Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 10-01-2011 and ending 09-30-2012

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
MINNESOTA CORN GROWERS ASSOCIATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
738 FIRST AVENUE EAST

City or town, state or country, and ZIP + 4
SHAKOPEE, MN 55379

D Employer identification number
41-1369512

E Telephone number
(952) 233-0333

G Gross receipts $ 5,729,504

F Name and address of principal officer
TIM GERLACH
738 FIRST AVENUE EAST
SHAKOPEE,MN 55379

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (5) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW MNCORN ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1978

M State of legal domicile MN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
IDENTIFY AND PROMOTE OPPORTUNITIES FOR CORN GROWERS WHILE ENHANCING QUALITY OF LIFE

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	18
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	18
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	10
6	Total number of volunteers (estimate if necessary)	6	500
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	0	0
	9	Program service revenue (Part VIII, line 2g)	4,113,544	5,501,402
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0	13,982
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	143,776	147,127
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,257,320	5,662,511
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	823,292	1,414,961
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	782,195	992,736
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	2,419,788	2,675,221
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	4,025,275	5,082,918
	19	Revenue less expenses Subtract line 18 from line 12	232,045	579,593

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	2,432,053	3,141,064
	21	Total liabilities (Part X, line 26)	1,190,613	1,320,031
	22	Net assets or fund balances Subtract line 21 from line 20	1,241,440	1,821,033

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

****** | 2013-03-13
Signature of officer | Date

SUZANNE SWENSON BUSINESS & FINANCE DIRECTOR
Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions)
DEIRDRE HODGSON			P01484710
Firm's name (or yours if self-employed), address, and ZIP + 4: CLIFTONLARSONALLEN LLP, 220 SOUTH SIXTH STREET SUITE 300, MINNEAPOLIS, MN 55402			EIN ▶ 41-0746749
			Phone no ▶ (612) 376-4500

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part 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

IDENTIFY AND PROMOTE OPPORTUNITIES FOR CORN GROWERS WHILE ENHANCING QUALITY OF LIFE

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

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? . . . . ☐ Yes ☑ No

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 $)

PRODUCER SERVICES (PS) TEAM THE PS TEAM HAS A BROAD AND DIVERSE LIST OF ORGANIZATIONS WITH WHOM IT PARTNERS IN ADDITION TO PROMOTING AND EDUCATING PEOPLE ABOUT CORN AND CORN FARMING AND THE ITEMS NECESSARY TO CONDUCTING THOSE ACTIVITIES, THE PS TEAM SUPPORTS PROJECTS SUCH AS VENUES AT THE MINNESOTA STATE FAIR, CHILDREN'S AND MINNESOTA HISTORICAL SOCIETY MUSEUMS, AND SOME TWO DOZEN TRADESHOWS EACH YEAR THE PS TEAM HAS AND CONTINUES TO SPONSOR WORK CONDUCTED BY MORE THAN 100 COMMUNITY, STATE, REGIONAL AND NATIONAL GROUPS MATCHING PROGRAMS THAT SUPPORT THE ACTIVITIES OF FORTY-SIX COUNTY CORN ORGANIZATIONS ARE FUNDED THROUGH THIS TEAM WITH ANOTHER SIX COUNTIES EXPECTED TO AFFILIATE WITH MCGA IN THE COMING YEAR IN 2012, SEVEN REGIONAL REPRESENTATIVES ASSISTED OUR COUNTY AFFILIATES AND PARTICIPATED IN MORE THAN 200 EVENTS

4b (Code) (Expenses $ including grants of $) (Revenue $)

PRODUCTION STEWARDSHIP (SP) TEAM THE SP TEAM INVESTS RESOURCES IN BETWEEN 15 AND 25 PROJECTS EACH YEAR IN THE AREAS OF OPTIMIZING CROP PRODUCTION AND CONSERVING SOIL AND WATER QUALITY IN THE LAST YEAR, THE TEAM HAS SET UP LONG-TERM SUPPORT OF AN ALL-NEW NUTRIENT MANAGEMENT POSITION AT THE UNIVERSITY OF MINNESOTA THE MINNESOTA AGRICULTURE WATER RESOURCES CENTER AND MINNESOTA DISCOVERY FARMS INITIATIVES ARE NOTABLE SUCCESSES UNDER THE PURVIEW OF SP TEAM

4c (Code) (Expenses $ including grants of $) (Revenue $)

COMMUNICATIONS NUMEROUS BROADCAST, WEB-BASED, OUTDOOR, SPECIAL EVENT AND PRINT MEDIA ACTIVITIES ARE CONDUCTED EACH YEAR THROUGH MINNESOTA'S CORN ORGANIZATIONS COMMUNICATIONS EFFORTS THESE RESULT IN HUNDREDS OF MILLIONS OF MEDIA IMPRESSIONS THROUGHOUT THE STATE AND REGION IN ADDITION TO BASE COMMUNICATIONS PROJECTS PLANNED AND EXECUTED EACH YEAR, FOCUS TEAMS AND COMMITTEES DIRECT SPECIAL PROJECTS TO COMMUNICATIONS STAFF WHEN THEY INVOLVE A COMMUNICATIONS COMPONENT THESE MAY RANGE FROM A STRAIGHT FORWARD AND ONE-TIME NEWSPAPER ADVERTISEMENT ASSOCIATED WITH AN EVENT OR TRADESHOW - TO MONTHS-LONG, MULTI-PARTNER, COALITION-BASED CAMPAIGNS COMMUNICATIONS STAFF ALSO OVERSEE SOCIAL MEDIA ACTIVITIES FOR THE ORGANIZATION AND ACT AS THE POINT OF CONTACT FOR JOURNALISTS

(Code) (Expenses $ including grants of $) (Revenue $)

FOOD & BIOENERGY (FAB) TEAM THE FAB TEAM SUPPORTS SEVERAL PROJECTS AND INITIATIVES INVOLVING FOOD AND FUEL - THE BIO-BASED ENERGY AND THE LIVESTOCK SECTORS FAB TEAM PROJECTS ARE AS DIVERSE AS SUPPORT FOR NATIONAL ETHANOL INITIATIVES SUCH AS BIO-ETHANOL, GROWTH ENERGY MARKET DEVELOPMENT AND THE AMERICAN COALITION FOR ETHANOL - TO MINNESOTA CLEAN AIR CHOICE COALITION'S FUELING INFRASTRUCTURE AND CONSUMER EDUCATION EFFORTS CONDUCTED BY THE AMERICAN LUNG ASSOCIATION IN MINNESOTA IN THE LAST YEAR, THE TEAM ACTED AS AN ORGANIZER AND FOUNDING SUPPORTER OF THE FARM & FOOD ALLIANCE OF MINNESOTA, WHICH ASSISTS LIVESTOCK PRODUCERS IN THEIR CARE OF ANIMALS

(Code) (Expenses $ including grants of $) (Revenue $)

EXPANDED USES (EU) TEAM IN THE LAST YEAR, THE EU TEAM DIRECTLY FUNDED SEVEN RESEARCH PROJECTS AND AN ADDITIONAL ELEVEN RESEARCH PROJECTS THROUGH ITS COLLABORATIVE AGREEMENT WITH THE AGRICULTURE UTILIZATION RESEARCH INSTITUTE (AURI) THROUGH THIS TEAM, MINNESOTA'S STATE CORN ORGANIZATIONS ARE THE SINGLE LARGEST FARM GROUP SUPPORTER OF AURI ALTHOUGH NOT LIMITED TO ONLY THESE, THE EU TEAM'S RESEARCH EMPHASIS HAS BEEN IN THE AREAS OF LIVESTOCK NUTRITION FEEDING STUDIES, DRIED DISTILLERS GRAINS, BIOMASS COLLECTION METHODS, AND BIOFUEL-POWERED ENGINE PERFORMANCE AND ENGINE TESTING

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$

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		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2		No
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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

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 65			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable 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 10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities account)?		4a		No
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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?		6a		No
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).**				
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		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
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.**				
a	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				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
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.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state		13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the aggregate amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

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

Check if Schedule O contains a response to any question in this Part VI . . . . ☑

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 18		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 18		
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section 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		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶

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

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

SUZANNE SWENSON
738 FIRST AVENUE EAST
SHAKOPEE, MN 55379
(952) 460-3605

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) JOHN MAGES PRESIDENT	2 00	X		X				9,466	0	0
(2) TOM HAAG VICE PRESIDENT	15 00	X		X				6,716	0	0
(3) RYAN BUCK TREASURER	5 00	X		X				6,213	0	0
(4) BRUCE PETERSON SECRETARY	5 00	X		X				5,783	0	0
(5) GREG SCHWARZ PAST PRESIDENT/COB	2 00	X		X				9,021	0	0
(6) DOUG ALBIN BOARD DIRECTOR	2 00	X						0	0	0
(7) LES ANDERSON BOARD DIRECTOR	2 00	X						0	0	0
(8) CHARLES DEGROTE BOARD DIRECTOR	2 00	X						5,511	0	0
(9) NOAH HULTGREN BOARD DIRECTOR	2 00	X						5,208	0	0
(10) JEAN KNAKMUHS BOARD DIRECTOR	2 00	X						4,573	0	0
(11) STEVE KRAMER BOARD DIRECTOR	2 00	X						6,905	0	0
(12) JEFFREY LARSON BOARD DIRECTOR	2 00	X						0	0	0
(13) JEROLD LARSON BOARD DIRECTOR	2 00	X						5,378	0	0
(14) JOHN LUEPKE BOARD DIRECTOR	2 00	X						6,078	0	0
(15) GERALD MULDER BOARD DIRECTOR	2 00	X						5,673	0	0
(16) DAVID PFARR BOARD DIRECTOR	2 00	X						3,300	0	0
(17) RICHARD ROHRER BOARD DIRECTOR	2 00	X						5,580	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) STEVE SODEMAN BOARD DIRECTOR	2 00	X						7,433	0	0
(19) BRIAN THALMANN BOARD DIRECTOR	2 00	X						0	0	0
(20) DALE TOLIFSON BOARD DIRECTOR	2 00	X						6,718	0	0
(21) RICHARD TREBESCH BOARD DIRECTOR	2 00	X						5,618	0	0
(22) TIM WAIBEL BOARD DIRECTOR	2 00	X						0	0	0
(23) CURT WATSON BOARD DIRECTOR	2 00	X						4,711	0	0
(24) HAROLD WOLLE JR BOARD DIRECTOR	2 00	X						0	0	0
(25) DEVONNA ZEUG BOARD DIRECTOR	2 00	X						7,561	0	0
(26) TIM GERLACH EXECUTIVE DIRECTOR	50 00			X				148,264	0	16,247
(27) SUZANNE SWENSON BUSINESS & FINANCE DIRECTOR	50 00			X				92,680	0	14,362

		(D)	(E)	(F)
1b	**Sub-Total** . . . . ▶			
c	**Total from continuation sheets to Part VII, Section A** . . . . ▶			
d	**Total (add lines 1b and 1c)** . . . . ▶	358,390	0	30,609

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶1

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
PORTAGE MARKETING INC 2653 JOPPA AVE S MINNEAPOLIS, MN 55416	ADVERTISING	449,776
COMBEST SELL & ASSOCIATES 4908 92ND ST LUBBOCK, TX 79424	LOBBYING AND EDUCATION	161,524
EXECUTIVE OCEAN 110 FIRST AVE E SHAKOPEE, MN 55379	PROMOTIONAL ITEMS	140,373

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶3

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f . . . . ►					
Program Service Revenue			Business Code				
	2a	REIMB FROM MN CRPC	900099	4,886,811	4,886,811		
	b	MEMBERSHIP DUES	900099	397,571	397,571		
	c	CONVENTION INCOME	900099	110,500	110,500		
	d	OTHER PROGRAM REVENUE	900099	90,137	90,137		
	e	VARIETY PLOTS	900099	16,383	16,383		
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ►		5,501,402			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . . ►					
	4	Income from investment of tax-exempt bond proceeds . . ►					
	5	Royalties . . . . ►					

		(i) Real	(ii) Personal
6a	Gross rents	213,000	
b	Less rental expenses	65,873	
c	Rental income or (loss)	147,127	

		(A)	(B)	(C)	(D)
d	Net rental income or (loss) . . . . ►	147,127			147,127

		(i) Securities	(ii) Other
7a	Gross amount from sales of assets other than inventory		15,102
b	Less cost or other basis and sales expenses		1,120
c	Gain or (loss)		13,982

			(A)	(B)	(C)	(D)
7d	Net gain or (loss) . . . . ►		13,982			13,982
8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . . a					
b	Less direct expenses . . . b					
c	Net income or (loss) from fundraising events . . ►					
9a	Gross income from gaming activities See Part IV, line 19 . . . a					
b	Less direct expenses . . . b					
c	Net income or (loss) from gaming activities . . . ►					
10a	Gross sales of inventory, less returns and allowances . a					
b	Less cost of goods sold . . b					
c	Net income or (loss) from sales of inventory . . ►					
	Miscellaneous Revenue	Business Code				
11a						
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a–11d . . . . . . ►					
12	**Total revenue.** See Instructions . . . ►		5,662,511	5,501,402	0	161,109

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,378,961			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	36,000			
3	Grants and other assistance to governments, 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	397,010			
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	434,305			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	27,147			
9	Other employee benefits	63,999			
10	Payroll taxes	70,275			
11	Fees for services (non-employees)				
a	Management				
b	Legal	5,979			
c	Accounting	14,837			
d	Lobbying	95,280			
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	666,564			
12	Advertising and promotion	698,103			
13	Office expenses	190,517			
14	Information technology				
15	Royalties . .				
16	Occupancy	75,165			
17	Travel	333,382			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	123,183			
20	Interest	24,323			
21	Payments to affiliates	145,955			
22	Depreciation, depletion, and amortization	59,276			
23	Insurance	35,873			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	STIPENDS	106,209			
b	AWARDS	49,756			
c	DUES & SUBSCRIPTIONS	41,991			
d	MISCELLANEOUS	8,828			
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	5,082,918			
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	343,585	1	207,236
	2	Savings and temporary cash investments	138,338	2	138,273
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	438,412	4	1,007,516
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	545	9	16,439
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D* — 10a: 2,224,137			
	b	Less accumulated depreciation — 10b: 452,537	1,511,173	10c	1,771,600
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	2,432,053	16	3,141,064
Liabilities	17	Accounts payable and accrued expenses	235,388	17	375,449
	18	Grants payable		18	
	19	Deferred revenue	347,059	19	364,198
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*		22	
	23	Secured mortgages and notes payable to unrelated third parties	608,166	23	580,384
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	1,190,613	26	1,320,031
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	1,241,440	27	1,821,033
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	1,241,440	33	1,821,033
	34	Total liabilities and net assets/fund balances	2,432,053	34	3,141,064

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	5,662,511
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,082,918
3	Revenue less expenses Subtract line 2 from line 1	3	579,593
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	1,241,440
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	1,821,033

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
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 separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated 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 Act and OMB Circular A-133?	3a		No
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 . .	3b		

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
MINNESOTA CORN GROWERS ASSOCIATION

Employer identification number
41-1369512

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
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 advised 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 advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☑ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

			Amount
c	Beginning balance	1c	22,909
d	Additions during the year	1d	145,025
e	Distributions during the year	1e	153,706
f	Ending balance	1f	14,228

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☑ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a	Beginning of year balance					
b	Contributions					
c	Investment earnings or losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		
	(ii) related organizations	3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		111,834		111,834
b Buildings		1,535,119	218,128	1,316,991
c Leasehold improvements		3,991	3,990	1
d Equipment		512,413	230,419	281,994
e Other		60,780		60,780
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				1,771,600

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

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

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

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

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,662,511
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,082,918
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	579,593
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	579,593

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	1,032,492
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	65,873		
e	Add lines **2a** through **2d**			2e	65,873
3	Subtract line **2e** from line **1**			3	966,619
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	4,695,892		
c	Add lines **4a** and **4b**			4c	4,695,892
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	5,662,511

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	452,899
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			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	65,873		
e	Add lines **2a** through **2d**			2e	65,873
3	Subtract line **2e** from line **1**			3	387,026
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	4,695,892		
c	Add lines **4a** and **4b**			4c	4,695,892
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	5,082,918

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
	PART IV, LINE 1B	THE EXECUTIVE DIRECTOR OF MCGA, TIM GERLACH, ACTS AS TREASURER FOR FARM POLICY FACTS FARM POLICY FACTS SENDS INVOICES TO MCGA AND THE ASSOCIATION WRITES THE CHECKS TIM GERLACH IS THE SIGNER ON THE CHECKS
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION IS A NOT-FOR-PROFIT ORGANIZATION THAT IS EXEMPT UNDER SECTION 501(C)(5) OF THE INTERNAL REVENUE CODE AND CLASSIFIED BY THE INTERNAL REVENUE SERVICE AS OTHER THAN A PRIVATE FOUNDATION THE ASSOCIATION ADOPTED THE ACCOUNTING STANDARD FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS THIS STANDARD CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS AND PRESCRIBES A RECOGNITION THRESHOLD FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED THE IMPLEMENTATION OF THIS STANDARD HAD NO IMPACT ON THE ASSOCIATION'S FINANCIAL STATEMENTS THE ASSOCIATION'S TAX RETURNS ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AUTHORITIES THE TAX RETURNS FOR THE YEARS 2009 TO 2011 ARE OPEN TO EXAMINATION BY FEDERAL AUTHORITIES
PART XII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE 65,873
PART XII, LINE 4B - OTHER ADJUSTMENTS		EXPENSES RELATED TO CONTRACT WITH MN CORN RESEARCH AND PROMOTIONAL COUNCIL 4,549,937 MEMBERSHIP FORWARDS TO NCGA AND COUNTIES 145,955
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL EXPENSE 65,873
PART XIII, LINE 4B - OTHER ADJUSTMENTS		EXPENSES RELATED TO CONTRACT WITH MN CORN RESEARCH AND PROMOTIONAL COUNCIL 4,549,937 MEMBERSHIP FORWARDS TO NCGA AND COUNTIES 145,955

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
MINNESOTA CORN GROWERS ASSOCIATION

Employer identification number
41-1369512

Part I General Information on Grants and Assistance

1 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 criteria used to award the grants or assistance? . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II 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 recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 16

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 11

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) EDUCATION AWARENESS AND RESEARCH	1	36,000		N/A	N/A

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 INVOICES ARE REVIEWED AND APPROVED BY STAFF TEAM LEAD MONITORING OF THE USE OF FUNDS ARE REQUIRED AS OUTLINED IN EACH CONTRACT

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 41-1369512
Name: MINNESOTA CORN GROWERS ASSOCIATION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AGCHAT FOUNDATION INC PO BOX 92 LEBANON,IN 46052	27-2181193	501(C)(3)	10,000		N/A	N/A	EDUCATION
BBI INTERNATIONAL 308 SECOND AVE N STE 304 GRAND FORKS,ND 58203	43-1717185	CORPORATION	9,305		N/A	N/A	SPONSORSHIP

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CHILDREN'S MUSEUM OF SOUTHERN MNPO BOX 3103 MANKATO,MN 56002	20-4351801	501(C)(3)	100,000		N/A	N/A	EDUCATION AND AWARENESS
FARM AND FOOD ALLIANCE108 MARTY DR BUFFALO,MN 55313	46-0596611	501(C)(3)	20,000		N/A	N/A	LIVESTOCK AWARENESS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
FARM POLICY FACTSPO BOX 596 ARLINGTON,VA 22216	20-8921012	501(C)(4)	40,000		N/A	N/A	EDUCATION AND AWARENESS
GROWTH ENERGY 17220 WRIGHT ST STE 150 OMAHA,NE 68130	26-3542537	501(C)(6)	120,000		N/A	N/A	EDUCATION AND AWARENESS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MN AGRICULTURE & RURAL LEADERSHIP SW MN STATE UNIVERSITY 1501 STATE ST MARSHALL, MN 56258	23-7108470	501(C)(3)	30,000		N/A	N/A	EDUCATION
MINNESOTA AGRICULTURAL WATER RESOURCE CENTER3080 EAGANDALE PL EAGAN, MN 55121	45-1676970	501(C)(3)	125,000		N/A	N/A	RESEARCH

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MN4HUMN GATEWAY CTR 200 OAK ST SE MINNEAPOLIS,MN 55455	41-1408161	501(C)(3)	71,000		N/A	N/A	STUDENT CURRICULUM
MN AG IN THE CLASSROOMPO BOX 385906 BLOOMINGTON,MN 55438	41-1587595	501(C)(3)	55,000		N/A	N/A	EDUCATION AND AWARENESS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MN AGRIGROWTH COUNCIL408 ST PETER ST ST PAUL,MN 55102	41-0991212	501(C)(6)	5,000		N/A	N/A	SPONSORSHIP
MN CATTLEMANS ASSOCIATION255 E KELLOGG BLVD STE 102 ST PAUL,MN 55101	41-1343011	501(C)(5)	9,500		N/A	N/A	SPONSORSHIP

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MN DEPT OF AGRICULTURE625 N ROBERT ST ST PAUL,MN 55155	40-6007162	STATE GOV	7,500		N/A	N/A	TRADE MISSION
MN FARM BUREAU 3080 EAGANDALE PL EAGAN,MN 55121	41-0417230	501(C)(5)	85,400		N/A	N/A	EDUCATION AND AWARENESS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MN FARMERS UNION600 CTY RD D W STE 14 ST PAUL,MN 55112	41-6041830	501(C)(3)	18,000		N/A	N/A	SPONSORSHIP
MN FFA FOUNDATIONPO BOX 118 ROSEMOUNT,MN 55068	41-6038263	501(C)(3)	14,500		N/A	N/A	SPONSORSHIP

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MN PORK PRODUCERS ASSOCIATION151 ST ANDREWS CT STE 810 MANKATO,MN 56001	20-0399755	501(C)(5)	5,000		N/A	N/A	SPONSORSHIP
MN STATE FAIR 1265 SNELLING AVE N ST PAUL,MN 55108	41-2013696	501(C)(3)	9,000		N/A	N/A	EDUCATION AND AWARENESS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MN TECHNOLOGY EDUCATION3223 CLEVELAND ST NE MINNEAPOLIS,MN 55418	41-6042630	501(C)(3)	5,000		N/A	N/A	SPONSORSHIP
MN TRADE OFFICE 332 MINNESOTA ST STE E200 ST PAUL,MN 55101	41-1681137	STATE GOV	12,500		N/A	N/A	TRADE MISSION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
MSU MANKATO126 ALUMNI FDN CTR MANKATO,MN 56001	41-6033423	501(C)(3)	37,290		N/A	N/A	RESEARCH
NORTHERN CORN DEVELOPMENT 1411 32ND AVE S STE 304 FARGO,ND 58103	27-1891997	CORPORATION	25,000		N/A	N/A	RESEARCH

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
PROPEL BIOFUELS INC 2317 BROADWAY STE 350 REDWOOD CITY, CA 99063	20-8265862	CORPORATION	11,000		N/A	N/A	SPONSORSHIP
SEVER'S CORN MAZE15900 FLYING CLOUD DR EDEN PRAIRIE, MN 55347	41-1883167	LLC	50,000		N/A	N/A	SPONSORSHIP

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOUTH CENTRAL COLLEGE1920 LEE BLVD NORTH MANKATO, MN 56003	41-1649572	501(C)(3)	7,500		N/A	N/A	EDUCATION AND AWARENESS
THE HAND THAT FEEDS USPO BOX 596 ARLINGTON,VA 22216	26-3822330	501(C)(4)	60,000		N/A	N/A	EDUCATION AND AWARENESS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNIVERSITY OF MN 1300 S SECOND ST MINNEAPOLIS, MN 55485	41-6007513	STATE GOV	11,000		N/A	N/A	EDUCATION AND AWARENESS

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
MINNESOTA CORN GROWERS ASSOCIATION

Employer identification number
41-1369512

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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 ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all 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**		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☑ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ 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			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only 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			
a	The organization?	**5a**		
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		
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			
a	The organization?	**6a**		
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		
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**		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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, columns (D) and (E) for that individual

(A) Name		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
(1) TIM GERLACH	(i)	145,615	0	2,649	8,896	7,351	164,511	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
MINNESOTA CORN GROWERS ASSOCIATION

Employer identification number
41-1369512

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	THE ASSOCIATION'S EXECUTIVE COMMITTEE IS COMPRISED OF THE PRESIDENT, CHAIRMAN OF THE BOARD, VICE PRESIDENT, SECRETARY AND TREASURER THE MEMBERSHIP CHAIRMAN AND GOVERNMENT RELATIONS CHAIRMAN ARE ALSO ON THE COMMITTEE IF NOT REPRESENTED BY ONE OF THE OFFICERS OF THE BOARD THE EXECUTIVE COMMITTEE HAS THE AUTHORITY OF THE FULL BOARD BETWEEN MEETINGS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	THE ASSOCIATION'S MEMBERSHIP IS OPEN TO ALL INDIVIDUALS AND CORPORATIONS WHO HAVE AN INTEREST IN SUPPORTING THE COMMON PURPOSES OF MINNESOTA CORN PRODUCERS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	DULY APPOINTED DELEGATES FROM COUNTY ASSOCIATIONS AND MEMBERS OF THE ASSOCIATION ELECT THE ASSOCIATION'S BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE ASSOCIATION'S EXECUTIVE COMMITTEE REVIEWS THE FORM 990 IN DEPTH WITH KEY STAFF AND THE INDEPENDENT AUDITOR THE FORM 990 IS THEN PRESENTED TO THE FULL BOARD BEFORE IT IS FILED WITH THE IRS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ASSOCIATION HAS A CONFLICT OF INTEREST POLICY ANNUAL STATEMENT WHERE EACH DIRECTOR, OFFICER, AND MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS SHALL COMPLETE AND SIGN THE STATEMENT AT THE TIME OF HIS OR HER INITIAL ELECTION OR APPOINTMENT AND ANNUALLY THEREAFTER THE ASSOCIATION ALSO CONDUCTS PERIODIC REVIEWS OF THE POLICY TO ENSURE THAT IT OPERATES IN A MANNER CONSISTENT WITH ITS PURPOSES IF A CONFLICT IS DETERMINED TO EXIST BY THOSE MEMBERS WHO DO NOT HAVE A CONFLICT, THE INTERESTED PERSON MUST LEAVE THE BOARD (OR COMMITTEE) MEETING DURING THE DISCUSSION OF, AND THE VOTE IN, THE PROPOSED TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE CONFLICT OF INTEREST ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE DOCUMENTED IN THE MEETING MINUTES

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	THE PERSONNEL COMMITTEE, WHICH IS COMPRISED OF INDEPENDENT PERSONS, USED A SALARY SURVEY TO DETERMINE COMPENSATION FOR THE EXECUTIVE DIRECTOR A WRITTEN CONTRACT WAS APPROVED BY THE PERSONNEL COMMITTEE THIS PROCEDURE WAS LAST PERFORMED IN 2012 FOR THE EXECUTIVE DIRECTOR, T GERLACH THE EXECUTIVE DIRECTOR REVIEWS AND DETERMINES THE COMPENSATION FOR THE BUSINESS & FINANCE DIRECTOR THE ASSOCIATION USES SALARY SURVEYS AND FORM 990S OF OTHER SIMILARLY SITUATED EXEMPT ORGANIZATIONS TO DETERMINE THE COMPENSATION OF OTHER OFFICERS, INCLUDING THE BUSINESS & FINANCE DIRECTOR, S SWENSON THIS PROCEDURE WAS LAST PERFORMED IN 2012

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ASSOCIATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
EXPLANATION FOR RENTAL ACTIVITY	FORM 990, PART VIII, LINE 6A	THE MINNESOTA CORN GROWERS ASSOCIATION ("ASSOCIATION") AND THE MINNESOTA CORN RESEARCH AND PROMOTION COUNCIL ("COUNCIL") ARE TWO SEPARATE ORGANIZATIONS THAT WORK VERY CLOSELY TOGETHER AND SHARE A MISSION THE COUNCIL AND THE ASSOCIATION SHARE THE OBJECTIVE AND PURPOSE OF PROMOTING THE EFFICIENT PRODUCTION OF CORN AND ENHANCING THE PROFITABILITY OF CORN PRODUCERS IN THE STATE OF MINNESOTA THE COUNCIL AND THE ASSOCIATION DESIRE TO ALLOCATE EXPENSES AMONG THEIR RESPECTIVE ORGANIZATIONS IN ORDER TO MAXIMIZE THE AMOUNT OF RESOURCES THAT CAN BE UTILIZED TO ACHIEVE THEIR MUTUAL OBJECTIVES WHILE AT THE SAME TIME COMPLYING WITH ALL LEGAL RESTRICTION ON THE USE OF COUNCIL FUNDS THE COUNCIL PAYS RENT TO THE ASSOCIATION

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
MINNESOTA CORN GROWERS ASSOCIATION

Employer identification number
41-1369512

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No
(1) MINNESOTA CORN RESEARCH AND PROMOTIONAL COUNCIL 738 FIRST AVENUE EAST SHAKOPEE, MN 55379 93-1026869	RESEARCH	MN	N/A	N/A	N/A		No
(2) MINNESOTA CORN GROWERS ASSOCIATION FEDERAL PAC 738 FIRST AVENUE EAST SHAKOPEE, MN 55379 27-1156398	LOBBYING ACTIVITY	MN	527	N/A	MINNESOTA CORN GROWERS ASSOCIATION	Yes	
(3) MINNESOTA CORN GROWERS ASSOCIATION STATE PAC 738 FIRST AVENUE EAST SHAKOPEE, MN 55379 27-0444457	LOBBYING ACTIVITY	MN	527	N/A	MINNESOTA CORN GROWERS ASSOCIATION	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on 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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e	Yes	
f Sale of assets to related organization(s)	1f		No
g Purchase of assets from related organization(s)	1g		No
h Exchange of assets with related organization(s)	1h		No
i Lease of facilities, equipment, or other assets to related organization(s)	1i	Yes	
j Lease of facilities, equipment, or other assets from related organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for related organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations by related organization(s)	1l		No
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	Yes	
n Sharing of paid employees with related organization(s)	1n		No
o Reimbursement paid to related organization(s) for expenses	1o		No
p Reimbursement paid by related organization(s) for expenses	1p	Yes	
q Other transfer of cash or property to related organization(s)	1q		No
r Other transfer of cash or property from related organization(s)	1r		No

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

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

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

Part VII Supplemental Information

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

Identifier	Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 41-1369512
Name: MINNESOTA CORN GROWERS ASSOCIATION

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

4d. Other program services

(Code) (Expenses $ including grants of $) (Revenue $)

FOOD & BIOENERGY (FAB) TEAM THE FAB TEAM SUPPORTS SEVERAL PROJECTS AND INITIATIVES INVOLVING FOOD AND FUEL - THE BIO-BASED ENERGY AND THE LIVESTOCK SECTORS FAB TEAM PROJECTS ARE AS DIVERSE AS SUPPORT FOR NATIONAL ETHANOL INITIATIVES SUCH AS BIO-ETHANOL, GROWTH ENERGY MARKET DEVELOPMENT AND THE AMERICAN COALITION FOR ETHANOL - TO MINNESOTA CLEAN AIR CHOICE COALITION'S FUELING INFRASTRUCTURE AND CONSUMER EDUCATION EFFORTS CONDUCTED BY THE AMERICAN LUNG ASSOCIATION IN MINNESOTA IN THE LAST YEAR, THE TEAM ACTED AS AN ORGANIZER AND FOUNDING SUPPORTER OF THE FARM & FOOD ALLIANCE OF MINNESOTA, WHICH ASSISTS LIVESTOCK PRODUCERS IN THEIR CARE OF ANIMALS

(Code) (Expenses $ including grants of $) (Revenue $)

EXPANDED USES (EU) TEAM IN THE LAST YEAR, THE EU TEAM DIRECTLY FUNDED SEVEN RESEARCH PROJECTS AND AN ADDITIONAL ELEVEN RESEARCH PROJECTS THROUGH ITS COLLABORATIVE AGREEMENT WITH THE AGRICULTURE UTILIZATION RESEARCH INSTITUTE (AURI) THROUGH THIS TEAM, MINNESOTA'S STATE CORN ORGANIZATIONS ARE THE SINGLE LARGEST FARM GROUP SUPPORTER OF AURI ALTHOUGH NOT LIMITED TO ONLY THESE, THE EU TEAM'S RESEARCH EMPHASIS HAS BEEN IN THE AREAS OF LIVESTOCK NUTRITION FEEDING STUDIES, DRIED DISTILLERS GRAINS, BIOMASS COLLECTION METHODS, AND BIOFUEL-POWERED ENGINE PERFORMANCE AND ENGINE TESTING