	x							0.	0.
			_		†				
1.00	Х				ļ		0.	0.	0.
1 00	,,		,,					0	_
1.00	X		X	-			0.	0.	0.
1.00	x						0.	0.	0.
1.00	1				\vdash		•	-	
1.00	X						0.	0.	0.
1.00	X						0.	0.	0.
1 00	l							0	
1.00	X		_	 -	├		0.	0.	0.
1 00	v						0	0.	0.
1.00	^			-	 		•		<u> </u>
1.00	X						0.	0.	0.
L			.				130,560.	0.	0.
II, Section A					\blacktriangleright		0.		0.
					<u> </u>		 		0.
not limited to th	ose	liste	ed a	bov	e) wi	o r	eceived more than \$100	,000 of reportable	1
								<u></u>	Yes No
		e, ke	y er	nplo	yee	or	highest compensated e	mployee on	
									3 X
-		-						the organization	4 X
								dual for services	
-				-		U.u.	od organization or many	101 001 VI000	5 X
									sation from
the calendar y	ear	ena	ng v	vitn	Or W	unir		year.	(C)
address	N	INC	Ξ					ervices	Compensation
						\dashv			
						- 1			
									-
			•						
including but r	not li	mite	ed to	tho	ose II	stec	d above) who received m	nore than	
	Average hours per week (describe hours for related organizations in Schedule O) 1.00	Average hours per week (describe hours for related organizations in Schedule O) 1.00 X Average hours per week (describe hours for related organizations in Schedule O) 1.00 X Average hours per week (describe hours for related organizations in Schedule O) 1.00 X 1.00	Average hours per week (describe hours for related organizations in Schedule O) 1.00 X 1.00	Average hours per week (describe hours for related organizations in Schedule O) 1.00 X 1.00	Average hours per week (describe hours for related organizations in Schedule O) 1.00 X 1.00	Average hours per week (describe week (describe hours for related organizations in Schedule O) 1.00 X Average hours per week (describe hours for related organizations in Schedule O) 1.00 X 1.00			

132008 01-23-12

Part VII Section A. Officers, Directors,		nplo	yee			ligh	est_			(D)
(A) Name and title	(B) Average			(C Posi	tion			(D) Reportable	(E) Reportable	(F) Estimated
	hours	(cl	neck	all t	that apply)			compensation	compensation	amount of
	per week	Individual trustee or director	Institutional frustee	Officer	Кеу ептріоуее	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) MIKE COMB	1 00								0	
BOARD MEMBER	1.00	Х						0.	0.	0 .
(28) C.J. DAIGLE BOARD MEMBER	1.00	х						0.	0.	0 .
	1.00	1			_					
(29) NEVILLE DOLAN	1.00	Х						0.	0.	0.
BOARD MEMBER	1.00	Λ	 	\vdash				0.		
(30) PETER DUFRESNE BOARD MEMBER	1.00	Х						0.	0.	0.
(31) JOHN F. EARLES, II	1.00	1								
BOARD MEMBER	1.00	Х						0.	0.	ο.
(32) MARK ENGEMANN		-	_							
BOARD MEMBER	1.00	X			1			0.	0.	0
(33) RICKY GONSOULIN										
BOARD MEMBER	1.00	Х						0.	0.	0.
(34) RONALD GONSOULIN										
BOARD MEMBER	1.00	X						0.	0.	0
(35) GARY GRAVOIS										
BOARD MEMBER	1.00	X						0.	0.	0
(36) CHARLES GUIDRY			1							
BOARD MEMBER	1.00	X	_					0.	0.	0
(37) BRYAN HARANG	1 00						ŀ			
BOARD MEMBER	1.00	X		_	_		<u> </u>	0.	0.	0
(38) JIM HARPER	1 00	.,							0.	0
BOARD MEMBER	1.00	X			_	<u> </u>	\vdash	0.		0
(39) ROBERT JUDICE, JR.	1 00	x						0.	0.	0
BOARD MEMBER	1.00	1	-	\vdash			┢╌		0.	<u> </u>
(40) SCOTT KESSLER	1.00	v						0.	0.	0
BOARD MEMBER (41) DUANE LEGENDRE	1.00	A	╁	 		_	-	- 0.		-
BOARD MEMBER	1.00	x						0.	0.	0
(42) WILL LEGENDRE										
BOARD MEMBER	1.00	X				ļ		0.	0.	0
(43) EDWARD LEVERT, III				1			Г			
BOARD MEMBER	1.00	X						0.	0.	o
(44) CHRIS MATTINGLY										
BOARD MEMBER	1.00	X			L	L	L	0.	0.	0
(45) FRANK MINVIELLE										
BOARD MEMBER	1.00	X						0.	0.	0
(46) GREG NOLAN										
BOARD MEMBER	1.00	X		1	1	1	1	0.	0.	0

								OF THE USA	/2-011	8440
Part VII Section A. Officers, Directors, Tru		mple	yee			ligh	est			· -
Name and title	(B) Average hours	(c		Posi all t	ition		ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual frustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(47) RIVERS PATOUT										
BOARD MEMBER	1.00	X	_			_		0.	0.	0 .
48) JOEY J. ROBICHAUX BOARD MEMBER	1.00	x						0.	0.	0
(49) RANDALL ROMERO										
BOARD MEMBER	1.00	X						0.	0.	0.
(50) DONALD SEGURA			_							
BOARD MEMBER	1.00	X	L			ļ		0.	0.	0.
(51) BRYAN O. SIMON	, , , ,							_		_
BOARD MEMBER	1.00	X						0.	0.	0 .
(52) FRANKIE A. SOTILE	1 00	,								•
BOARD MEMBER	1.00	Х	-	-		<u> </u>		0.	0.	0
(53) DAVID B. STEWART	1.00	х						0.	ο.	0.
BOARD MEMBER (54) TOMMY THIBODEAUX	1.00	^						0.		
BOARD MEMBER	1.00	х	1					0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue (D) Revenue (C) (A) (B) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Gifts, Grants illar Amounts 1a 1 a Federated campaigns **b** Membership dues 1b 1c c Fundraising events d Related organizations 1d Contributions, and Other Simi 1e e Government grants (contributions) f All other contributions, gifts, grants, and 1f similar amounts not included above Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Business Code 900099 2381637. 2381637. 2 a MEMBERSHIP DUES Program Service Revenue 39,235. **BULLETIN-ADVERTISING** 541800 39,235 525. 525. **BULLETIN-SUBSCRIPTIONS** 541800 f All other program service revenue 2421397. ▶ g Total. Add lines 2a-2f Investment income (including dividends, interest, and 73,274 73,274. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory b Less: cost or other basis 576 and sales expenses < 576 c Gain or (loss) <576.b <576.b d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses ightharpoonupc Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue 184,604. 184,604. CROP RECEIPTS 541800 5,917 5,917. MISCELLANEOUS REVENUE 541800 С All other revenue 190,521. Total. Add lines 11a-11d 2684616. 2571582 39,760. 73,274. Total revenue. See instructions Form **990** (2011)

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).

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	3b, 9b, and 10b of Part VIII.	,	expenses	general expenses	expenses
	Grants and other assistance to governments and	1 006 224			
	organizations in the United States See Part IV, line 21	1,806,234.			
	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22			[
	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16		· · · ·		······
	Benefits paid to or for members				
	Compensation of current officers, directors, trustees, and key employees				
	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and			}	
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	434,520.			
	Pension plan accruals and contributions (include	134/3201			
	section 401(k) and section 403(b) employer contributions)	15,165.			
	Other employee benefits	13,103+		-	
	Payroll taxes	31,118.			
	Fees for services (non-employees)	21,1101		-	
	Management				
	Legal	35,022.			
	Accounting	11,200.			
	Lobbying	43,686.			
	Professional fundraising services See Part IV, line 17				
	Investment management fees				
	Other	3,945.			
_	Advertising and promotion	14,085.	· · - ·		
	Office expenses	60,931.			
	Information technology				
	Royalties				•
	Occupancy	20,135.			
	Travel	46,386.			
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings	25,083.			
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	42,103.			
	Insurance	96,532.			
	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
	WASHINGTON OFFICE CONTR	256,407.		[······································
	HOUMA FARM EXPENSE	142,193.			
	STUDIES AND CONTRACTS	73,535.			
	LOUISIANA OFFICE CONTRA	39,313.			
	All other expenses	75,590.			
	Total functional expenses. Add lines 1 through 24e	3,273,183.			
	Joint costs. Complete this line only if the organization	,	 		
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				
	Check here If following SOP 98-2 (ASC 958-720)				

132010 01-23-12

Pa	rt X	Balance Sheet				1	T
					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			81,065.	1	225,017.
	2	Savings and temporary cash investments		1	4,482,885.	2	3,758,173.
	3	Pledges and grants receivable, net		<u></u>		3	
	4	Accounts receivable, net			·····	4	6,964.
	5	Receivables from current and former officers, di	rectors	s, trustees, key			
		employees, and highest compensated employe	es. Co	mplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)), persons described in section 4958(c					
		employers and sponsoring organizations of sections	tion 50	1(c)(9) voluntary			
LO.		employees' beneficiary organizations (see instru	ctions) <u> </u>		6	
Assets	7	Notes and loans receivable, net				7	
Ąŝ	8	Inventories for sale or use		1		8	
	9	Prepaid expenses and deferred charges		Ĺ	45,000.	9	47,486.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	913,322.			
	Ь	Less: accumulated depreciation	10b	382,047.	569,284.	10c	531,275. 2,783.
	11	Investments - publicly traded securities			2,930.	11	2,783.
	12	Investments - other securities. See Part IV, line		12			
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11			1,859.	15	1,293.
	16	Total assets. Add lines 1 through 15 (must equ	al line :	34)	5,183,023.	16	1,293. 4,572,991. 1,287.
	17	Accounts payable and accrued expenses			1,540.	17	1,287.
	18	Grants payable			18		
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
es	21	Escrow or custodial account liability. Complete	of Schedule D		21		
Liabilities	22	Payables to current and former officers, director	s, trus	tees, key employees,			
iab		highest compensated employees, and disqualifi	ed per	sons Complete Part II			
_		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated th	ird parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	17-24). Complete Part X of	15 000		
		Schedule D		_	17,233.	25	9,233.
	26	Total liabilities. Add lines 17 through 25		[17]	18,773.	26	10,520.
		Organizations that follow SFAS 117, check he	ere 🟲	X and complete			
Ses		lines 27 through 29, and lines 33 and 34.			4 (22 200		4 005 000
<u>a</u>	27	Unrestricted net assets		<u></u>	4,622,398.	27	4,085,808. 476,663.
æ	28	Temporarily restricted net assets		-	541,852.	28	4/6,003.
בַ	29	Permanently restricted net assets		. — . +		29	
Ę		Organizations that do not follow SFAS 117, cl	heck h	ere 🕨 📖 and			
S O		complete lines 30 through 34.					
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		<u> </u>	-	30	
As	31	Paid-in or capital surplus, or land, building, or ec		<u> </u>		31	
Net	32	Retained earnings, endowment, accumulated in	come,	or other funds	E 164 252	32	A 560 A71
_	33	Total net assets or fund balances		<u> </u>	5,164,250.	33	4,562,471.
	34	Total liabilities and net assets/fund balances			5,183,023.	34	4,572,991.

Form 990 (2011)

	1990 (2011) AMERICAN SUGAR CANE LEAGUE OF THE USA	72-	0118440	Da	ge 12
	rt XI Reconciliation of Net Assets		0110110	га	<u>ue 12</u>
•	Check if Schedule O contains a response to any question in this Part XI				X
			-		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,68		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,27	3,1	83.
3	Revenue less expenses. Subtract line 2 from line 1	3	<58	8,5	67.>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,16	4,2	50.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<1	3,2	12.>
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	4,56	2,4	71.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Cash Cornal X Other MODIFIE	D CA	SH		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<u> </u>	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Aud	ıt		
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audi	t		

or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

132012 01-23-12

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

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

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Nam	e of organization			E	mployer identification number
_	AMERICA	N SUGAR CANE LEA	GUE OF THE	USA	72-0118440
Pa	rt I-A Complete if the org	anization is exempt und	der section 501(c)	or is a section 52	7 organization.
2	Provide a description of the organiz Political expenditures Volunteer hours			ın Part IV.	> \$
Pa	rt I-B Complete if the org	anization is exempt und	der section 501(c)	(3).	·
1	Enter the amount of any excise tax	incurred by the organization un	der section 4955		> \$
2	Enter the amount of any excise tax	ncurred by organization manag	ers under section 4955	5	> \$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720) for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	rt I-C Complete if the org	anization is exempt un	der section 501(c)		
1	Enter the amount directly expended	by the filing organization for se	ection 527 exempt func	tion activities	> \$
2	Enter the amount of the filing organ	zation's funds contributed to o	ther organizations for s		
	exempt function activities				> \$
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here	and on Form 1120-POL	••	
	line 17b				▶\$ Yes
	Did the filing organization file Form Enter the names, addresses and en made payments. For each organiza contributions received that were pro- political action committee (PAC). If a	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to	id from the filing organi a separate political org	zation's funds. Also ent janization, such as a se	which the filing organization er the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fro filing organization funds. If none, enter	's contributions received and

132041 01-27-12

LHA

Schedule C (Form 990 or 990-EZ) 2011

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

Schedule C (Form 990 or 990-EZ) 2011 A	MERICAN SU	GAR CANE LE	AGUE OF THE		0118440 Page 2
Part II-A Complete if the orga		npt under sectio	n 501(c)(3) and file	d Form 5768	
(election under secti	on 501(h)).				
A Check if the filing organization	on belongs to an affi	liated group (and list in	Part IV each affiliated	group member's nar	ne, address, EIN,
expenses, and share	of excess lobbying	expenditures).			
B Check 🕨 🔲 if the filing organization	on checked box A_ar	nd "limited control" pro	ovisions apply.		
	on Lobbying Expe	nditures Ints paid or incurred.		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influe	ence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influe	ence a legislative boo	dy (direct lobbying)			<u> </u>
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures	j.				
e Total exempt purpose expenditures	(add lines 1c and 1c	d)			
f Lobbying nontaxable amount. Enter	the amount from the	e following table in bot	h columns.		
If the amount on line 1e, column (a) or	(b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000,	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,50	0,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,0	00,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.			
g Grassroots nontaxable amount (ente	er 25% of line 1f)		<u>_</u>		
h Subtract line 1g from line 1a. If zero	or less, enter ·0·				
i Subtract line 1f from line 1c. If zero	or less, enter -0-				
j If there is an amount other than zero	on either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this ye	ear?				Yes No
	tions that made a s		Section 501(h) n do not have to comp es 2a through 2f on pa		
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a. Lohbying postavable amount					
Lobbying nontaxable amount b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures				_	
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 AMERICAN SUGAR CANE LEAGUE OF THE USA 72-011844

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). 72-0118440 Page 3

r each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description the lobbying activity.	(6	a)	(b)
	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				·
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				-
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				_
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	ction 501/c	(5) or se	ction	
Part III-A Complete if the organization is exempt under section 501(c)(4), se 501(c)(6).		(J), OI SE	CUOII	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		Х
art III-B Complete if the organization is exempt under section 501(c)(4), se	ction 501(c	(5), or se	ection	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answe	red "No" Of	R (b) Part	: III-A, lin	e 3, is
answered "Yes."			3 38.	637
Dues, assessments and similar amounts from members		1	2,38	L , 637
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p 	olitical	1	2,38	1,637
Dues, assessments and similar amounts from members	olitical			
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p expenses for which the section 527(f) tax was paid). a Current year 	olitical	2a		1,637 3,686
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p expenses for which the section 527(f) tax was paid). 	olitical	2a 2b	4:	3,686
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total 		2a 2b 2c	4:	
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due 	s	2a 2b	4:	3,686
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the 	s e excess	2a 2b 2c	4:	3,686
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying a 	s e excess	2a 2b 2c 3	4:	3,686
 Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pexpenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the 	s e excess	2a 2b 2c	4:	3,686

Schedule C (Form 990 or 990-EZ) 2011

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number 72-0118440

	AMERICAN SUGAR CAN				72-0118440
Pa	TI Organizations Maintaining Donor Advise	ed Funds o	r Other Similar Fund	s or Acco	unts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin				
		(a) Do	nor advised funds	(b) Fur	nds and other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in	writing that th	e assets held in donor advi	sed funds	
	are the organization's property, subject to the organization's	exclusive lega	al control?		Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writ	ing that grant funds can be	e used only	
	for charitable purposes and not for the benefit of the donor of	or donor advis	or, or for any other purpose	conferring	
	Impermissible private benefit?				Yes No
Pa	t II Conservation Easements. Complete if the or	ganization ans	wered "Yes" to Form 990,	Part IV, line 7	•
1	Purpose(s) of conservation easements held by the organizat				
	Preservation of land for public use (e.g., recreation or e	•	Preservation of an hi	storically imp	ortant land area
	Protection of natural habitat	· · · · · · · · · · · · · · · · ·	Preservation of a cer		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a quali	fied conservat	ion contribution in the form	of a conserv	ration easement on the last
	day of the tax year.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	2, 0, 1				Held at the End of the Tax Year
а	Total number of conservation easements			2a	
b	Total acreage restricted by conservation easements			2b	
c	Number of conservation easements on a certified historic str	ructure include	ed in (a)	2c	
	Number of conservation easements included in (c) acquired		` '	ture	
_	listed in the National Register	2.10. 0,,		2d	
3	Number of conservation easements modified, transferred, re	leased extina	uished or terminated by th		n during the tax
•	year ▶	acasca, camig	dionod, or tommiated by the	o organizatio	n coming the tax
4	Number of states where property subject to conservation ea	sement is loca	ated >		
5	Does the organization have a written policy regarding the pe				
	violations, and enforcement of the conservation easements				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		conservation easements	during the yea	ar ▶
7	Amount of expenses incurred in monitoring, inspecting, and				
8	Does each conservation easement reported on line 2(d) abor				
	and section 170(h)(4)(B)(ii)?	•	·		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements	s in its revenue and expens	e statement,	and balance sheet, and
	include, if applicable, the text of the footnote to the organiza				
	conservation easements.				
Pa	TIII Organizations Maintaining Collections of	of Art, Histo	orical Treasures, or C	Other Simi	lar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, I	ine 8.		
1a	If the organization elected, as permitted under SFAS 116 (As	SC 958), not to	report in its revenue state	ment and bal	lance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, educa	ation, or research in further	ance of public	c service, provide, in Part XIV,
	the text of the footnote to its financial statements that descr	nbes these iter	ns.		
ь	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to rep	oort in its revenue statemer	nt and balanc	e sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e				
	relating to these items:				
	(i) Revenues included in Form 990, Part VIII, line 1			>	\$
	(ii) Assets included in Form 990, Part X			•	\$
2	If the organization received or held works of art, historical tre	easures, or oth	er sımılar assets for financı	al gain, provi	
	the following amounts required to be reported under SFAS 1			,	
а	Revenues included in Form 990, Part VIII, line 1	,,	-	>	\$
Ь				▶	\$
-	,		-	· ·	

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011

132053 01-23-12

6200

Sche	dule D (Form 990) 2011 AMERICAN SUGAR CANE LEAGUE	OF T	HE USA	72-0	0118440	Page 4
	AXI Reconciliation of Change in Net Assets from Form 990 to	o Audite	d Financial State	ement	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		2,684,	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		3,273,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			,567.
4	Net unrealized gains (losses) on investments		4		<13,	<u>,212.</u> >
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net). Add lines 4 through 8	•	9			<u>,212.</u> >
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a		10			,779.
Pai	t XII Reconciliation of Revenue per Audited Financial Statem	ents Wit	h Revenue per F	Return	2 671	000
1	Total revenue, gains, and other support per audited financial statements			1	2,671,	,980.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 - 1	×12 212			
а	Net unrealized gains on investments	2a	<13,212.			
b	Donated services and use of facilities	2b		-		
C	Recoveries of prior year grants	2c	576.	-		
d	Other (Describe in Part XIV.)	2d	3/6.	1 1	~12	626
е	Add lines 2a through 2d			2e	<12, 2,684	616
3	Subtract line 2e from line 1			3	2,004	, 010.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 4-1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b		1 1		
b	Other (Describe in Part XIV.)	40		4c		0.
C	Add lines 4a and 4b			5	2,684	616.
D _D	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) TXIII Reconciliation of Expenses per Audited Financial Staten	nents Wi	th Expenses per			0101
1	Total expenses and losses per audited financial statements	1101110 111	ttt assported por	1	3,273	759.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
- a	Donated services and use of facilities	2a				
b	Prior year adjustments	2b		1		
-	Other losses	2c		1 1		
d	Other (Describe in Part XIV.)	2d	576.			
e	Add lines 2a through 2d			2e		576.
3	Subtract line 2e from line 1			3	3,273	,183.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b] [
c				4c		0.
5_	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,273	<u>,183.</u>
	rt XIV Supplemental Information			_		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part					4; Part
X, lın	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also con	nplete this i	part to provide any ac	Iditional	l information.	
						
וגר	RT XII, LINE 2D - OTHER ADJUSTMENTS:					
PAI	RT XII, LINE 2D - OTHER ADJUSTMENTS:	<u> </u>			· 	
LOS	SS ON SALE OF ASSETS					576.
<u> </u>	OD ON DIME OF NODELO					
PA	RT XIII, LINE 2D - OTHER ADJUSTMENTS:					
LO	SS ON SALE OF ASSETS					576.
<u></u>	OU OILLE OF HOUSE					
			-	Sched	dule D (Form 9	90) 2011

10101003 785325 6200

01-23-12

Employer identification number 72-0118440 Open to Public OMB No 1545-0047 Inspection Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. THE USA OF. AMERICAN SUGAR CANE LEAGUE General Information on Grants and Assistance Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1 (Form 990) Parti

g (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any RESEARCH RESEARCH RESEARCH RESEARCH RESEARCH RESEARCH RESEARCH recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed and address of organization (b) EIN (c) IRC section or government (d) Method of II applicable cash grant assistance other) ö 。 ó ö 。 。 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 16,088. 659,875, 310,010 786,032 5,000 29,229 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501(C)(3) 501(C)(3) 501(C)(3) 72-6000848 72-0564834 52-1314447 72-1209760 72-1113069 criteria used to award the grants or assistance? LSU AGRICULTURAL CENTER, PO BOX 287 1 (a) Name and address of organization LOUISIANA SUGARCANE FESTIVAL LOUISISANA STATE UNIVERSITY USDA HOUMA RESEACH STATION URY'S MANUFACTURING, INC. AMERICAN SUGAR ALLIANCE BATON ROUGE, LA 70894 NEW IBERIA, LA 70562 NEW IBERIA, LA 70563 GRANTS UNDER \$5,000 ARLINGTON, VA 22201 2111 WILSON BLVD 6704 GONDRON RD HOUMA, LA 70361 PO BOX 9768 PO BOX 470 Part #

Schedule I (Form 990) (2011)

Schedule I (Form 990) (2011)

23

132102 01-27-12

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AMERICAN SUGAR CANE LEAGUE OF THE USA

Employer identification number 72-0118440

TRIBETORN DOGING CHANGE BERNOOD OF THE COME. YE CITOTIO
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SENSE; AGRICULTURAL, MECHANICAL, SCIENTIFIC, ETC.
FORM 990, PART VI, SECTION A, LINE 6: THE ARE 5 CLASSES OF MEMBERSHIP AS
FOLLOWS:
PRODUCER MEMBER: AN INDIVIDUAL, FIRM OR CORPORATION PRODUCTING OR GROWING
SUGAR CANE, BUT NOT PROCESSING OR MANUFACTURING SUCH CANE INTO CAN PRODUCTS
PROCESSOR MEMBER: AN INDIVIDUAL, FIRM OR CORPORATION OPERATING A SUGAR
FACTORY OR FACTORIES, PROCESSING SUGAR CANE, OR OPERATING A FARM AND A
SUGAR FACTORY OR FACTORIES GROWING AND PROCESSING SUGAR CANE
ASSOCIATE MEMBER: A SALARIED EXECUTVE, ADMINISTRATIVE OR PROFESSIONAL
EMPLOYEE DESIGNATED BY EACH PRODUCER MEMBER AND EACH PROCESSOR MEMBER.
HONORARY LIFE MEMBER: AN INDIVIDUAL ELECTED BY THE BOARD OF DIRECTOR
WITHOUT PAYMENT OF DUES
COMMERCIAL MEMBER: AN INDIVIDUAL, FIRM, CORPORATION, BANK, TRANSPORTATION
COMPANY OR OTHER COMMERCIAL OR FINANCIAL BUSINESS UNIT DEALING WITH
PRODUCERS OR PROCESSORS OF SUGAR CANE, OR DEALING IN SUGAR CANE, SUGAR,
SYRUP, MOLASSES OR OTHER PRODUCTS OR BY-PRODUCTS OF SUGAR CANE
FORM 990, PART VI, SECTION A, LINE 7A: ASSOCIATE MEMBERS ARE ELECTED BY
OTHER MEMBERS. EACH PRODUCER MEMBER AND EACH PROCESSOR MEMBER MAY DESIGNATE
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011) 24
/4

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:

-13,212.

THE ORGANIZATION USES THE MODIFIED CASH BASIS OF ACCOUNTING.

01-23-1

Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization		CHORD	CANE	T E A CUE	05	mur	TICA		Employer ident	Page 2 ification number 8440
	AMERICAN	SUGAR	CANE	LEAGUE	OF	THE	USA		/2-011	8440
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Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

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

2011 Open to Public Inspection

OMB No 1545-0047

Employer identification number 72-0118440

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

AMERICAN SUGAR CANE LEAGUE OF THE USA

(e)	(q)	(0)	(D)	(e)	()
Name, address, and EIN of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controlling entity

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

(a)	(q)	(၁)	(D)	(e)	€	(6)	657
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	controlled	ĵ,
of related organization		foreign country)	section	status (if section	entity	entity?	
				501(c)(3))		Yes	8
AMERICAN SUGAR CANE LEAGUE FOUNDATION -							
72-0899319, P.O. BOX 938, THIBODAUX, LA				509(G)(3)			
70302	NONPROFIT	LOUISIANA	501(C)(3)	TYPE II	N/A	_	×
AMERICAN SUGAR CANE LEAGUE POLITICAL ACTION							
COMMITTER - 72-0852434, P.O. BOX 938,							
THIBODAUX, LA 70302	POLITICAL ACTION COMMITTEE LOUISIANA	LOUISIANA	501(C)(23)	N/A	N/A	_	
AMERICAN SUGAR CANE LEAGUE SUGAR POLITICAL							
ACTION COMMITTEE - 72-1184218, P.O. BOX 938,			_				
THIBODAUX LA 70302	POLITICAL ACTION COMMITTEE LOUISIANA	LOUISIANA	527	N/A	N/A	~	×
		_					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	s for Form 990.				Schedule R (Form 990) 2011	Form 990)	2011

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

72-0118440 , Page 2

Schedule R (Form 990) 2011 AMERICAN SUGAR CANE LEAGUE OF THE USA

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

income end-of-year ownership assets	Independification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)						amount in box managing ownership 20 of Schedule K-1 (Form 1065) Yes No
(Copp, Scorp, or trust)	9	orm 990, Part IV, line	orm 990, Part IV, line	orm 990, Part IV, line	orm 990, Part IV, line	orm 990, Part IV, line	end-of-year are allocations? Yes No
entity (C		n answered "Yes" to f	n answered "Yes" to (d)	n answered "Yes" to	n answered "Yes" to	n answered "Yes" to	n answered "Yes" to f
(state or foreign country)		te if the organization	te if the organization	te if the organization	te if the organization	te if the organization	(related, unrelated, excluded from tax under sections 512-514) sections 512-514) mplete if the organization (re)
	3	ration or Trust (Comple ear.) (b)	ration or Trust (Comple ear.)	ration or Trust (Comple ear.)	ration or Trust (Comple	ration or Trust (Comple	entity (re excluses services ser.)
		as a Corpoing the tax y	as a Corpor	as a Corpoing the tax y	as a Corpoi	as a Corpoi	domicile (state or breign country) country) as a Corpor
		anizations Taxable poration or trust dur	anizations Taxable	anizations Taxable	anizations Taxable	anizations Taxable	anizations Taxable
of related organization		1 1					Part IV Identification of Related Organizations treated as a corp

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

Note. Complete line 1 if any entity is listed in Parts II, iII, or IV of this schedule.				×	Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	lated organizations listed	in Parts II-IV?		
a Receipt of (i) interest (ii) annuttes (iii) royalties or (iv) rent from a controlled entity				1a	×
b Gift, grant, or capital contribution to related organization(s)				16	X
c Gift, grant, or capital contribution from related organization(s)				10	×
d Loans or loan quarantees to or for related organization(s)				19	×
				10	×
				?	
f Sale of assets to related organization(s)				=	×
g Purchase of assets from related organization(s)				19	×
h Exchange of assets with related organization(s)				ŧ	×
i Lease of facilities, equipment, or other assets to related organization(s)				;=	×
j Lease of facilities, equipment, or other assets from related organization(s)				ı,	×
k Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			*	×
I Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			=	×
	(s)uoı			Ę	× :
n Sharing of paid employees with related organization(s)				=	×
 Reimbursement paid to related organization(s) for expenses 				9	×
p Reimbursement paid by related organization(s) for expenses				16	×
 Qther transfer of cash or property to related organization(s) Other transfer of cash or property from related organization(s) 				1g 1r	××
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete th	is line, including covered	relationships and transaction thresholds.		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	j	
(1) AMERICAN SUGAR CANE LEAGUE FOUNDATION	Д	6,964.	CASH		
(2)					
ē					
A					
(5)					
(9)					
132183 01-23-12	29		Schedul	Schedule R (Form 990) 2011	90) 2011

72-0118440

Schedule R (Form 990) 2011 AMERICAN SUGAR CANE LEAGUE OF THE USA

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

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

that was not a related organization. See instructions regarding exclusion for certain investment partitions.	structions regarding exciu	Sion for certain inve	serment partnerships.	-						
(e)	a	(2)	<u>5</u>	(e)			Ξ	8	9	ક
Name, address, and EIN	Primary activity	Legal domicile	(related, unrelated, 501(c)(3)	e parmers sec 501(c)(3)	Share of total	Share of end-of-year	Dispropor- tionate	Ospropa- Code V-UBI General or Percentage bonate amount in box 20 managing ownership	seneral o managing	Percentage ownership
סופווווס		fī)	excluded from tax under section 512-514) Ye	No se	-		Yes No	(Form 1065)	Se No	
			-							
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Schedule R (Form 990) 2011

Page 2

► X

Part II Additional (Not Automatic) 3-Month Extension	n of Time. Only file the origin	al (no c	opies need	ded).
		Enter filer's	identifyin	g number, s	ee instructions
Type or Name of exempt organization or othe	Name of exempt organization or other filer, see instructions		Employer identification number (EIN) o		
print DATE CANA GUARA CANAR	AMEDICAN CUCAD CAME LEACUE OF THE UCA			72 01	10440
due data to	4- 4		X 72-0118440 Social security number (SSN)		
filing your PO DRAWER 938			Social se	cunty numbe	er (SSN)
City, town or post office, state, and Z THIBODAUX, LA 70302		lress, see instructions.	_		
Enter the Return code for the return that this app	ıcatıon is for (file a separa	te application for each return)			0 1
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990	01				
Form 990-BL	02	Form 1041-A			08
m 990-EZ 01 Form 4720		Form 4720			09
orm 990-PF 04 Form 522		Form 5227	***		10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not a JAMES S		natic 3-month extension on a prev	ously file	d Form 8868	3
Telephone No \blacktriangleright (985) $4\overline{48-3707}$ • If the organization does not have an office or p	lace of business in the Ur				▶ □
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