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Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung

benefit trust or private foundation)

OMB No 1545-0047

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

Open to Public Inspection

A F	or the	2011 calendar year, or tax year beginning SEP 1, 2011 and ending	AUG 31, 2012	
В	Check if	C Name of organization	D Employer identific	cation number
а	pplicable	INTERNATIONAL ASSOCIATION FOR		
	Addres	S HOOD DOOMDONTON		
	Name change		35-0	894354
$\overline{}$	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/su	<del></del>	
F	Termin	· · · · · · · · · · · · · · · · · · ·		)276-3344
Ή-	⊸ated ``]Amend			
$\vdash$	⊒return ∏Applica		G Gross receipts \$	3,651,805.
	⊥tion pendin		H(a) Is this a group re	
		F Name and address of principal officer.DAVID THARP	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inc	
				list. (see instructions)
		e: WWW.FOODPROTECTION.ORG	H(c) Group exemptio	
	orm of	organization: X Corporation	ear of formation: 1911 N	State of legal domicile: NJ
F	T	Summary		
ë	1 1	Briefly describe the organization's mission or most significant activities TO PROVI		
ĭan	_ :	PROFESSIONALS WORLDWIDE WITH A FORUM TO EXCH		
/err	2	Check this box  If the organization discontinued its operations or disposed of m	ore than 25% of its net as	ssets
6	3	Number of voting members of the governing body (Part VI, line 1a)	3	6
R	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	6
es.	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	12
Ž	6	Total number of volunteers (estimate if necessary)	6	150
چ	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	<u>158,223.</u>
AP Activities 2009 vernance	<u>b</u>	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
	1		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	186,843.	180,917.
	9	Program service revenue (Part VIII, line 2g)	2,943,466.	2,944,637.
SCREVENED	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,028.	34,247.
ల	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	174,446.	<u> 185,685.</u>
W.	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,317,783.	3,345,486.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	37,643.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
es S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	764,731.	815,056.
Š	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses	þ.	Total fundraising expenses (Part IX, column (D), line 25)		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,233,515.	2,236,498.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,998,246.	3,089,197.
	19	Revenue less expenses Subtract line 18 from line 12	319,537.	256,289.
Net Assets or Fund Balances		DECENTED	Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	2,605,398.	2,754,688.
AB BB	21		752,174.	574,126.
<u> ਭੂ</u>	22	Total liabilities (Part X, line 26)  Net assets or fund balances. Subtract line 2 Affonding 20113	1,853,224.	2,180,562.
Pa	art II	Signature Block		
Und	er pena	lties of pertury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which preparer	anno ban ancido acida de a	
		DIAM WINDER	Mari	h14,2013
Sig	n	Signature of officer	Date Date	
Her		▲ DAVID THARP, EXECUTIVE DIRECTOR		
		Type or print name and title		* <del>-</del>
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Paid	,		P02/20/13 self-employ	P00054885
Prep	parer	Firm's name MCGOWEN, HURST, CLARK & SMITH, P.C.	Firm's EIN	42-1104473
Use	Only	Firm's address 1601 WEST LAKES PARKWAY, SUITE 300		
		WEST DES MOINES, IA 50266	Phone no. (	515) 288-3279
May	the IF	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

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 PROVIDE FOOD SAFETY PROFESSIONALS WORLDWIDE WITH A FORUM TO
	EXCHANGE INFORMATION ON PROTECTING THE FOOD SUPPLY.
	EXCIMINED INFORMATION ON PROTECTING THE FOOD BUILDI.
	<del></del>
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?
	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 \$801,374. including grants of \$) (Revenue \$) (Revenue \$)
	THE ASSOCIATION PRINTS AND PUBLISHES JOURNALS, BOOKS AND PAMPHLETS TO
	EDUCATE THE PUBLIC AND ITS MEMBERS ABOUT FOOD SAFETY.
4b	(Code) (Expenses \$1,062,929. including grants of \$) (Revenue \$1,541,559.)
70	THE ASSOCIATION'S ANNUAL MEETING IS HELD TO INFORM ITS MEMBERS AND FOOD
	INDUSTRY PERSONNEL ABOUT ADVANCES IN FOOD SAFETY. A RECORD ATTENDANCE
	OF 2,540 FOOD SAFETY PROFESSIONALS FROM FORTY THREE COUNTRIES ATTENDED
	THIS YEAR'S ANNUAL MEETING IN PROVIDENCE, RHODE ISLAND ON JULY 22 - 25.
	DURING THIS TIME MORE THAN 850 PRESENTATIONS WERE GIVEN AND 135
	COMPANIES SHOWCASED EQUIPMENT AND THE LATEST INNOVATIONS IN FOOD
	SAFETY.
4c	(Code) (Expenses \$318,198. including grants of \$) (Revenue \$320,520.)
	THE ASSOCIATION CONDUCTS FOOD SAFETY WORKSHOPS AND HOLDS INTERNATIONAL
	SYMPOSIA TO EDUCATE THE PARTICIPANTS REGARDING ADVANCES IN FOOD SAFETY.
	THIS YEAR 3 WORKSHOPS WERE HELD IN CONJUNCTION WITH THE ANNUAL MEETING
	AND AN ADDITIONAL WORKSHOP WAS HELD IN CHICAGO. THE EUROPEAN SYMPOSIUM WAS HELD IN WARSAW, POLAND ON MAY 21 - 23, 2012 ATTRACTING OVER 260
	ATTENDEES. THE ASIA PACIFIC SYMPOSIUM WAS HELD IN MELBOURNE, AUSTRALIA
	ON SEPTEMBER 26 - 28, 2011 ATTRACTING MORE THAN 350 ATTENDEES.
	ON DEFIEMBER 20 20, 2011 ATTRACTING MORE THAN 550 ATTEMBERS.
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 2,182,501.
	Form <b>990</b> (2011)

# Form 990 (2011) FOOD PROTECTION Part IV Checklist of Required Schedules

			Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_	i	
^	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		<b>.</b>
٥	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III			X
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	8		
3	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		х
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	<u> </u>		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
ь	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
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		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			ļ
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			<b> </b>
	Schedule D, Parts XI, XII, and XIII	12a		X
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			7.7
12	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional is the organization a school described in section 170(b)(1)(A)(v)2 if "Yes," complete Schodule E.	12b		X
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E  Did the organization maintain an office, employees, or agents outside of the United States?	13		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a	<u> </u>	
	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	<u> </u>		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	х	ļ
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	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
<b>2</b> 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (	2011)

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Pai	t IV Checklist of Required Schedules (continued)		•	-30
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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	X	l
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			
	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			1
	Schedule K If "No", go to line 25	24a		X
b	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			
-	any tax-exempt bonds?	24c		
d		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		X
b				
	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		X
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		X
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			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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		28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С				
	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		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	<u></u> .	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	L	X
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	İ	X
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	35b		Х
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Form 990 (2011) FOOD PROTECTION

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
	•		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 34			
b	Enter the number of Forms W-2G included in line 1a. Enter -0 if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 12			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a				
	any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		77
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b		
C	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
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		
10	Section 501(c)(7) organizations. Enter.			
а	Initiation fees and capital contributions included on Part VIII, line 12  Once and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  [10b]			
11	Section 501(c)(12) organizations. Enter.  Gross income from members or shareholders			
a b	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against			
U	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		l
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	, <u></u>		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			İ
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	
		Farm	aan /	20111

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

	*Check of School Jo O contains a recognize to any question in this Bort \//			X
800	Check if Schedule O contains a response to any question in this Part VI			
Sec	tion A. Governing Body and Management		Vaa	
		-	Yes	No
1a	Enter the field of the field of the general group and the general group and the general group and the general group and the general group and the general group and the general group and the general group and the general group and the general group and the group and the general group and the group and group and the group and the group and the group and the group an	5		
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	_		
b	Enter the number of voting members included in line 1a, above, who are independent	의		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	Х	
7a				
1 a		7a	x	
	more members of the governing body?	14		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			X
	persons other than the governing body?	7b	-	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		7.	
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b_		_X_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	1		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue 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 chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Do to the Other transfer to the Company of the Comp			
12a	5 4 4 5 4 4 5 4 4 4 5 4 5 4 5 4 5 4 5 4	12a	x	
b	the control of the co	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		_==_	
C	in Schedule O how this was done	12c	х	
40		13	X	
13	Did the organization have a written whistleblower policy?		X	
14	Did the organization have a written document retention and destruction policy?	14	Λ	
15	Did the process for determining compensation of the following persons include a review and approval by independent	ļ		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1	37	
а	, , , , , , , , , , , , , , , , , , ,	15a	X	77
b	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 arrangement with a			
	taxable entity during the year?	16a		X
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		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only	availat	ole	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, a	nd fina	ncial	
13	statements available to the public during the tax year			
~	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the person of the pers	ation •		
20	DAVID THARP - (515)276-3344	anon p	_	
	6200 AURORA AVE, STE 200W, DES MOINES, IA 50322-2864			

132006 01-23-12

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	(C) Position (do not check more that box, unless person is b officer and a director/tr			than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) KATHERINE MJ SWANSON PRESIDENT ELECT	8.00	X		x				0.	0.	0
(2) LEE-ANN JAYKUS							-		-	
PAST PRESIDENT (3) DAVID LLOYD	8.00	X		X				0.	0.	0
AFFIL COUNCIL CHAIRPERSON (TERM 7/26	8.00	x						0.	0.	0
(4) VICKIE LEWANDOWSKI PAST PRESIDENT (TERM 7/26/12)	8.00	x			:			0.	0.	0
(5) ISABEL WALLS PRESIDENT	15.00			х		-		0.	0.	0
(6) DONALD SCHAFFNER VICE PRESIDENT	8.00			х				0.	0.	0
(7) DONALD L ZINK SECRETARY	8.00							0.	0.	0
(8) GLORIA SWICK-BROWN AFFILIATE COUNCIL CHAIRPER	8.00	x						0.	0.	0
(9) DAVID THARP EXECUTIVE DIRECTOR	40.00			x				143,725.	0.	24,684
(10) LISA HOVEY ASSISTANT DIRECTOR	40.00			х				95,603.	0.	16,198
						-	 			

Form **990** (2011)

<u>Form</u>	990	(201)	1)

FOOD PROTECTION

Part VII Section A. Officers, Directors, Tru	stees, Key Er	nplo	oyee	s, a	nd i	ligh	est	Compensated Employ	ees (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F	)
Name and title	Average	(do		Posi		than	one	Reportable	Reportable		Estim	
	hours per week					is bot or/trus		compensation	compensation from related		amou oth	
	(describe	ctor						the	organizations	c		sation
	hours for	Individual trustee or director				ped		organization	(W-2/1099-MISC)		from	
	related	stee	ruste		١.,	bensa		(W-2/1099-MISC)			organi	
	organizations in Schedule	ual tr.	leuoi		ploye	tcom/ee					and re	
	O)	pivibr	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			Ι,	organız	ations
		-	┢		¥		۳			+		
		<u> </u>	<u> </u>			_				_		·
		<u> </u>	<del> </del>					-,-		+		
										+		
						ļ	_			+		
			$\vdash$								<u></u>	
										$\top$		
1b Sub-total								239,328.		).	40,	882.
c Total from continuation sheets to Part VI	I, Section A							0.		).		0.
d Total (add lines 1b and 1c)					h	•\ <u> </u>		239,328.		).	40,	882.
2 Total number of individuals (including but n compensation from the organization	ot ilmited to tr	iose	IISTE	ea ai	DOV	e) wr	no r	eceived more than \$100	ο,υυυ οτ reportable			1
Somponeation from the organization								<del></del>	-		Ye	s No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual										3	x
4 For any individual listed on line 1a, is the su									the organization			
and related organizations greater than \$150			•							<u>                                   </u>	4 X	<u> </u>
5 Did any person listed on line 1a receive or a							elat	ted organization or indiv	idual for services		_	v
rendered to the organization? If "Yes," com Section B. Independent Contractors	plete Scheduk	e <i>J 1</i>	or si	uch	pers	son					5	X
Complete this table for your five highest co	mpensated inc	depe	ende	ent c	onti	racto	ors 1	that received more than	\$100,000 of compe		on fron	
the organization Report compensation for	•	•							•			•
(A)								(B)			(C)	
Name and business								Description of s		Con	npensa	tion
LARSON ENTERPRISES, 909		REI	ET,	, V	VE:	ST	- 1	ADVERTISING			1.00	
DES MOINES, IA 50265-2704	<u> </u>						$\dashv$	<u>SPONSORSHIPS</u>		<del></del>	160,	626.
												·
2 Total number of independent contractions (	naludina hut -	A 1	m.t	d +-	4h-	00 1.	**-	d abaya) who we seem t	are the			
2 Total number of independent contractors (i \$100,000 of compensation from the organic	-	Ot III	ıııte	u (O		se IIS 1	stec	abovej wno received n	iore than			
The state of the s				-	•			<del></del>		Fc	rm <b>99</b>	0 (2011)

FOOD PROTECTION

	•	Statement of Reven			(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under
						revenue	revenue	sections 512, 513, or 514
13	1 a	Federated campaigns	1a					
<b>5</b>	b	Membership dues	1b					
	С	Fundraising events	1c					
<u>e</u>	d	Related organizations	1d			ļ		
Ē	е	Government grants (contributi	ions) <b>1e</b>					
2	f	All other contributions, gifts, grant	ts, and				ļ	
ᆲ		similar amounts not included above		180,917.				
2	g	Noncash contributions included in lines						
and Other Similar Amounts	h	Total. Add lines 1a-1f		<b>•</b>	180,917.			
				Business Code				
2	2 a	ANNUAL MEETING		561000	1541559.	1541559.		
a)		COMMUNICATION		561000	635,313.			
Ž		MEMBERSHIP DUES		561000	447,245.			_
Revenue		WORKSHOPS		561000	320,520.			
ř	e			00000				
		All other program service reve	nue					
		Total. Add lines 2a-2f		<b>&gt;</b>	2944637.			
3		Investment income (including	dividends, intere	est, and				
		other similar amounts)		•	28,049.			28,049
4		Income from investment of tax	x-exempt bond p	roceeds				-
		Royalties	, .	<b>•</b>	18,309.			18,309
		•	(ı) Real	(II) Personal				
1 6	6 a	Gross rents		( )				
`		Less rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)		<b>•</b>				
Ι.		Gross amount from sales of	(i) Securities	(II) Other				
'	, u	assets other than inventory	312067.					
ĺ	h	Less cost or other basis						
	~	and sales expenses	306319.	0.				
	С	Gain or (loss)	5,748.					
		Net gain or (loss)	3/140.	1301	6,198.			6,198
١.		Gross income from fundraisin	a events (not		0,2501			0,250
9 '	оа	including \$	of					
		contributions reported on line						
=		Part IV, line 18	а					
	<b>L</b>	Less direct expenses	a b					
5		•						
١.		Net income or (loss) from fund	•					
'	<del>J</del> a	Gross income from gaming ac Part IV, line 19						
	<b>L</b>	Less direct expenses	a b					
		Net income or (loss) from garr						İ
. د		Gross sales of inventory, less	=					
"	υ a	and allowances						
	L		a					
		Less cost of goods sold	b os of inventory					
$\vdash$	<u>C</u>	Net income or (loss) from sale Miscellaneous Revenu		Business Code				
-	1 -	ADVERTISING	10	541800	155,867.		155,867.	1
1		CONFERENCE MANA	CEMENT	900099	8,694.		133,007.	<del> </del>
		MISCELLANEOUS	CEMEN I	900099	2,815.		2,356.	<del> </del>
				300033	2,013.	#33.	4,330.	<del>                                     </del>
	_	Total. Add lines 11a-11d			167,376.			<del>                                     </del>
. د	_				3345486.		158,223.	52,556
1 71	2	Total revenue. See instructions.			2242400.	<u> </u>	10,443.	Form <b>990</b> (20

# Form 990 (2011) FOOD PROTECTION 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 responsion include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		expenses	general expenses	expenses
•	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in		<del></del>	_	
_	the United States. See Part IV, line 22	37,643.	37,643.		
3	Grants and other assistance to governments,	0.,020.	0.70203		
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				"
5	Compensation of current officers, directors,				
	trustees, and key employees	321,443.		321,443.	
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	354,017.	229,110.	124,907.	
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	33,392.	21,252.	12,140.	
9	Other employee benefits	59,763.	27,589.	32,174.	
10	Payroll taxes	46,441.	16,719.	29,722.	
11	Fees for services (non-employees):				
а	Management				
b	Legal	5,158.		5,158.	
С	Accounting	12,900.		12,900.	
d	Lobbying		···········		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				_
g	Other				
12	Advertising and promotion	2,280.	1,955.	325.	
13	Office expenses	20,395.	<u>1,636.</u>	18,759.	<del></del>
14	Information technology	14,180.		14,180.	
15	Royalties				
16	Occupancy	44,266.	4.0.0.0.0	44,266.	<del>-,</del>
17	Travel	110,436.	100,689.	9,747.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 060 054	1 004 000	05.060	
19	Conferences, conventions, and meetings	1,062,954.	1,034,992.	27,962.	
50	Interest	2,559.		2,559.	
21	Payments to affiliates			06.010	
22	Depreciation, depletion, and amortization	26,812.	2 052	26,812.	<del></del>
23	Insurance	7,116.	2,853.	4,263.	
24	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.)				
а	PRINTING AND PUBLICATIO	579,911.	531,880.	48,031.	
b	POSTAGE AND SHIPPING	104,009.	100,438.	3,571.	
С	SUPPLIES	83,546.	70,010.	13,536.	
d	SPEAKER EXPENSES	38,902.		38,902.	· · ·
е	All other expenses	121,074.	5,735.	115,339.	
25	Total functional expenses. Add lines 1 through 24e	3,089,197.	2,182,501.	906,696.	0
26	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)				

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Par	t X	Balance Sheet		<u> </u>			
	•				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			146,643.	2	66,721.
	3	Pledges and grants receivable, net		_		3	
	4	Accounts receivable, net		<u>.                                    </u>	87,036.	4	68,778.
	5	Receivables from current and former officers, di	rectors	trustees, key			
		employees, and highest compensated employee	es Cor	nplete Part II			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	define	l under section			
		4958(f)(1)), persons described in section 4958(c					
İ		employers and sponsoring organizations of sect	ion 50	(c)(9) voluntary			
,		employees' beneficiary organizations (see instru	ctions)			6	
Assets	7	Notes and loans receivable, net			7		
As	8	Inventories for sale or use		4,226.	8	3,448.	
	9	Prepaid expenses and deferred charges			93,316.	9	93,361
	10a	Land, buildings, and equipment cost or other					
		basis. Complete Part VI of Schedule D	10a	235,846.			
	b	Less accumulated depreciation	10b	154,106.	73,124.	10c	81,740.
	11	Investments - publicly traded securities		2,201,053.	11	81,740. 2,440,640.	
	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		15			
	16	Total assets. Add lines 1 through 15 (must equ	al line (	4)	2,605,398.	16	2,754,688
	17	Accounts payable and accrued expenses		393,005.	17	200,662	
	18	Grants payable				18	
	19	Deferred revenue			340,228.	19	357,960
	20	Tax-exempt bond liabilities				20	•
တ္က	21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
litie	22	Payables to current and former officers, director	s, trus	ees, key employees,			
Liabilities		highest compensated employees, and disqualifi	ed per	sons Complete Part II			
<b>=</b>		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated th	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	17-24	. Complete Part X of			
		Schedule D			18,941.	25	15,504.
	26	Total liabilities. Add lines 17 through 25			752,174.	26	574,126.
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
Se		lines 27 through 29, and lines 33 and 34.					
Ü	27	Unrestricted net assets			1,825,967.	27	2,154,052.
ala	28	Temporarily restricted net assets			27,257.	28	26,510.
d E	29	Permanently restricted net assets			29		
Fu		Organizations that do not follow SFAS 117, c	heck h	ere 🕨 🔲 and			
or i		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
\SS	31	Paid-in or capital surplus, or land, building, or ed	uipme	nt fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come.	or other funds	·	32	
Ž	33	Total net assets or fund balances	ĺ	Ť	1,853,224.	33	2,180,562.
	1	Total liabilities and net assets/fund balances		} <del>-</del>	2,605,398.	34	2,754,688.

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If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a

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

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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

Form **990** (2011)

За

Х

separate basis, consolidated basis, or both-

X Separate basis

Act and OMB Circular A-133?

### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** INTERNATIONAL ASSOCIATION FOR FOOD PROTECTION 35-0894354 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(ıv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III ) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II \_\_ Type I c Type III · Functionally integrated d Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes No the governing body of the supported organization? 11g(i) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s). (iii) Type of (iv) is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization in col.
(i) organized in the organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes No LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990 EZ) 2011 FOOD PROTECTION 35-0894354 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants ")	568,040.	543,050.	569,384.	636,636.	628,162.	2,945,272,
2	Tax revenues levied for the organ-			•	•		
	ization's benefit and either paid to						
	or expended on its behalf	1					
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	568,040.	543,050.	569,384.	636,636.	628,162.	2,945,272,
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4		1 1				2.945.272.
	ction B. Total Support						2,22,272.
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	568,040.	543,050.	569,384.			2,945,272.
8	Gross income from interest,		_		•		
	dividends, payments received on	-					
	securities loans, rents, royalties						
	and income from similar sources	128,166.	48,473.	17,973.	29,788.	28,049.	252,449.
9	Net income from unrelated business		•			,	, , , , , , , , , , , , , , , , , , , ,
	activities, whether or not the						
	business is regularly carried on	149,001.	114,257.	123,042.	155,814.	158,223.	700,337.
10	Other income. Do not include gain		•				
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						3,898,058,
12	Gross receipts from related activities	, etc (see instruction	ons)			12 11	,007,767.
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio		
6-	organization, check this box and stor	here			- <del>-</del>		<b>▶</b> □
	ction C. Computation of Publ						
	Public support percentage for 2011 (		•	olumn (f))	•	14	75.56 %
	Public support percentage from 2010					15	74.43 %
162	33 1/3% support test - 2011. If the	_			14 is 33 1/3% or r	nore, check this bo	
_	stop here. The organization qualifies		-				►X
t	33 1/3% support test - 2010. If the	•		•	I line 15 is 33 1/3%	or more, check th	is box
4=	and stop here. The organization qual		• •		10 10 10		▶□
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			•	•	rt IV how the organ	ization
	meets the "facts-and-circumstances"	-	•		•		
t	10% -facts-and-circumstances tes						
	more, and if the organization meets the				•		,
40	organization meets the "facts-and-circ		-		• • •		
18	Private foundation. If the organization	on did not check a	DOX ON line 13, 16	a, 100, 1/a, or 1/l			
					Sche	edule A (Form 990	or 990-EZ) 2011

132022 01-24-12

# Schedule A (Form 990 or 990-EZ) 2011 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not					1	
	include any "unusual grants.")			İ			
2	Gross receipts from admissions,					•	
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose				1		
2	Gross receipts from activities that		<del> </del>	<del> </del>	<del>                                     </del>		<del> </del>
3	· ·						
	are not an unrelated trade or bus- iness under section 513						
		<u></u>	<del>                                     </del>				<u> </u>
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf	1	ļ			<u> </u>	<b>-</b>
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						<u> </u>
7 8	a Amounts included on lines 1, 2, and						
	3 received from disqualified persons		<u> </u>			1	
ŧ	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that			<u> </u>			
	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)					-	1
	ction B. Total Support		1	<u> </u>			<del></del>
	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(=) 2011	(6) Total
	Amounts from line 6	(a) 2007	(6) 2008	(6) 2009	(d) 2010	(e) 2011	(f) Total
-	a Gross income from interest.						
104	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources		-				<del></del>
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	c Add lines 10a and 10b						
11		i	,				
	activities not included in line 10b, whether or not the business is					,	
	regularly carried on				ł		
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11, and 12)		1		<u> </u>		
	First five years. If the Form 990 is for	the organization	's first second the	rd fourth or fifth t	ax vear as a secti	on 501(c)(3) organ	ization
	check this box and stop here	the organization	S mst, second, tin	id, idditii, di iiitii t	ax year as a secu	on sor(c)(s) organ	
Se	ction C. Computation of Publ	ic Support Po	ercentage				<u>P</u>
	Public support percentage for 2011 (			column (fl)	<del></del>	45	
	Public support percentage from 2010		-	column (ij)		15	%
	ction D. Computation of Inves				<del></del> -	16	%
		-				14-1	
	Investment income percentage for 20	•	•	rie 13, column (f))		17	%
	Investment income percentage from					18	%
19	a 33 1/3% support tests - 2011. If the						17 is not
	more than 33 1/3%, check this box a				_		▶∟⊥
ŧ	b 33 1/3% support tests - 2010. If the	organization did	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	ck this box and	stop here. The org	anızatıon qualifies	as a publicly sup	ported organizatioi	¬ ▶□
20	Private foundation. If the organization	n did not check a	a box on line 14, 19	a, or 19b, check t	his box and see in	nstructions	

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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. 2011
Open to Public Inspection

Name of the organization

INTERNATIONAL ASSOCIATION FOR

Employer identification number

_	FOOD PROTECTION	15 1 6:1 6:1	35-0894354
Pa	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor o	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, I	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an his	storically important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
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	ucture included in (a)	2c
đ	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by th	e organization during the tax
	year <b>&gt;</b>		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements if	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements of	during the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	g the year ▶ \$
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	0(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati	ion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes	the organization's accounting for
-	conservation easements.		
Pa	rt III Organizations Maintaining Collections o		other Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pu	iblic service, provide the following amounts
	relating to these items.		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051

Schedule D (Form 990) 2011

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### INTERNATIONAL ASSOCIATION FOR

		OTECTION		<del></del>					94354	
Par	t III   Organizations Maintaining C									
3	Using the organization's acquisition, accessi	on, and other record	is, checl	any of the	following that	at are a s	ignificant ι	ise of its	collection i	tems
	(check all that apply)									
а	Public exhibition	d	' <u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	е	اللا	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co				_			se in Part	XIV.	
5	During the year, did the organization solicit o					er sımıla	r assets	_	,	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	reported an amount on Form 990, Par		ete ıf the	organizatio	on answered	"Yes" to	Form 990,	Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not	included			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table						
									Amount	
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 Fe	orm 990, Part X, line	21?						Yes	No
	If "Yes," explain the arrangement in Part XIV									
Par	t V Endowment Funds. Complete	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line	10			
		(a) Current year	(b) P	rior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses			_						
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									_
f	Administrative expenses								··-·· - ·	
g	End of year balance		<u> </u>							
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (a	a)) held as					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%								
3а	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	ınd admınıste	ered for t	the organiz	ation	<u></u>	
	by								Y	es No
	(i) unrelated organizations								3a(i)	<del></del>
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations								3b	
4	Describe in Part XIV the intended uses of the				<del></del>			<del></del>		
Pai	rt VI   Land, Buildings, and Equipm		•	i		ı <del></del>		<del></del>		
	Description of property	(a) Cost or o		, , ,	t or other (other)		ccumulate preciation	d	(d) Book	/alue
1a	Land									
b	Buildings									
C	Leasehold improvements									
d	Equipment			23	<u> 5,846.</u>		154,1	06.	81	,740.
	Other			l						
<u>Total</u>	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	10(c).)				81	,740.

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 FOOD PROTE	ECTION .		35-0894354 Page
Part VII Investments - Other Securities.	See Form 990, Part X, line	12.	
<ul><li>(a) Description of security or category</li><li>(including name of security)</li></ul>	(b) Book value		od of valuation. of-year market value
(1) Financial derivatives	-		
(2) Closely-held equity interests			
(3) Other			
(A)	-		
(B)			_
(C)			
(D)			
(E)			
(F)			
(G)		-	
(H)			**************************************
(l)			
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments - Program Related	See Form 990, Part X, lin	e 13	
(a) Description of investment type	(b) Book value	(c) Meth	od of valuation of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)	<u> </u>		
Part IX Other Assets. See Form 990, Part X, I			
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B)			
Part X Other Liabilities. See Form 990, Part	t X, line 25	(h) Doole value	
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes	NG	15 504	
(2) CAPITAL LEASE OBLIGATION	NS	15,504.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)		45 50	
Total. (Column (b) must equal Form 990, Part X, col (B) FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote.  EIN 48 (ASC 740)	line 25)	15,504.	lity for uncertain tax positions under
2. FIN 48 (ASC 740)		Sile that reports the organization S hab	, ioi anocitan tax positions under
132053 01-23-12		_	Schedule D (Form 990) 201

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### INTERNATIONAL ASSOCIATION FOR

Schedule D (Form 990) 2011 FOOD PROTECTION	
Part XIV Supplemental Information (continued)	
•	
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
TEMPORARILY RESTRICTED INVESTMENT INCOME	1,708.
GAIN ON DISPOSAL OF EQUIPMENT	450.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	2,158.
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	<del>-</del>
GAIN ON DISPOSAL OF EQUIPMENT	-450.

# (Form 990)

Department of the Treasury

Internal Revenue Service

### Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

Name of the organization

INTERNATIONAL ASSOCIATION FOR

Employer identification number

FOOD PROTECTION 35-0894354 General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I to Form 990, Part IV, line 14b 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes No the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the **United States** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (c) Number of (a) Region (b) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total émployees. expenditures offices (by type) (e.g., fundraising, program is a program service, agents, and for and in the region services, investments, grants to describe specific type independent contractors investments recipients located in the region) of service(s) in region in region in region EAST ASIA AND THE PACIFIC PROGRAM SERVICES CONFERENCE 7,871. MIDDLE EAST 0 PROGRAM SERVICES CONFERENCE 6,627. EUROPE PROGRAM SERVICES CONFERENCE 53,335. 3 a Sub-total 0 67,833, **b** Total from continuation sheets to Part I 0. c Totals (add lines 3a and 3b)

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

Schedule F (Form 990) 2011

67.833.

# INTERNATIONAL ASSOCIATION FOR

FOOD PROTECTION

Schedule F (Form 990) 2011

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II

Page 2

35-0894354

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance (g) Amount of non-cash assistance Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by cash disbursement (f) Manner of of cash grant (e) Amount the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter (d) Purpose of grant (c) Region Part II can be duplicated if additional space is needed (b) IRS code section and EIN (if applicable) (a) Name of organization N

Schedule F (Form 990) 2011

Enter total number of other organizations or entities

က

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INTERNATIONAL ASSOCIATION FOR FOOD PROTECTION

Schedule F (Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16

Page 3 ·

35-0894354

Part III can be duplicated if additional space is needed.	additional space is needed	d. (c) Number of	(d) Amount of	(e) Manner of	(f) Amount of	(g) Description of	(h) Method of
(a) Type of grant or assistance	(b) Region	recipients	cash grant	cash disbursement	non-cash assistance	non-cash assistance	valuation (book, FMV, appraisal, other)
SCHOLARSHIP AWARD	EAST ASIA AND THE	-	2.550.8	2 550 WIRE TRANSFER	0	N/A	FMV
					1		
CHOLORGHID AWARD	EAST ASIA AND THE	,	3 000 8	WIRE TRANSPER	0	N/A	FWV
	EAST ASIA AND THE	,					1310
SCHOLARSHIP AWARD	PACIFIC	1	Z, U3Z, w	WIRE TRANSFER		N/A	, Lan
SCHOLARSHIP AWARD	SOUTH AMERICA	1	2,705,	2,705,WIRE TRANSFER	0	N/A	FMV
	EUROPE (INCLUDING ICELAND &						
SCHOLARSHIP AWARD	GREENLAND)	1	1,457,W	WIRE TRANSFER	0.	N/A	FMV
							,

Schedule F (Form 990) 2011

### INTERNATIONAL ASSOCIATION FOR

Sched	dule F (Form 990) 2011 FOOD PROTECTION	35-0894354	Page 4
Par			
1	Was the organization a U.S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	☐ Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2011

SCHEDULE I (Form 990)		Grants an Governmen	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	to Organizations in the United Stat	es.		OMB No 1545-0047
Department of the Treasury Internal Revenue Service		Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  ▶ Attach to Form 990.	on answered "Yes" to For ► Attach to Form 990.	to Form 990, Par n 990.	t IV, line 21 or 22.		Open to Public Inspection
Name of the organization	INTERNATIONAL A FOOD PROTECTION	ASSOCIATION FOR				E	Employer identification number 35-0894354
Part I General Inform	General Information on Grants and Assistance	ance					
1 Does the organizatio	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	tiate the amount of the grant	ts or assistance, the	grantees' eligibility	for the grants or ass	istance, and the selection	
criteria used to awar	criteria used to award the grants or assistance?						X Yes No
2 Describe in Part IV the	Describe in Part IV the organization's procedures for monitoring the use	or monitoring the use of gran	of grant funds in the United States.	States.			
Part II Grants and O	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	ents and Organizations in th	he United States. Co	omplete if the orga	nization answered "Y	es" to Form 990, Part IV,	line 21, for any
recipient that r	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	eck this box if no one recipie	ent received more th	an \$5,000 Part II	can be duplicated if a	idditional space is neede	- 1
1 (a) Name and address of organization or government	iment (b) EIN	IN (c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	-						
			į				
1	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ment organizations listed in t	the line 1 table				
3 Enter total number o	Enter total number of other organizations listed in the line 1 table  For Paperwork Reduction Act Notice, see the Instructions for Form 990.	he line 1 table nstructions for Form 990.					Schedule I (Form 990) (2011)

INTERNATIONAL ASSOCIATION FOR

FOOD PROTECTION

Schedule I (Form 990) (2011)

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 Part III can be duplicated if additional space is needed

Page 2

35-0894354

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance	٠.,
SCHOLARSHIPS AND AWARDS	21	25,900.	0	FMV		
						,
						•
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	required in Part I, I	line 2, and any other	additional information		
SCHEDULE I, PART I, LINE 2: THE SC	HOLARSHI	P RECIPIEN	TS ARE REQ	THE SCHOLARSHIP RECIPIENTS ARE REQUIRED TO TURN		
IN EXPENSE REPORTS WITH VALID RECEIPTS	IPTS AND	THE SCHOL	ARSHIP IS	AND THE SCHOLARSHIP IS AWARDED BASED		
ON THE EXPENSES INCURRED.						

132102 01-27-12

### SCHEDULE J (Form 990)

**Compensation Information** 

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047 **2011** 

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

INTERNATIONAL ASSOCIATION FOR

FOOD PROTECTION

Employer identification number 35-0894354

ТС	duestions negariting compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	ļ		
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees	- 1		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		<u> </u>
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			1
	establish compensation of the CEO/Executive Director Explain in Part III.			
	Compensation committee X Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X X X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III	,		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			-
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	ınıtıal contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2011

35-0894354

Schedule J (Form 990) 2011

FOOD PROTECTION

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

		(R) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	0	(E)	(F)
					Retirement and	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
	9	138.471.	5.254.	0	15,527.	9,157.	168,409.	0
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9	Ξ							
	Ξ							
7	(ii)							
	(i)							
80	(E)							
	(I)							
6	(ii)							
	(i)							
10	(ii)							
	Ξ							
11	(ii)							
	Ξ							
12	▣							
	Ξ							
13	(ii)							
	(i)							
14	(ii)							:
	Ξ							
15	(1)							
	Ξ							
16	(1)							

Schedule J (Form 990) 2011

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

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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.

QMB No 1545-0047
2011
Open to Public Inspection

Name of the organization

INTERNATIONAL ASSOCIATION FOR FOOD PROTECTION

Employer identification number 35-0894354

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FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
THE ASSOCIATION MAINTAINS A LIBRARY OF VIDEOS AND TAPES CONCERNING FOOD
AND DAIRY SAFETY, WHICH IS AVAILABLE AS A RESOURCE FOR THE ASSOCIATION
MEMBERS.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS TWO TYPES OF
MEMBERSHIP: INDIVIDUAL MEMBERS AND SUSTAINING MEMBERS. THERE ARE FOUR
CATEGORIES OF INDIVIDUAL MEMBERSHIP IN THE ASSOCIATION: REGULAR, STUDENT,
RETIRED AND HONORARY LIFE; AND THREE CATEGORIES FOR SUSTAINING MEMBERSHIP.
FORM 990, PART VI, SECTION A, LINE 7A: REGULAR, RETIRED, AND HONORARY LIFE
MEMBERS ARE ENTITLED TO VOTE AND HOLD OFFICE.
FORM 990, PART VI, SECTION A, LINE 8B: NO COMMITTEES HAVE AUTHORITY TO ACT
FORM 990, PART VI, SECTION B, LINE 11: THE ASSISTANT DIRECTOR AND
EXECUTIVE DIRECTOR REVIEW THE FORM 990 IN DETAIL. THE FORM 990 IS PRESENTED
TO ALL MEMEBERS OF THE BOARD BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C: EACH BOARD MEMBER IS REQUIRED TO
ANNUALLY REVIEW AND SIGN AN ACKNOWLEDGEMENT OF THE CONFLICT OF INTEREST
POLICY.
FORM 990, PART VI, SECTION B, LINE 15A: COMPENSATION FOR THE EXECUTIVE
DIRECTOR IS SET BY THE BOARD OF DIRECTORS AFTER REVIEW OF AMERICAN SOCIETY  LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.  Schedule O (Form 990 or 990-EZ) (2011)