

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

		The digatization may have to use a copy of this retain to satisfy state		nements	inspection		
<u>A</u>	For the 2	011 calendar year, or tax year beginning $10/01/11$, and ending $09/30/$	12				
	Check if applic	la 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		D Emplo	yer identification number		
	Address chan						
\equiv		Doing Rusiness As		E2	-1752000		
	Name change	Number and street (or P O box if mail is not delivered to street address)	Boom/austa				
	Initial return		Room/suite		one number		
\equiv		53 SLAMA ROAD		410)-956- <u>5771</u>		
\Box	Terminated	City or town, state or country, and ZIP + 4		}			
L	Amended retu	m EDGEWATER MD 21037-1423		G Gross rec	eipts\$ 1,602,600		
	Application pe	F Name and address of principal officer					
ш	/ ppiloditori pe	MARION WILSON, PRESIDENT	H(a) Is this a g	group return for	affiliates? Yes X No		
		53 SLAMA ROAD	H(b) Are all af	ffiliates include	d? Yes No		
		EDGEWATER MD 21037-1423			(see instructions)		
				o, andon a no	(See managacity)		
<u>. </u>	Tax-exempt		_				
<u>J</u>	Website	WWW.MARYLANDGRAIN.COM	H(c) Group ex				
*****	Form of orga	_	Year of formation 1	.992	M State of legal domicile MD		
P	art I	Summary					
	1 Brie	efly describe the organization's mission or most significant activities					
4.	1 -	· · · · · · · · · · · · · · · · · · ·					
Governance	2	SEE SCHEDULE O					
Ĕ							
ē							
Ε							
é							
6	2 Ch	eck this box ▶ 🔛 if the organization discontinued its operations or disposed of more than 2	5% of its not as	coto			
Ō	- 0		.3 /0 UI IIS HEL as	SelS			
ంద	3 Nu	nber of voting members of the governing body (Part VI, line 1a)		3	20		
v)	1						
<u>ë</u>	4 Nui	nber of independent voting members of the governing body (Part VI, line 1b)		4	20		
Activities &	5 Tot	al number of individuals employed in calendar year 2011 (Part V, line 2a)		5	0		
≟	1 3 100	ar number of individuals employed in calendar year 2011 (Part V, line 2a)		3			
्रञ	6 Tot	al number of volunteers (estimate if necessary)		6	17 <u> </u>		
) 4	1						
)	/allot	al unrelated business revenue from Part VIII, column (C), line 12		7a	0		
•	h Net	unrelated business taxable income from Form 990-T, line 34		7b	0		
·	D 1101	directated business taxable income from 1 offir 930-1, line 04	·				
i	1		Prior Ye		Current Year		
a	8 Coi	ntributions and grants (Part VIII, line 1h)	4	6,181	101,972		
Ĭ							
e	1	gram service revenue (Part VIII, line 2g)		1,308	1,495,891		
Revenue	10 Inv	estment income (Part VIII, column (A), lines 3, 4, and 7d)		6,627	4,737		
` œ	L .	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9o , 10c, p nd 11e)		0			
?	1		1 00				
	12 Tot	al revenue – add lines 8 through 11 (mustledual Part VIII, column (A), line 12)	1,09	4,116	1,602,600		
	13 Gra	nts and similar amounts paid (Parcix column (A), hines (143)	95	9,924	1,165,524		
1		nefits paid to or for members (Part IX, column (A), Jine 4		0			
2	1- 50	Remarks paid to or for members (Fair IX, continue), the 1/3					
ွန္	15 Sal	aries, other compensation, emptoyee benefits (Part IX, column (A), lines 5–10)		0	0		
enses	16a Pro	fessional fundraising fees (Part IX, column (A), line 1.1d) ✓		0	0		
ᅙ							
Exp	1	al fundraising expenses (Part X column 10) line 25) ► 0 er expenses (Part IX, column (A) lines 11a-11d, 111-24e)					
-	17 Oth	er expenses (Part IX, cd <u>iumn IX) Nines 11a-11d, 11</u> -24e)	16	2,394	174,923		
	18 Tot	al expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1.12	2,318	1,340,447		
	i ia ke	venue less expenses Subtract line 18 from line 12		8,202	262,153		
0 6	2		Beginning of Cu		End of Year		
Net Assets or	20 Tot	al assets (Part X, line 16)	1,64	<u>7,17</u> 0	1,909,323		
AS	21 Tot	al liabilities (Part X, line 26)		0	0		
ᅗ	22 Not	assets or fund balances. Subtract line 21 from line 20	1 64	7,170	1,909,323		
			1,04	7,170	1,909,323		
	Part II	Signature Block					
		ies of perjury, I declare that I have examined this return, including accompanying schedules and stater and complete, Declaration of preparer (other than officer) is based on all information of which preparei			nowledge and belief, it is		
		Thomas Kithanin		12-	5-2013		
Sig	-n	Signature of officer		Date	5 2015		
	- 1.	Thomas Gannon (current President)		Date			
He	re						
		Type or print name and title					
	Р	nnt/Type preparer's name Preparer's signature	Date /	011	ıf PTIN		
Pai	.a		2/1	Check	L.J."		
	<u> </u>	EFFREY S. GRIFFITH, CPA	77/2	3 self-en	ployed P01081433		
Pre	parer F	m's name > TOAL, GRIFFITH & AYERS, LLC//		irm's EIN	20-0274631		
Use	e Only	200 HARRY S TRUMAN PKWY STE 300	<u>'</u>				
	F	mm's address ANNAPOLIS, MD 21401-7479	F	Phone no	410-224-0343		
Ma	y the IRS	discuss this return with the preparer shown above? (see instructions)	<u></u>				
		rk Reduction Act Notice, see the separate instructions.					
DAA		TREADULE NOTICE, See the separate instructions.			Form 990 (2011)		

Form 990 (201	1) MARYLAND GRAIN P	RODUCERS	52-1752000	Page 2
Part III	Statement of Program Serv	<u>-</u>	-	
		s a response to any question in	this Part III	X
•	escribe the organization's mission.			
SEÈ S	CHEDULE O			
2 Did the	organization undertake any significan	t program services during the year which	h were not listed on the	
	m 990 or 990-EZ?	t program services during the year wind	The world hot hotel on the	Yes X No
•	describe these new services on Sche	edule O		
		ke significant changes in how it conduc	ts, any program	
services	_			Yes X No
If "Yes,"	describe these changes on Schedule	÷ O		
4 Describe	e the organization's program service a	accomplishments for each of its three la	rgest program services, as measured by	/
expense	s Section 501(c)(3) and 501(c)(4) or	ganizations and section 4947(a)(1) trus	ts are required to report the amount of	
grants a	nd allocations to others, the total exp	enses, and revenue, if any, for each pro	gram service reported	
	-			
4a (Code:) (Expenses \$	including grants of \$) (Revenue \$)
			INC. (MGPUB) PROVI	
			OUCATION TO EXPAND T	
		BLITY OF GRAIN PRODU		GRANT FUNDS
	PAND THE USE OF ET		CTS PROGRAMS AND PUB	
	ITIES TO EXPAND TH		SPUB IS REQUIRED TO	
			JCER WHO REQUESTS A	
			R OR \$125 FOR 3 YEAR	
			MARYLAND GRAIN PRODU	
		HIP, SO HE/SHE CAN I	RECEIVE EDUCATIONAL	UPDATES ON
THE C	HECKOFF PROGRAM.			
4b (Code) (Expenses \$	including grants of \$) (Revenue \$	
9000) 44) (Expenses \$	including grants or \$) (Kevende \$,
				i
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
4d Other p	rogram services (Describe in Schedu	ile O)		
(Expens		cluding grants of \$) (Davienus ¢	,
	111C	adding grants or ϕ) (Revenue \$	<u> </u>

			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 (see instructions)?	2		_X_
J	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	_	ŀ	v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
•	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			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	4		
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	-		
	Part III	5	\mathbf{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,			
	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	8		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 credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
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	ŀ	X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		1	
	complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		I	
	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	Ì		
	reported in Part X, line 16 ⁹ 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		<u> </u>
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]	
	Schedule D, Parts XI, XII, and XIII	12a	X	
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		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	, , , , ,	14a		X
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	446		x
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b	- +	
	organization 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	13		
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	-10		
••	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	_17	- 1	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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	-10		
	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
-				

Part IV Checklist of Required Schedules (continued)

			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	X	
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	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		-25	
	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 Schedule K. If "No," go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	ŀ		
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	_28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			l
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			1,7
22	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			.
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	_ 33		X
J 4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	1 24		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	334		
	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		-^ -
	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	36		
٠.	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
	19? Note. All Form 990 filers are required to complete Schedule O	38	x	
			990	1,0044

Form 990 (2011) MARYLAND GRAIN PRODUCERS 52-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 17	_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0	_		į
C	Did the organization comply with backup withholding rules for reportable payments to vendors and				į
	reportable gaming (gambling) winnings to prize winners?		1c	Х	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				ĺ
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 0	4 1		İ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b		<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)			
3a	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		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	•		i	
	over, a financial account in a foreign country (such as a bank account, securities account, or other finaccount)?	nancial			v
h			4a		X
D	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 Financia	I Accounts			į
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	Accounts			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	etion?	5a 5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	CUOTT	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he	130		
- Ou	organization solicit any contributions that were not tax deductible?	ne	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or	0a		
_	gifts were not tax deductible?	0110 01	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods			į
	and services provided to the payor?	3	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	ras			
	required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h		X
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	9			İ
	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				İ
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		ļ
10	Section 501(c)(7) organizations. Enter	اما			İ
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	-		į
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	- 1		ĺ
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders	1440			į
a b	Gross income from other sources (Do not net amounts due or paid to other sources	11a	1 1		İ
	against amounts due or received from them)	116			ĺ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For		12a		<i>:</i>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	126	IZa		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120	┨ ┃		į
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		<u></u>
-	Note. See the instructions for additional information the organization must report on Schedule O		100		
b	Enter the amount of reserves the organization is required to maintain by the states in which				
-	the organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c	┪ ┃		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	le O	14b		_

Form 990 (2011) MARYLAND GRAIN PRODUCERS 52-1752000 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 if Schedule O contains a response to any question in this Part VI X 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 20 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 20 Enter the number of voting members included in line 1a, above, who are independent 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? X 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? X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 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? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? X 8a b Each committee with authority to act on behalf of the governing body? X 8b 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 X 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 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 b Describe in Schedule O the process, if any, used by the organization to review this Form 990 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 13 Did the organization have a written whistleblower policy? X 13 14 Did the organization have a written document retention and destruction policy? 14 X Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official X 15a X Other officers or key employees of the organization 15b 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? X 16a 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website X Another's website X Upon request 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 during the tax year 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization. ▶ LYNNE HOOT 53 SLAMA ROAD

EDGEWATER

410-956-5771

MD

21037

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.

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

(A) Name and Title	(B) Average hours per week (describe hours for	(do box off	not c k, unle	, unless person is both an cer and a director/trustee)		than one s both an r/trustee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	(W-2/1099-MISC)	(** 2 *********************************	organization and related organizations
(1) KEVIN ANDERSON		1							
MEMBER	1.00	X					0	0	0
(2) CHIP BOWLING									
MEMBER	1.00	X					0	0	0
(3) CHIP COUNCELL									
TREASURER	1.00	X		X			0	0	0
(4) STEVE ERNST									
SECRETARY	1.00	X		X			0	0	0
(5) TOM GANNON						1		_	
MEMBER	1.00	X					0	0	0
(6) ROBERT GARRETT	1	l							
MEMBER	1.00	X		ļ			0	0	0
(7) BOBBY GUY	1								
MEMBER	1.00	X					0	0	0
(8) ROBERT HUTCHISO									
MEMBER	1.00	X		<u> </u>	<u> </u>	 	0	0	<u> </u>
(9) MELVIN BAILE, J		37						_	
MEMBER (10) ROBERT KRATOCHV	1.00	X			<u> </u>		0	0	0
MEMBER RATOCHV.	1.00	x					0	0	^
(11) LAWRENCE MEEKS	1.00				-	 			0
MEMBER	1.00	x					0	O	0
(12) SYD MORELAND	1.00	A			├-	h —			
MEMBER	1.00	x					0	0	0
(13) CHARLES MORRIS	1.00	1		<u> </u>					
MEMBER	1.00	X					0	l o	0
(14) MARK POWELL		† <u></u>			 		<u> </u>		
MEMBER	1.00	X					0	l o	0
	·	1	ш.				<u> </u>		5 000 (2011)

Form 990 (2011)

		ustee	es, K			loye	es, a	and Highest Compensate					_
(A) Name and title	(B) Average	l ,,		Pos	C) sition			(D) Reportable	(E) Reportable	(F) Estimated			
	hours per week	bo	x, unle	ess pe	rson	than o	an	compensation	compensation from related		amount o		
	(describe hours for				_	er/truste		the organization	organizations (W-2/1099-MISC)		from the	1	
	related organizations	direc	stitutio	Officer	ey em	nploy	Former	(W-2/1099-MISC)			organization	ed	
	in Schedule O)	Individual trustee or director	Institutional trustee		Key employee	comp					organizatio	ons	
		stee	ustee		ľ	Highest compensated employee							
(15) JENNIE SCHMIDT		<u> </u>		ļ									_
MEMBER	1.00	x	İ		1			0	o			(0
(16) JASON SCOTT		l											_
MEMBER (17) PAUL SPIES	1.00	X						0	0	 			<u>0</u>
VICE PRESIDENT	1.00	x		x				0	0				0
(18) DONNIE TENNYSON	1 00												_
MEMBER (19) JAMES WEDDLE	1.00	X		-	_			0	0	 	3		<u>0</u>
MEMBER	1.00	x				<u> </u>		0	0				0
(20) MARION WILSON PRESIDENT	1.00	x		x				0	0			,	_
(21)	1.00	┢		^				0	0			'	<u>0</u>
(22)													_
(23)			ļ										_
(24)			ļ										_
		<u> </u>								<u> </u>			_
(25)													_
1b Sub-total	-4- 4- D-4 VIII	O4	•				•			<u> </u>	_		_
c Total from continuation she d Total (add lines 1b and 1c)	ets to Part VII,	Sect	ion .	A			P			 		<u></u>	_
2 Total number of individuals (in	•			thos	e lis	ted a	bov	e) who received more than	\$100,000 in				_
reportable compensation from	the organizatio	<u>n</u> ▶	0				•					res No	_
3 Did the organization list any fo								oyee, or highest compensa	ated				
employee on line 1a? If "Yes," 4 For any individual listed on line								on and other compensation	from the		3	X	_
organization and related orgai												v	
individual 5 Did any person listed on line 1	la receive or acc	crue	com	pens	atio	n fror	n an	ny unrelated organization o	r ındıvıdual		4	X	-
for services rendered to the or		Yes,"	com	plete	e Sc	hedu	le J	for such person	· <u>-</u>		5	X	_
Section B. Independent Contract 1 Complete this table for your five	ve highest comp												_
compensation from the organi		omp	ensa	tion	for t	he ca	alend		hin the organization's tax y (B) otion of services	<u>rear</u>		(C) pensation	_
Name and	Name and business address							Descrip	outon of services		Com	pensation	_
													_
												.	_
													_
													_
2 Total number of independent			-					se listed above) who					
received more than \$100,000	of compensatio	n fro	m the	e org	anız	ation	<u> </u>		0		Form	990 (201	11)

1 4	rt V	III Statement of Reve	nue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
まま	1a	Federated campaigns	1a				reveriue		512, 513, or 514
is a		Membership dues	1b						
E,G		Fundraising events	1c						
##		Related organizations	1d		-				
S,E		Government grants (contributions)	1e		101,897				
<u>Sis</u>		All other contributions, gifts, grants,			= /				
but	-	and similar amounts not included above	1f		75				
ĒŠ	q	Noncash contributions included in lines 1a		\$					
Program Service Revenue Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		•	•	101,972			
3					Busn Code				
Ne	2a	CHECKOFF PAYMENTS			900099	1,495,891	1,495,891		
2	b								
Şi	С								
Ser	d								
ᇣ	е								
ğ	f	All other program service reve	nue						
ے	g	Total. Add lines 2a-2f			>	1,495,891			
	3	Investment income (including	dıvıder	nds, intere	est,				_
		and other similar amounts)		▶ _	4,737			4,737	
	4	Income from investment of tax	-exem	pt bond p	roceeds 🕨 📙				
	5	Royalties			>				
- 1		(ı) Real		(II) F	Personal				
	6a	Gross rents							
	b	Less rental exps							
		, ,,							
		Net rental income or (loss) Gross amount from			•				
	sales of assets (I) Securities (II)		Other						
		other than inventory							
	b	Less cost or other							
		basis & sales exps		ļ					
		Gain or (loss)		L					
		Net gain or (loss)							
ηne	8a	Gross income from fundraising eve	nts		- 1				
		(not including \$							
Other Reve		of contributions reported on line 1c)				į.			
ĕ		See Part IV, line 18	a '						
8		Less: direct expenses	b						
		Net income or (loss) from fund Gross income from gaming activitie	1	events	<u> </u>				
	Эа	See Part IV, line 19							
	h	Less direct expenses	a b						
		Net income or (loss) from garr	- ,	tuutiee	-		1		
		Gross sales of inventory, less	mig ac	uvides					
	104	returns and allowances	а		1				
	h	Less cost of goods sold	b						
		Net income or (loss) from sale		ventory	•	İ			
		Miscellaneous Revenue	0 01 111	vernory	Busn, Code				
	11a					į	İ		
	b				<u> </u>				
	C						-·-		
	d	All other revenue							
		Total. Add lines 11a–11d							· · · · · · · · · · · · · · · · · · ·
	12	Total revenue. See instructio	ns		▶ 「	1,602,600	1,495,891	0	4,737

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,	(A)	(B)	(C)	(D)					
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses					
1	Grants and other assistance to governments and									
	organizations in the U.S. See Part IV, line 21	1,155,024								
2	Grants and other assistance to individuals in									
	the U.S. See Part IV, line 22	10,500								
3	Grants and other assistance to governments,									
	organizations, and individuals outside the									
	U S See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees									
6	Compensation not included above, to disqualified									
	persons (as defined under section 4958(f)(1)) and									
	persons described in section 4958(c)(3)(B)			. <u>.</u> .						
7	Other salaries and wages									
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)									
9	Other employee benefits									
10	Payroll taxes									
11	Fees for services (non-employees)									
а	Management	53,150								
b	Legal	453								
С	Accounting	3,875								
d	Lobbying									
e	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
g	Other									
12	Advertising and promotion	5,244		<u> </u>						
13	Office expenses	5,244		<u> </u>	·					
14	Information technology									
15 16	Royalties Occupancy									
17	Travel	8,542								
18	Payments of travel or entertainment expenses	0,542								
	for any federal, state, or local public officials									
19	Conferences, conventions, and meetings									
20	Interest									
21	Payments to affiliates									
22	Depreciation, depletion, and amortization									
23	Insurance			-						
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	REFUNDS OF CHECKOFFS	80,649								
b	BOARD MEETINGS	14,034								
С	SUPPLIES	8,976								
d	ļ									
е	All other expenses									
25		1,340,447	0	0	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)			<u></u>	L					

га	rt X	Balance Sheet		(5)
			(A) Beginning of year	(B) End of year
	_	Cook non-interest houses		
		Cash—non-interest bearing		
		Savings and temporary cash investments		
		Pledges and grants receivable, net	<u> </u>	
İ		Accounts receivable, net		4
	5	Receivables from current and former officers, directors, trustees, key		
		employees, and highest compensated employees. Complete Part II of Schedule L.	I 1	_
				5
	6	Receivables from other disqualified persons (as defined under section 4059/6/42), persons described in pastern 4059/6/42).		
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contribute	- I	
.		employers and sponsoring organizations of section 501(c)(9) volunta	· 1	
ets	_	employees' beneficiary organizations (see instructions)		
Assets	_	Notes and loans receivable, net	7	
`	8	Inventories for sale or use		· · · · · · · · · · · · · · · · · · ·
		Prepaid expenses and deferred charges		9
	iva	Land, buildings, and equipment cost or		
	1	other basis Complete Part VI of Schedule D		_
J		Less accumulated depreciation 10b		0c
1		Investments—publicly traded securities		1
	12	Investments—other securities See Part IV, line 11		2
	13	Investments—program-related See Part IV, line 11		3
	14	Intangible assets		4
	15	Other assets See Part IV, line 11	4 4 4 4	5 1 000 222
\dashv		Total assets. Add lines 1 through 15 (must equal line 34)		
	17	Accounts payable and accrued expenses		
	18	Grants payable		8
į	19	Deferred revenue		9
	20	Tax-exempt bond liabilities		20
ł	21	Escrow or custodial account liability Complete Part IV of Schedule D		21
Liabilities	22	Payables to current and former officers, directors, trustees, key		
≣		employees, highest compensated employees, and disqualified perso Complete Part II of Schedule L	i i	
Lia	23	•		22
		Secured mortgages and notes payable to unrelated third parties		23
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related thir		24
	23	parties, and other liabilities not included on lines 17-24). Complete Pa	· · · · · · · · · · · · · · · · · · ·	
		of Schedule D	i i	, <u>e</u>
	26	Total liabilities. Add lines 17 through 25		25 26 O
	20	Organizations that follow SFAS 117, check here X and comp		.6
ŝ		lines 27 through 29, and lines 33 and 34.	iete	
Š	27	Unrestricted net assets	1,647,170 2	1,909,323
ala	28	Temporarily restricted net assets		1,909,323
<u> </u>	29	Permanently restricted net assets		29
ן בֿן	23	Organizations that do not follow SFAS 117, check here		.9
<u></u>		complete lines 30 through 34.	ч <u> </u>	
<u>ş</u>	30	Capital stock or trust principal, or current funds		
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		30
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32
ž	33	Total net assets or fund balances		1,909,323
	34			
	54	Total liabilities and net assets/fund balances	1,04/,1/0 3	4 1,909,

Form **990** (2011)

orn	1 990 (2011) MARYLAND GRAIN PRODUCERS 52-1752000			Pag	e 12
Ρa	rt XI Reconciliation 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	1,60		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,34		
3	Revenue less expenses Subtract line 2 from line 1	3		52 ,:	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,64	<u> 17, 1</u>	<u> 170</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
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	1,90	09,3	<u> 323</u>
Pa	ert 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 X 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		X _
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 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?		2c	X	
	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 separate basis, consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		<u> </u>
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		
			Forr	ո 990	(2011)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of organization

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

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

Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C

MARYLAND GRAIN PRODUCERS

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

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

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

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

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

	UTILIZATION BOARD, I	NC.		52-17520	00
Pai	t I-A Complete if the organization is exen	npt under section 501(c) or is a section	on 527 organizati	on.
1	Provide a description of the organization's direct and indire	ect political campaign activities	ın Part IV.		
2	Political expenditures			▶ \$	
3	Volunteer hours				
Pai	t I-B Complete if the organization is exen	npt under section 501(c)(3).		
1	Enter the amount of any excise tax incurred by the organiz	zation under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organization	on managers under section 495	5	▶ \$	
3	If the organization incurred a section 4955 tax, did it file Fe	orm 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV				
Pai	t I-C Complete if the organization is exer	npt under section 501(c), except sect	ion 501(c)(3).	
1	Enter the amount directly expended by the filing organizat	ion for section 527 exempt fund	tion		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contribu	uted to other organizations for s	ection		
_	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 En	iter here and on Form 1120-PO	L,		
_	line 17b	_		▶ \$	
4	Did the filing organization file Form 1120-POL for this year				Yes No
5	Enter the names, addresses and employer identification n				
	organization made payments For each organization listed		- -		
	the amount of political contributions received that were pro-	, ,		•	
	as a separate segregated fund or a political action commit				 .
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
				filing organization's funds If none, enter -0-	promptly and directly
					delivered to a separate
					political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)	····				
(5)					
(6)					_
For Pa	perwork Reduction Act Notice, see the Instructions for Form 990 or 990-E			Schedule ((Form 990 or 990-F7) 2011

Sche	edule C (Form 900 or 990-EZ) 2011 MARYI	AND GRAIN	PRODUCERS		52-1752000	Page 2
Pa	art II-A Complete if the organ	ization is exem	pt under section	501(c)(3) and fi	led Form 5768 (ele	
	section 501(h)). Check ► if the filing organiza name, address, EIN Check ► if the filing organiza	l, expenses, and	share of excess lo	obbying expendi	itures).	oup member's
_	_ · _ · _ · _ · _ · _ · _ · _ · _ · _ ·			TILIOI PIOVISIONS		(b) Affiliated
	(The term "expenditures"	bbying Expendi ' means amounts			(a) Filing organization's totals	group totals
1	a Total lobbying expenditures to influence		 	· · · ·		
	b Total lobbying expenditures to influence		• •			·
	c Total lobbying expenditures (add lines 1		, ,,			
	d Other exempt purpose expenditures	,				
	e Total exempt purpose expenditures (add	l lines 1c and 1d)			T	
	f Lobbying nontaxable amount Enter the		wing table in both			···
	columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	able amount is			
	Not over \$500 000	20% of the amount on	line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of	the excess over \$500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of	the excess over \$1,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	ne excess over \$1,500,000			
	Over \$17,000,000	\$1,000,000				
	g Grassroots nontaxable amount (enter 25	5% of line 1f)				
	h Subtract line 1g from line 1a If zero or le	ess, enter -0-				
	i Subtract line 1f from line 1c If zero or les	ss, enter -0-				
	\boldsymbol{j} . If there is an amount other than zero on	either line 1h or line 1	Iı, dıd the organızatıon	file Form 4720		
	reporting section 4911 tax for this year?					Yes No
		at made a section in the instance in the insta	ing Period Under on 501(h) election structions for line ures During 4-Ye	n do not have t es 2a through 2	o complete all of the compage 4.)	ne five
	LOL	bying Expenditi	ures During 4-16	Averaging P	eriou	
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2	a Lobbying nontaxable amount					
	b Lobbying ceiling amount (150% of line 2a, column(e))					
	c Total lobbying expenditures					
	d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

	-1752		- F700		Page
Part II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	tilea וכ	Forn	n 5/68		
_	(8	a)		(b)	
For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	A	mount	
 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? 					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?	<u> </u>				
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body? b Pallies demonstrations segments conventions speeches legitures or any complex magnets.					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?i Other activities?	-				
j Total. Add lines 1c through 1i				_	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	•				
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			****		
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5),	or se	ection		
501(c)(6).	. ,, ,,				
			_	Yes	
1 Were substantially all (90% or more) dues received nondeductible by members?			<u> </u>	<u> </u>	X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?				2 X	
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?				3	X
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No answered "Yes."				line 3	, is
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
political expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year		2b			
c Total		2c			
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying					
and political expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5		_	
Part IV Supplemental Information					

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A, and Part II-B, line

1 Also, complete this part for any additional information

Schedule C (Form 990 or 990-EZ) 2011

MARYLAND GRAIN PRODUCERS

52-1752000

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2011

Open to Public Inspection

	of the organization		Employer identification	number
	ARYLAND GRAIN PRODUCERS		52-175200	0
	TILIZATION BOARD, INC. art I Organizations Maintaining Donor Advised Fu	nde or Other Similar Funds or		
Г.	organizations maintaining bollor Advised ru	V. line 6	Accounts. Com	Jete II tile
	0.90.1120.011 0.107.00 7.00 10 7.0111 0.00 7.1 0.11	(a) Donor advised funds	(b) Funds and o	ther accounts
1	Total number at end of year	(a) Bonor daylood fands	(2) (3.10 (3.10 (
2	Aggregate contributions to (during year)			
3	Aggregate contributions to (during year) 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	it the assets held in donor advised		
Ī	funds are the organization's property, subject to the organization's exc			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	_		
	only for charitable purposes and not for the benefit of the donor or don			
	conferring impermissible private benefit?	or correct, or for any cases purpose		Yes No
P	art II Conservation Easements. Complete if the orga	nization answered "Yes" to Form	990, Part IV, lin	e 7.
1	Purpose(s) of conservation easements held by the organization (check			
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically im	portant land area	
	Protection of natural habitat	Preservation of a certified histori	c structure	
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in the form of a cons	ervation	
	easement on the last day of the tax year			
			Held at the	End of the Tax Year
a	Total number of conservation easements		2a	
ŀ	Total acreage restricted by conservation easements		2b	<u>-</u>
C	Number of conservation easements on a certified historic structure inc	luded in (a)	2c	
(Number of conservation easements included in (c) acquired after 8/17	/06, and not on a	j	
	historic structure listed in the National Register		2d	
3	•	ktinguished, or terminated by the organiza	ation during the	
	tax year ▶			
4	Number of states where property subject to conservation easement is	located ▶		
5	Does the organization have a written policy regarding the periodic mor	nitoring, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enfor	cing conservation easements during the	year	
	•			
7	3, 1, 3, 1	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)		□ vaa □ Na
	(i) and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIV, describe how the organization reports conservation easen balance sheet, and include, if applicable, the text of the footnote to the	·	•	
	organization's accounting for conservation easements	organization's imancial statements that t	describes the	
	art III Organizations Maintaining Collections of Art	Historical Treasures or Other	Similar Assets	
_	Complete if the organization answered "Yes" to		Olimai Assets.	·
1	a If the organization elected, as permitted under SFAS 116 (ASC 958), i	not to report in its revenue statement and	balance sheet	
	works of art, historical treasures, or other similar assets held for public	· ·		
	public service, provide, in Part XIV, the text of the footnote to its finance			
t	o If the organization elected, as permitted under SFAS 116 (ASC 958), t	•		
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furtle	herance of	
	public service, provide the following amounts relating to these items			

b Assets included in Form 990, Part X

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

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 (ASC 958) relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

a Revenues included in Form 990, Part VIII, line 1

Schedule D (Form 990) 2011

sche		GRAIN PRO			1752000	Page 2
Pa	art III Organizations Maintainii	ng Collections of	f Art, Historical T	reasures, or Otl	ner Similar Assets	s (continued)
3	Using the organization's acquisition, access collection items (check all that apply)					
а	Public exhibition	d 🗌	Loan or exchange pro	grams		
b	Scholarly research	е 🗍	Other	J		
С	Preservation for future generations					
4	Provide a description of the organization's	collections and explai	n how they further the	organization's evem	nt nurnose in Part	
	XIV.	outer and oxpid.	ov arey rarator are	organization o exem	pr purpose in r arr	
5	During the year, did the organization solicit	or receive donations	of art historical treasu	res or other similar		
•	assets to be sold to raise funds rather than					Yes No
Pa	art IV Escrow and Custodial A				d "Yes" to Form 9	
	line 9, or reported an amo			inzation answere	0 103 to 101111 5	50, i ait iv,
1a	Is the organization an agent, trustee, custo			or other accets not		
ıu	included on Form 990, Part X?	dian or other intermet	diary for contributions (or other assets not		□ vaa □ Na
h	If "Yes," explain the arrangement in Part X	IV and complete the fo	alloumes table:			☐ Yes ☐ No
	ii res, explain the attailgement in Falt A	iv and complete the it	bilowing table.			Amount
_	Beginning balance				4-	Amount
	• •				1c	
u	Additions during the year				1d	
e	Distributions during the year				1e	
T 2-	Ending balance	E 000 D 11/1	0.40		1f	
	Did the organization include an amount on		e 21?			☐ Yes ☐ No
*******	If "Yes," explain the arrangement in Part X		:	0/" t- F 00	0. D. 1.11/11/11/14	
Pě	art V Endowment Funds. Com					
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years back	(e) Four years back
	Beginning of year balance					
	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 cu	urrent year end baland	ce (line 1g, column (a))	held as		
а	Board designated or quasi-endowment ▶	%				
b	Permanent endowment ▶ %)				
С	Temporarily restricted endowment	%				
	The percentages in lines 2a, 2b, and 2c sh	•				
3a	Are there endowment funds not in the poss	session of the organiz	ation 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 organization	ons listed as required	on Schedule R?			3b
4	Describe in Part XIV the intended uses of t	he organization's end	owment funds			
Pa	art VI Land, Buildings, and Eq	uipment. See Fo	rm 990, Part X, lin	e 10.		
_	Description of property	(a) Cost or other) Accumulated	(d) Book value
		(investment)	(other	er)	depreciation	
1a	Land					
	Buildings					
	Leasehold improvements					
	Equipment					· · · · · · · · · · · · · · · · · · ·
	Other					······································
	I. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Pa	rt X, column (B), line 10	0(c).)	•	

2000

Page **3**

Part VII	Investments—Other Securities. See Form	990, Part X, line 12.		
	(a) Description of security or category	(b) Book value	(c) Method of valuation	
	(including name of security)		Cost or end-of-year market value	
(1) Financial				
	eld equity interests			
(3) Other				_
(A)				_
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)		<u> </u>		
<u>(I)</u>				
	nn (b) must equal Form 990, Part X, col (B) line 12)	>		
Part VIII	Investments—Program Related. See Forn			
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value	_
_(1)				
(2)				
(3)				
(4)				
_ (5)	· · · · · · · · · · · · · · · · · · ·			
_(6)				
_(7)				
(8)				
(9)				
(10)				
	nn (b) must equal Form 990, Part X, col. (B) line 13)	•		
Part IX	Other Assets. See Form 990, Part X, line 1	5		
	(a) Description	·	(b) Book	value
(1)				······································
(2)	<u> </u>			
(3)	<u> </u>			
_(4)				· -
_(5)				
(6)				
(7)				
(8)				
_(9)				
(10)				
	nn (b) must equal Form 990, Part X, col (B) line 15.)		>	
Part X	Other Liabilities. See Form 990, Part X, lin	e 25	<u> </u>	
1.	(a) Description of liability	(b) Book value		
	Income taxes			
(2)				
_(3)				
_(4)	· · · · · · · · · · · · · · · · · · ·			
(5)				
(6)			į	
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)	>		
	SC 740) Footnote In Part XIV, provide the text of the footr	note to the organization's financ	al statements that reports the	
	s liability for uncertain tax positions under FIN 48 (ASC 74		·	

	edule D (Form 990) 2011 MARYLAND GRAIN PRODUCERS 52-175200		Page 4
Pa	art XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	<u> 1ents</u>	<u> </u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,602,600
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	<u>1,340,447</u>
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	262,153
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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	262,153
Pa	art XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re		
1	Total revenue, gains, and other support per audited financial statements	1	1,521,951
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12 ⁻		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	1 501 051
3	Subtract line 2e from line 1	3	1,521,951
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b			00 640
	Add lines 4a and 4b	4c	80,649
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	1,602,600
	art XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per I		rn 1 250 700
1	Total expenses and losses per audited financial statements	1	1,259,798
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	.	
а		.	
	Prior year adjustments 2b		
	Other losses 2c	, 1	
	Other (Describe in Part XIV)	٠	
	Add lines 2a through 2d	2e 3	1,259,798
3	Subtract line 2e from line 1	3	1,239,196
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	. !	
a	00 640		
		4-	90 640
	Add lines 4a and 4b	4c 5	80,649 1,340,447
<u>5</u>		_ 5	1,340,447
_ ┌ ३	art 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, line 2, 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

PART X - FIN 48 FOOTNOTE

THE ORGANIZATION ADOPTED FASB ASC 740, WHICH PRESENTED A COMPREHENSIVE MODEL FOR HOW AN ENTITY SHOULD MEASURE, RECOGNIZE, PRESENT AND DISCLOSE IN ITS FINANCIAL STATEMENTS UNCERTAIN TAX POSITIONS THAT THE ORGANIZATION HAS TAKEN OR EXPECTS TO TAKE ON A TAX RETURN AS OF OCTOBER 1, 2009. UNDER THIS STANDARD, THE ORGANIZATION RECOGNIZES THE TAX BENEFITS FROM UNCERTAIN TAX POSITIONS ONLY IF IT IS MORE LIKELY THAN NOT THAT THE TAX POSITION WILL BE

Part XIV Supplemental Information (continued)

SUSTAINED ON EXAMINATION BY THE TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE ORGANIZATION'S INFORMATIONAL RETURN FILINGS ARE SUBJECT TO AUDIT BY THE IRS. THE ORGANIZATION'S OPEN AUDIT PERIODS ARE 2009-2011. THERE WAS NO IMPACT TO THE ORGANIZATION'S FINANCIAL STATEMENTS AS A RESULT OF THE IMPLEMENTATION OF FASB ASC 740.

PART XI, LINE 8 - RECONCILIATION OF CHANGES - OTHER

REFUNDS OF CHECKOFFS

-80,649

REFUNDS OF CHECKOFFS

\$ 80,649

\$

PART XII, LINE 4B - REVENUE AMOUNTS INCLUDED ON RETURN - OTHER

REFUNDS OF CHECKOFFS

\$ 80,649

PART XIII, LINE 4B - EXPENSE AMOUNTS INCLUDED ON RETURN - OTHER

REFUNDS OF CHECKOFFS

\$ 80,649

56
ď
₹
56
Ξ.
2013
2
8
8
20220
8

SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

Open to Public Inspection

OMB No 1545-0047

ž MKT DEV / EDUCATION MKT DEV/EDUCATION (h) Purpose of grant or assistance X 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. EDUCATION EDUCATION EDUCATION EDUCATION EDUCATION EDUCATION RESEARCH Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" თ non-cash assistance (g) Description of Employer identification number 52-1752000 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance ▶ Attach to Form 990. 9,625 50,500 61,392 10,000 35,500 130,000 133,500 34,500 49,249 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant (c) IRC section if applicable 9 ო ო 52-0403490 5 ო 61-1618410|5ന Part II can be duplicated if additional space is needed 01-0725238 52-6002033 52-1354382 52-1961154 23-7003994 52-1494901 General Information on Grants and Assistance (p) EIN MARYLAND GRAIN PRODUCERS the selection criteria used to award the grants or assistance? (4) MARYLAND DEPARTMENT OF AGRICULTURE UTILIZATION BOARD, (9) MID-ATLANTIC PETROLEUM PROPERTIES (7) MARYLAND GRAIN PRODUCERS ASSOC MD 20918 MD 21133 20814 21601 MD 21658 MD 21401 21037 MD 21037 4641 MONTGOMERY AVE, STE 350 (a) Name and address of organization 50 HARRY S. TRUMAN PARKWAY ð Ð (6) MARYLAND FFA FOUNDATION (1) CLEAN FUELS FOUNDATION 2311 MIDDLEBROOK ROAD or government (5) MARYLAND FARM BUREAU (2) LASER LETTERS INC 8 S. WEST STREET 8930 LIBERTY RD 53 SLAMA ROAD (3) LEAD MARYLAND P.O. BOX 3241 53 SLAMA ROAD P.O. BOX 169 SILVER SPRING RANDALLSTOWN Department of the Treasury Internal Revenue Service Name of the organization QUEENSTOWN GERMANTOWN ANNAPOLIS EDGEWATER EDGEWATER BETHESDA (8) MASCD EASTON Part Part II

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

~
Č.
g
ď.
₴
ш.
'n
28
•
-
ന
5
≂
704/201
4
0
=
o.
0
$\overline{}$
~
42
Š
0
ಜ

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Open to Public Inspection

ŝ

OMB No 1545-0047

Employer Identification number 52-1752000 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. General Information on Grants and Assistance MARYLAND GRAIN PRODUCERS INC UTILIZATION BOARD, Name of the organization Part 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. Part II can be duplicated if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States the selection criteria used to award the grants or assistance? Part

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Part II can be duplicated it additional space is needed	space is neede	֓ ֖֖֖֖֖֖֖֡					
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
		200000000000000000000000000000000000000			10000		
(1) NATIONAL ASSOC OF WHEAT GROWERS							
415 2ND ST, NE, STE 300					•		MKT DEVELOPMENT
WASHINGTON DC 20002	48-0668648	9	8,000				,
(2) NATIONAL CORN GROWERS ASSOC.							
632 CEPI DRIVE							MKT DEVELOPMENT
CHESTERFIELD MO 63005	42-0897662	5	177,025				
(3) PENNSYLVANIA STATE UNIVERSITY							
501 AGRICULTURAL SCIENCE & INDUSTRY	21						RESEARCH
UNIVERSITY PARK PA 16802	24-6000376	GOV	17,616				
(4) SUSTAINABLE ENERGY STRATEGIES							
4803 MARYMEAD DRIVE							MKT DEVELOPMENT
FAIRFAX VA 22032	54-1881156		70,579	,			
(5) THE BALTIMORES CHILDREN MUSEUM							
35 MARKET PLACE							EDUCATION
BALTIMORE MD 21202	52-1806933	m	7,500				
(6) THE CENTER FOR FOOD INTEGRITY							
2900 NE BROOKTREE LANE STE 200							EDUCATION
GLADSTONE MO 64119	20-4662713	4	30,000				,
(7) UNIVERSITY OF MARYLAND							
CHESAPEAKE BLDG RM 4101							EDUCATION, RESEARCH
COLLEGE PARK MD 20742	52-6002033	GOV	195,449				
(8) US GRAINS COUNCIL							
1400 K ST, STE 1200							MKT DEVELOPMENT
WASHINGTON DC 20005	53-0260714	9	52,500				
(9) US WHEAT ASSOCIATES							
TH ST, NORTH,							MKT DEVELOPMENT
ARLINGTON VA 22201	48-0643776	9	31,450				

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

20550 02/04/2013 1 26 PM Pg 28

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service			▶ Attach to Form 990	0.			Inspection
Name of the organization MARYLAND GRAIN PROILITATION BOARD,	PRODUCERS RD, INC.				Employer Ide	Employer identification number $52-1752000$	
Part I General Information on Grants and Assistance	d 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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	the amount of the grance?	ants or ass grant funds	rants or assistance, the grantees' equant funds in the United States	eligibility for the grant	s or assistance, and	ъ	Yes No
1 65	overnments and recipient that respace is neede	d Organi sceived π d	zations in the Un	ited States. Con Check this box if	plete if the organo one recipien	anization answ t received mor	ered "Yes" e than \$5,000. ▶
1 (a) Name and address of organization or government	(b) EIN	(c) IRC 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
(1) VIRGINIA TECH 1880 PRATI STREET SUITE 2006 BLACKSBURG VA 24060	54-6001805	000	005'6				RESEARCH
(2) WHEAT FOODS COUNCIL 19201 EAST MAIN ST, STE 103 PARKER	36-3495285	φ	16,000				EDUCATION
(3)		·					
(4)							
(5)							
(9)							
(7)							
(8)							
(6)							
 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	organizations listed le 1 table	in the line	1 table				

Schedule I (Fo	Schedule I (Form 990) (2011) MARYLAND GRAIN PRODUCERS	IN PRODUCERS	5,	52-1752000		Page 2.
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.	o Individuals in the L	Jnited States. Comp	lete if the organizatio	n answered "Yes" to Form	990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.	onal space is needed				
<u>ت</u>	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, cto) (f) Description of non-cash assistance
		מבולוספוני	Cash grant	เป็น-เลลา สองเจเสแต	riviv, appiaisai, oilier)	
1 MARKE	1 MARKET DEVELOPMENT	1	10,500		-	
2						
ო						
4						
2						
9						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	nplete this part to prov	vide the information r	equired in Part I, line	2, and any other additiona	l information.

PRODUCERS IN SUMMARY FORM AT LEAST TWICE ANNUALLY WITH THE FULL INFORMATION DEVELOPMENT ACTIVITIES; THIS INFORMATION IS CONVEYED TO THE MARYLAND GRAIN THE ORGANIZATION REQUIRES ALL GRANT RECIPIENTS TO PREPARE FINAL REPORTS PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS DOCUMENTING THE RESULTS OF THEIR RESEARCH, EDUCATION, AND MARKET AVAILABLE ON REQUEST. Schedule I (Form 990) (2011)

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 990-EZ or to provide any additional information.

• Attach to Form 990 or 990-EZ.

2011 Open to Public Inspection

OMB No 1545-0047

Name of the organization

MARYLAND GRAIN PRODUCERS UTILIZATION BOARD, INC.

Employer identification number 52-1752000

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

THE MARYLAND GRAIN PRODUCERS UTILIZATION BOARD WAS ESTABLISHED IN 1991.

ITS MISSION IS TO INCREASE THE PROFITABILITY OF MARYLAND GRAIN PRODUCTION

AND TO IMPROVE PUBLIC UNDERSTANDING OF AGRICULTURE USING CHECKOFF

INVESTMENTS TO SUPPORT PROMOTION, EDUCATION, AND RESEARCH RESULTING IN

GREATER UTILIZATION OF GRAIN.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 MGPUB WILL DISCLOSE ITS COMPLETED FORM 990 TO THE MGPUB BOARD FOR REVIEW PRIOR TO FILING THE FORM 990 WITH THE IRS.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

EACH BOARD MEMBER IS ASKED TO SIGN A BOARD CODE OF CONDUCT THAT ASKS

THEM TO DISCLOSE ANY POTENTIAL CONFLICTS.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE MGPUB OFFICERS SET THE BASE CONTRACTUAL FEE FOR THE EXECUTIVE DIRECTOR
BASED ON EXPERIENCE, QUALIFICATIONS, SKILLS, LEADERSHIP, COMMUNICATION
ABILITY AND INDUSTRY STANDARDS. THE MGPUB OFFICERS CONDUCT AN ANNUAL REVIEW
OF THE EXECUTIVE DIRECTOR WITH INPUT FROM THE FULL BOARD TO DETERMINE ANY
INCREASE IN BASE FEE BASED ON LEADERSHIP, COMMUNICATION, DECISION MAKING,
ACCOUNTABILITY AND OTHER FACTORS AS DEEMED NECESSARY.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

MGPUB CONTRACTUAL STAFF COMPENSATION INCLUDES BASE FEES DETERMINED BY AN

Page 2

Name of the organization

MARYLAND GRAIN PRODUCERS

Employer identification number 52-1752000

EVALUATION PROCESS OVERSEEN BY THE EXECUTIVE DIRECTOR. BASE FEES AND THE RANGE FOR MERIT RAISES ARE SET BY THE MGPUB EXECUTIVE DIRECTOR BASED ON JOB RESPONSABILITIES, EXPERIENCE QUALIFICATIONS AND INDUSTRY STANDARDS. IN EVALUATING POTENTIAL MERIT RAISES, THE EXECUTIVE DIRECTOR ANNUALLY WILL LOOK AT A VARIETY OF SKILLS AND FACTORS INCLUDING BUT NOT LIMITED TO: LEADERSHIP ABILITIES, KNOWLEDGE OF THE ASSOCIATION AND INDUSTRY, COMMUNICATION AND DECISION MAKING ABILITIES.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION THE FORM 990 IS AVAILABLE TO THE PUBLIC UPON REQUEST.