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# 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.

**2012** 

Open to Public Inspection

	AF	or the	e 2012 calendar year, or tax year beginning OCT 1, 2012 and e	ending S	EP 30, 2013	
	<b>B</b> c	heck if	C Name of organization		D Employer identific	cation number
	aı	plicabl	FARMERS EDUCATIONAL AND COOPERATIVE		l	
		Addre:	SS LINTON OF AMEDICA MODEUS DAMORA DITUICA	ION		
		Name chang			45-0	130613
		Initial		Room/suite	E Telephone number	
		Termir				252-2701
	$\vdash$	Ameno		_	G Gross receipts \$	3,776,106.
		Applic			H(a) Is this a group re	<del></del>
		Jtion Pendir			for affiliates?	Yes X No
			SAME AS C ABOVE		H(b) Are all affiliates incl	
			empt status:	or 527	7	list. (see instructions)
			te: NWW.NDFU.ORG	<u> </u>	<b>⊣</b>	
				I Voor	H(c) Group exemption	State of legal domicile ND
		rt I	organization X   Corporation Trust Association Other ►  Summary	L Teal	Of IOTHIALION 1727 W	State of legal domicile 11D
			Briefly describe the organization's mission or most significant activities NORTH	1 DVKC	TA FARMERS I	INTON
	8	1	GUIDED BY THE PRINCIPLES OF COOPERATION,	TECTS	I DIA INCITATION	EDUCATION,
	Ta					
	Į.		Check this box If the organization discontinued its operations or dispos	sea or more	_	sets 9
	မ်		Number of voting members of the governing body (Part VI, line 1a)		3	9
	<b>∞</b> 5		Number of independent voting members of the governing body (Part VI, line 1b)		4	56
	Activities & Governance		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	400
	ξi		Total number of volunteers (estimate if necessary)		6	
	\ \ \		Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
		b	Net unrelated business taxable income from Form 990-T-Ime 346 99-10	<del></del>	7b	
Ę				-	Prior Year	Current Year
2014	e	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	605,167.	606,121.
E	Ē	9	Program service revenue (Part VIII, line 2g)	<u> </u>	1,213,446.	1,732,764.
₽==	Revenue	10	Investment income (Part VIII, column (A), lines and 7d)	\	138,081.	126,393.
Z	_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c 10c, and 179)	<u> </u>	196,938.	261,588.
JAN		12	Total revenue · add lines 8 through 11 (must equal Part of lump (A), line 12)		2,153,632.	2,726,866.
_		13	Grants and similar amounts paid (Part IX, columb (A), lines 1.3)		0.	$\frac{0}{2}$
SCANNED		14	Benefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
18	es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,193,456.	1,430,728.
12	Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.	0.
129	χĎ	b	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>		
133	w	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,236,517.	2,073,590.
		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	3,429,973.	3,504,318.
		19	Revenue less expenses Subtract line 18 from line 12		<1,276,341.	> <777,452.>
	Assets or d Balances			Ве	eginning of Current Year	End of Year
	sets alan	20	Total assets (Part X, line 16)		42,843,994.	46,150,916.
	t As	21	Total liabilities (Part X, line 26)		652,759.	678,471.
	Net A Fund	22	Net assets or fund balances Subtract line 21 from line 20		42,191,235.	45,472,445.
	Pa	rt II		_		
	Unde	r pena	ilties of perjury, I declare that I have examined this return, including accompanying schedules	and statem	nents, and to the best of my	y knowledge and belief, it is
	true,	correc	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	iich prepare	r has any knowledge	
			mark Model		1/3/1	4
	Sign	<b>)</b>	Signature of officer		Date /	
	Here	e	MARK WATNE, PRESIDENT			
			Type or print name and title			
			Print/Type preparer's name Preparer's signature		Date Check	PTIN
	Paid		THOMAS D. WILL, CPA TOWN	CPAI	(2/30//3 if self-employe	P00019784
	Prep	arer	Firm's name BRADY, MARTZ & ASSOCIATES, PC		Firm's EIN	45-0310328
	Use	Only	Firm's address POST OFFICE BOX 848			
	_	_	MINOT, ND 58702-0848		Phone no (	701) 852-0196
	May	the If	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
		1 12-1		ns.		Form <b>990</b> (2012)

UNION OF AMERICA - NORTH DAKOTA DIVISION 45-0130613 Page 2 Part III Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III Briefly describe the organization's mission NORTH DAKOTA FARMERS UNION, GUIDED BY THE PRINCIPLES OF COOPERATION, LEGISLATION AND EDUCATION, IS AN ORGANIZATION COMMITTED TO THE PROSPERITY OF FAMILY FARMS, RANCHES AND RURAL COMMUNITIES. Did the organization undertake any significant program services during the year which were not listed on Yes X No the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O Yes X No Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O 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 are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. ) (Expenses \$ including grants of \$ ) (Revenue \$ EDUCATIONAL PROGRAMS - THESE PROGRAMS INCLUDE THE SPONSORING OF VARIOUS SEMINARS AND YOUTH EDUCATIONAL PROGRAMS INCLUDING CLASSES AND EDUCATIONAL CAMP PROGRAMS. (Code including grants of \$ ) (Revenue \$ ) (Expenses \$ COOPERATIVE PROGRAMS - RURAL AREAS ARE ASSISTED IN PROMOTING AND DEVELOPING LOCAL COOPERATIVES TO INCREASE THE FINANCIAL BARGAINING POWER OF AGRICULTURAL AND RURAL PEOPLE. ) (Expenses \$ ) (Revenue \$ including grants of \$ LEGISLATION - WORKING WITH ELECTED OFFICIALS TO VOICE THE OPINIONS OF RURAL PEOPLE ON AGRICULTURAL ISSUES. Other program services (Describe in Schedule O) ) (Revenue \$ (Expenses \$ 4e Total program service expenses ▶

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FARMERS EDUCATIONAL AND COOPERATIVE

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	ļ	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		i .	1
_	during the tax year? If "Yes," complete Schedule C, Part II	4	ļ	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or		X	
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Λ.	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			Х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	<b></b> -	A
•	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			<u> </u>
O	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		х
9	Schedule D, Part III			
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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			<u> </u>
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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," complete Schedule D,			1
	Part VI	11a	Х	
b	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			1
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		Х
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 and XII	12a	X	
þ	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 and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		
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	446		Х
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		^
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	15		X
4.0	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		<u>^`</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	16		Х
17	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	10	<del> </del>	1
.,	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		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<b>├</b>		† <del></del>
,,,	1c and 8a? If "Yes," complete Schedule G, Part II	18	ĺ	Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			1
	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)

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			Yes	No
21	Did the drganization 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 17 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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	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		X
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		ļ
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		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified		İ	
	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			17
	of any of these persons? If "Yes," complete Schedule L, Part III	27	Į	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):			v
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 Schedule L, Part IV	28b	<u> </u>	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	_	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			Х
	contributions? If "Yes," complete Schedule M	30		Α.
31	Did the organization liquidate, terminate, or dissolve and cease operations?			x
	If "Yes," complete Schedule N, Part I	31	-	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	22		X
00	Schedule N, Part II	32		A
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		x
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<del>  ^`</del> -
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24	Х	
05-	Part V, line 1	34		Х
35a		35a		1
Đ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	256		
••	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	36		
27	If "Yes," complete Schedule R, Part V, line 2	30	<del>                                     </del>	<del> </del>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	37	1	х
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	3,	<del> </del>	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X	
	Note. All Form 990 filers are required to complete Schedule O			(2012)

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	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			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			l
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			1
Ŭ	(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 56			ĺ
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
٠	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
32	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3ь		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
70	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country:			
Ü	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	·	X
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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			
Va	any contributions that were not tax deductible as charitable contributions?	6a		Х
h	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		X
ь	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			
Ū	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 <b>f</b>		X
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	ļ.,,,,	ļ
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	ļ	<u> </u>
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		<u> </u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	ļ	ļ
10	Section 501(c)(7) organizations. Enter.			1
а	Initiation fees and capital contributions included on Part VIII, line 12	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	-		
12a	Section 4947(a)(1) non-exempt charitable trusts. is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		ļ	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	<del> </del>	<del> </del>
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	-		
С	Enter the amount of reserves on hand	<del> </del>	<del> </del>	+
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	├	X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(2012

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

	Check if Schedule O contains a response to any question in this Part VI					X
<u>Sec</u>	tion A. Governing Body and Management					
				e	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		9		
	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					
ь	Enter the number of voting members included in line 1a, above, who are independent	1b		9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other			
	officer, director, trustee, or key employee?			2	<u> </u>	X
3	Did the organization delegate control over management duties customarily performed by or under the	ne direc	t supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3_		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5_		X
6	Did the organization have members or stockholders?			6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			
	more members of the governing body?			7a_	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or			
	persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	e following			
а	The governing body?			8a	X	L
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached a	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenue	Code)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, 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 bo	dy befo	re filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," d	escribe		.,	
	In Schedule O how this was done			12c	X	
13	Did the organization have a written whistleblower policy?			13	X	<del> </del>
14	Did the organization have a written document retention and destruction policy?			14	X	-
15	Did the process for determining compensation of the following persons include a review and appro-		dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	7			.,	
а	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization			15b	X	-
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	vith a			v
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic	anızatıo	n's			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed NONE		504()(0)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	· I (Sect	ion 501(c)(3)s only	availat	ole	
	for public inspection. Indicate how you made these available Check all that apply.	_				
	Own website Another's website X Upon request Other (explain				1	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of Interest policy, a	no tinai	ncial	
	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 rec	oras of the organiz	ation.		
	SUE CORWIN - 701-252-2340 P.O. BOX 2136, JAMESTOWN, ND 58401					
	P.O. BOX 2136, JAMESTOWN, ND 58401					

UNION OF AMERICA - NORTH DAKOTA DIVISION 45-0130613 Page 7

### Form 990 (2012) 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.

Check this box if neither the organia (A)	(B)			((	2)			(D)	(E)	(F)
Name and Title	Average	(do		Pos heck		than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	s bot	an	compensation	compensation	amount of
	week	_	Jer an	uau	recit	171143	.00)	from	from related	other
	(list any hours for	Jiect				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	20 20	黟			Safe		(W-2/1099-MISC)	(11/2/1000/11/100)	organization
	organizations	Individual trustee or director	Institutional trustee		<b>8</b>	ompe		(** = *********************************		and related
	below	Adua	E to	<b>5</b>	Key employee	loyee	ĕ			organizations
	line)	ğ	ışı	Officer	Ř	Highest compensated employee	Former			
(1) JAMES KERZMAN	2.00		l						_	
DIRECTOR		Х		_				11,700.	0.	0.
(2) JAMES TEIGEN	2.00									•
DIRECTOR		X		_				3,375.	0.	0.
(3) TERRY BORSTAD	2.00							10 000	0	
TREASURER		X		X				10,200.	0.	0.
(4) ELLEN LINDERMAN	2.00	,,		.,				10 002	0.	0.
SECRETARY	2 00	Х		X	ļ	<del>                                     </del>		10,903.	U •	
(5) DENNIS STROMME	2.00	X						10,313.	0.	0.
DIRECTOR	20.00	^		-	-	-		10,313.		
(6) WOODY BARTH	20.00	X		X			İ	37,939.	75,997.	0.
PAST PRESIDENT (7) BOB KUYLEN	8.00	^	<del> </del>	^				37,737.	13,3316	
VICE PRESIDENT	0.00	X		X				8,738.	0.	0.
(8) WES NIEDERMAN	2.00	-		72	<del> </del>	<del> </del>		077300		
DIRECTOR	2,00	X			ĺ			8,550.	0.	0.
(9) BENJAMIN VIG	2.00		<u> </u>							
DIRECTOR		X						11,100.	0.	0.
(10) RONDA THROENER	2.00									
DIRECTOR		X						0.	0.	0.
(11) MARK WATNE	20.00									
PRESIDENT		X		X		<u> </u>		0.	0.	0.
			ļ			<u> </u>				
		_		<u> </u>	ļ	<u> </u>				
		ļ	_	<u> </u>	<u> </u>					
		1	]							
		-	<del> </del>	-	_	<del> </del>				
		1								
	<u> </u>	-	-							
		ł				1				
		ļ .		L	l	1				L

UNION OF AMERICA - NORTH DAKOTA DIVISION 45-0130613 Page 8

	(A)  ` Name and title	(B) Average hours per week (list any	(do box offi	not c	Pos heck	c) ition more		one h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estima amoun othe	t of r
		hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	;)	ompens from torganization and relations and relations	he ation ated
			-										
										<u> </u>			
<del></del>			-			-		-		· · · · · · · · · · · · · · · · · · ·			
					-			_				<del>.</del>	
						-		<u> </u>				<del></del>	
										i.	_		
	Sub-total	I Section A	<u> </u>	L		1	<b>&gt;</b>	L	112,818.	75,99	7.		0.
	Total from continuation sheets to Part VI Total (add lines 1b and 1c) Total number of individuals (including but r	·	nose	liste	ed a	bove	e) wi	no re	112,818.	75,99			0.
	compensation from the organization									·		Yes	0 No
3	Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for s</i>	uch individual				•	•				3		Х
<b>4</b> 5	For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000 <i>? If</i> "Yes,	" co	mpl	ete S	Sche	edule	e J f	or such individual		4		X
	Did any person listed on line 1a receive or rendered to the organization? If "Yes," corrition B. Independent Contractors								ed organization or moly		5		X
1	Complete this table for your five highest co the organization. Report compensation for										ensatio	n from	
	(A) Name and business	address	N	INC	₹				(B) Description of s	ervices	Com	(C) pensati	on
								_	J				
								4	<u></u>				
								_					·,-
								_	<del></del>				
2	Total number of independent contractors (i \$100,000 of compensation from the organi	_	ot li	mite	d to	tho	se lis	sted	above) who received m	nore than		000	

Form 990 (2012) UNION O
Part VIII Statement of Revenue

UNION OF AMERICA - NORTH DAKOTA DIVISION

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		Check if Schedule O cont	ains a response	to any question i	n this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 a	a Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	1b	606,121.				
s, C		Fundraising events	1c					
Sift		d Related organizations	1d					
in.		e Government grants (contribut	ions) 1e					
tior S r		f All other contributions, gifts, gran						
the		similar amounts not included abo						
dat	•	Noncash contributions included in lines	: 1a-1f \$					
ခိုင္ပ		h Total. Add lines 1a-1f		<b>&gt;</b>	606,121.			
				Business Code				
e	2 6	COMMUNITY ED. PROG.	<u> </u>	900099	1,691,225.	1,691,225.		
ē Š	ŧ	ADVERTISING & SUBS		541800	41,539.	41,539.		
Program Service Revenue	•	c						
ev ev	•	d						
6	•	e						<u> </u>
•	1	f All other program service reve	enue				······	
	9	g Total. Add lines 2a-2f		<b>•</b>	1,732,764.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)		▶	109,689.			109,689.
	4	Income from investment of ta	x-exempt bond p	roceeds 🕨			·	
	5	Royalties		<b>&gt;</b>	422,878.			422,878.
			(i) Real	(II) Personal				
ļ	6 6	a Gross rents	255,596.					
	t	b Less rental expenses	416,886.					
	•	Rental income or (loss)	<161,290.	>				
	•	d Net rental income or (loss)		<b>&gt;</b>	<161,290.	>		<161,290.
	7 6	Gross amount from sales of	(i) Securities	(II) Other				1
		assets other than inventory	632,183.	16,875.				
	ŧ	b Less: cost or other basis						
ļ		and sales expenses	612,525.	19,829.				
	•	Gain or (loss)	19,658.	<2,954.	•			
	•	d Net gain or (loss)			16,704.		·····	16,704.
e n	8 8	Gross income from fundraisin						
<b>E</b>		including \$						
Be		contributions reported on line	1c) See	ĺ				
Other Reve		Part IV, line 18	а					
ð		Less: direct expenses	b	L				
}		Net income or (loss) from fund	•	<b>•</b>			·····	
	9 a	Gross income from gaming ac	ctivities See					
		Part IV, line 19	а					
		Less direct expenses	ь	L				
		Net income or (loss) from game	_	<b>•</b>				
İ	10 a	Gross sales of inventory, less	returns					
ľ		and allowances	а	<u> </u>				
		Less: cost of goods sold	ь	L				
		Net income or (loss) from sale		<b>•</b>				
ļ		Miscellaneous Revenu	e	Business Code				
J	11 a			<b></b>				<del></del>
	t	)		<u> </u>				<del> </del>
	C		<del></del>	ļ				<del> </del>
	C			<u> </u>				<del></del>
		Total. Add lines 11a-11d		<b>•</b>				<del></del>
	12_	Total revenue. See instructions			2,726,866.	1,732,764.	0	<u>387_981</u> _

UNION OF AMERICA - NORTH DAKOTA DIVISION 45-0130613 Page 10

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons			ompiete column (A)	X
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	( <b>D</b> ) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
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,	37,939.			
	trustees, and key employees	31,737.			
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	1,070,579.	······································		
8	Pension plan accruals and contributions (include				
Ŭ	section 401(k) and 403(b) employer contributions)	171,810.			
9	Other employee benefits	72,344.			
10	Payroll taxes	78,056.			
11	Fees for services (non-employees).				
а	Management				
b	Legal				
С	Accounting	17,858.			
d	Lobbying		····		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O)	141,866.			
12	Advertising and promotion	106,435.			
13	Office expenses	21,356.			
14	Information technology Royalties	21/0001			
15 16	Occupancy		<del></del>		
17	Travel	161,130.			
18	Payments of travel or entertainment expenses	•			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	84,638.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	433,709.			
23	Insurance	63,382.			
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 0)	315,351.		<del></del>	
а	PASSENGER & CHARTER EXP	138,414.			
b	MISCELLANEOUS PRINTING	114,210.			
C بہ	MEMBERSHIP DEVELOPMENT	99,191.			
d	CEE CCH O	376,050.			
e 25	Total functional expenses. Add lines 1 through 24e	3,504,318.			
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>

UNION OF AMERICA - NORTH DAKOTA DIVISION

45-0130613 Page 11

Form 990 (2012)
Part X Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
	т	•	(A) Beginning of year		<b>(B)</b> End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments	1,435,935.	2	1,729,943.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	461,290.	4	644,195.
	5	Loans and other receivables from current and former officers, directors,			
	ŀ	trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ	l _	employees' beneficiary organizations (see instr) Complete Part II of Sch L		6	·
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use	100 072	8	254 020
	9	Prepaid expenses and deferred charges	190,872.	9	254,838.
	10a	Land, buildings, and equipment cost or other			
		basis. Complete Part VI of Schedule D  Less. accumulated depreciation  10a 9,049,911.  2,676,950.	6 260 490		6 272 061
			6,260,489. 2,806,484.	10c	6,372,961. 2,666,646.
	11	Investments - publicly traded securities	31,688,924.		34,482,333.
	12	Investments - other securities See Part IV, line 11	31,000,924.	12	34,402,333.
	14	Investments · program-related. See Part IV, line 11		13	
	15	Intangible assets Other assets See Part IV, line 11		14	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	42,843,994.	15 16	46 150 916
	17	Accounts payable and accrued expenses	547,285.	17	46,150,916. 506,641.
	18	Grants payable	311,2031	18	300/0111
	19	Deferred revenue	105,474.	19	171,830.
	20	Tax-exempt bond liabilities	200/2/20	20	2.27000
Ś	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees,			<del></del>
abi	1	key employees, highest compensated employees, and disqualified persons.			
:5		Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	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	652,759.	26	678,471.
	ĺ	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and	Į	-	
ses		complete lines 27 through 29, and lines 33 and 34.			
and	27	Unrestricted net assets	42,191,235.	27	45,472,445.
Bal	28	Temporarily restricted net assets		28	
5	29	Permanently restricted net assets		29	
Ť.		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or Fund Balances		and complete lines 30 through 34.		1	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	40 101 005	32	45 470 445
_	33	Total net assets or fund balances	42,191,235.	33	45,472,445.
	34	Total liabilities and net assets/fund balances	42,843,994.	34	46,150,916.

FARMERS EDUCATIONAL AND COOPERATIVE Form 990 (2012) UNION OF AMERICA - NORTH DAKOTA DIVISION 45-0130613 Part XI Reconciliation of Net Assets X Check if Schedule O contains a response to any question in this Part XI 2,726,866. 1 Total revenue (must equal Part VIII, column (A), line 12) 3,504,318.2 2 Total expenses (must equal Part IX, column (A), line 25) <777,452.> Revenue less expenses. Subtract line 2 from line 1 3 3 42,191,235. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 <107,626.> 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 8  $4,166,\overline{288}$ . 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, 45,472,445. 10 column (B)) Part XII Financial Statements and Reporting [X]Check if Schedule O contains a response to any question in this Part XII Yes No X Accrual Other Accounting method used to prepare the Form 990 Cash If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Х 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Consolidated basis Both consolidated and separate basis \_\_ Separate basis Х 2b b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

review, or compilation of its financial statements and selection of an independent accountant?

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

Act and OMB Circular A-133?

X

Х

2c

За

3ь

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

Political Campaign and Lobbying Activities

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

See separate instructions.

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

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

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

		i "res," to Form 990, Part  i) organizations: Complete		(ax), or Form 990-1	EZ, Part V, line 35¢ (Pi	roxy rax), then
Nam	ne of organization FA	RMERS EDUCATION	ONAL AND	COOPERATIV	Æ	Employer identification number
		ION OF AMERIC.				45-0130613
Pa	rt I-A Complete it	f the organization is	exempt unde	r section 501(c	or is a section 5	27 organization.
2	Provide a description of t Political expenditures Volunteer hours	the organization's direct an	d indirect political	campaign activities	s in Part IV.	<b>&gt;</b> \$
Pa	rt I-B Complete it	f the organization is	exempt unde	r section 501(c	)(3).	
1		excise tax incurred by the				<b>▶</b> \$
2	•	excise tax incurred by orga	•		5	<b>▶</b> \$
3	If the organization incurre	ed a section 4955 tax, did i	t file Form 4720 fo	r this year?		Yes No
4a	Was a correction made?					Yes No
b	If "Yes," describe in Part					
Pa	rt I-C Complete it	f the organization is	exempt unde	r section 501(c	), except section	501(c)(3).
3	Enter the amount of the five exempt function activities. Total exempt function ex line 17b. Did the filing organization. Enter the names, address made payments. For eac contributions received the	penditures. Add lines 1 and in file Form 1120-POL for the ses and employer identificate the organization listed, enter	contributed to other d 2. Enter here and his year? ation number (EIN) the amount paid otly delivered to a	er organizations for some of all section 527 promise filing organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate political organise parate parate political organise parat	section 527  L,  political organizations to sization's funds Also er ganization, such as a s	S  Yes  No  which the filing organization inter the amount of political reparate segregated fund or a
	(a) Name	(b) А	ddress	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ento	n's contributions received and
			<del></del>			
		<del></del>				
			· · · · · · · · · · · · · · · · · · ·			
				<u> </u>		

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

Schedule C (Form 990 or 990-EZ) 2012

### FARMERS EDUCATIONAL AND COOPERATIVE Schedule C (Form 990 or 990-EZ) 2012 UNION OF AMERICA - NORTH DAKOTA DIVISIO 45-0130613 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures) B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group **Limits on Lobbying Expenditures** organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: 20% of the amount on line 1e. Not over \$500,000 \$100,000 plus 15% of the excess over \$500,000. Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c If zero or less, enter -0j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 Yes reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (e) Total (d) 2012 (a) 2009 **(b)** 2010 (c) 2011(or fiscal year beginning in)

Calendar year (or fiscal year beginning in)

Calendar year (or fiscal year beginning in)

(a) 2009
(b) 2010
(c) 2011
(d) 2012
(e) Total

2a 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) 2012 UNION OF AMERICA - NORTH DAKOTA DIVISIO 45-0130613 Page 3

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

	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a	1)	(b	)
the	lobbying activity	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of.				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		_		
i	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			-	
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	- FO4(-)	/E\	-4:	
<u>ar</u>	f III-A Complete if the organization is exempt under section 501(c)(4), sectio 501(c)(6).	n 501(c)	(5), or se	cuon	
	301(0)(0).			Yes	N
	When substantially all (000) as mare discussional and distrible by members?		1	Х	
	were substantially all Mu% or morel dues received hondeolicible by members (				
	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  LII-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	n 501(c) "No," Ol	2 3 (5), or se	ection	ne 3,
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### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

2012 Open to Public Inspection

Name of the organization

FARMERS EDUCATIONAL AND COOPERATIVE UNION OF AMERICA - NORTH DAKOTA DIVISION

Employer identification number 45-0130613

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(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 advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
	impermissible private benefit?		Yes No
Pa	TI Conservation Easements. Complete if the ore	ganization answered "Yes" to Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year ►		
4	Number of states where property subject to conservation ea	sement is located -	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	t 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	g the year 🕨 \$
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 17	O(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or C	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 (AS	SC 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pi	ublic service, provide the following amounts
	relating to these items		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financi	
	the following amounts required to be reported under SFAS 1		•
а	Revenues included in Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·	<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

		OF AMERICA								Page 2
Par	rt III Organizations Maintaining	Collections of A	rt, Histo	orical 1	<u>reasures</u>	, or Oth	er Simil	ar Asse	ts(continued	)
3	Using the organization's acquisition, acces	sion, and other record	ds, check	any of th	ne following t	hat are a s	ignificant	use of its	collection iter	ทร
	(check all that apply):									
а	Public exhibition	c	<b>,</b> ∟	oan or e	kchange pro	grams				
b	Scholarly research	•	, 🗀 c	Other						
С	Preservation for future generations									
4	Provide a description of the organization's	collections and explai	n how the	y furthe	r the organiz	ation's exe	mpt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit	or receive donations	of art, his	torical tre	easures, or c	ther simila	r assets		_	
	to be sold to raise funds rather than to be r								Yes _	No_
Pai	rt IV Escrow and Custodial Arra reported an amount on Form 990, P		ete if the i	organizat	tion answere	d "Yes" to	Form 990	), Part IV, I	ine 9, or	
1a	Is the organization an agent, trustee, custo		diary for c	ontributi	ons or other	assets not	included			
-	on Form 990, Part X?		J. L. ,					<u></u>	∃ Yes □	No
ь	If "Yes," explain the arrangement in Part XI	II and complete the fo	ollowing ta	able				<u></u>		
-	in 100, Oxplain the arrangement in 1 are XI	ii and complete the re	moving it	20.01					Amount	
С	Beginning balance						1c			
ď	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on	Form 990 Part X line	212				L	·	Yes	No
	If "Yes," explain the arrangement in Part XI	· ·		n has he	en provided	n Part XIII				<b>=</b>
	rt V Endowment Funds. Complete						10			
		(a) Current year		or year		ears back		years back	(e) Four year	s back
1a	Beginning of year balance	10) 00/10/11/00/	1-7		10, 110	<u> </u>	3-7 :	,		
b	Contributions				<u> </u>					
G	Net investment earnings, gains, and losses									
d		·								
e	Other expenditures for facilities									
Ŭ	and programs									
f				······································				-		
g										
2	Provide the estimated percentage of the ci	rrent year end balance	ce (line 1o	. column	(a)) held as:			<del></del>	<del></del>	
a			%	,,	(-//					
b		<del></del> %								
		%								
	The percentages in lines 2a, 2b, and 2c she						-			
3a	Are there endowment funds not in the post		ation that	are helo	and admini	stered for t	he organi	zation		
	by	<b>--</b>					ŭ		Yes	No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	T-
b		ns listed as required of	on Sched	ule R?					3ь	
4	Describe in Part XIII the intended uses of the	·								
Pai	rt VI Land, Buildings, and Equip									
	Description of property	(a) Cost or o			st or other	(c) A	ccumulat	ed	(d) Book val	ue
		basis (invest			ıs (other)		preciation	I	• •	
1a	Land				41,006	•			41,0	006.
	Buildings			6,8	06,208		739,1	12.	5,067,0	
	Leasehold improvements	<del></del>			92,478		78,3		314,	
d	<u> </u>				10,219		859,4		950,	
	Other								<u>-</u>	
	I. Add lines 1a through 1e. (Column (d) must	equal Form 990. Part	X, colum	n (B), line	= 10(c).)			<b>•</b>	6,372,9	961.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2012

	ERICA - NORTH		ISION 45	-0130613 Page <b>3</b>
Part VII Investments - Other Securities. Se				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value	uation: Cost or end	d-of-year market value
(1) Financial derivatives	_			
(2) Closely-held equity interests				
(3) Other	<del></del>			
(A) STOCK CREDITS IN				
(B) COOPERATIVES	64,147.	END-OF-YE	AR MARKET	VALUE
(C) FARMERS UNION SERVICE	00.510.016			
(D) ASSOCIATION, LTD.	29,519,946.	END-OF-YE	AR MARKET	VALUE
(E) FARMERS UNION				
(F) ENTERPRISES, INC.	4,898,240.	END-OF-YE	AR MARKET	VALUE
(G)				
(H)				
()				
Total (Col (b) must equal Form 990, Part X, col (B) line 12 )	34,482,333.		<u> </u>	
Part VIII Investments - Program Related. S	ee Form 990, Part X, line 1	3		
(a) Description of investment type	(b) Book value	(c) Method of value	uation: Cost or end	d-of-year market value
(1)				<u> </u>
(2)				
(3)				<del></del>
(4)				
(5)				
(6)			····	
(7)				
(8)				
(9)				
(10)				······································
Total (Col (b) must equal Form 990, Part X, col (B) line 13 )				
Part IX Other Assets. See Form 990, Part X, line				(L) De alcuelus
	Description			(b) Book value
		<del>-</del>		
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) lin				
Part X Other Liabilities. See Form 990, Part X,	line 25.	#A Destaurable		
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin	ne 25.)		,	
2 FIN 48 (ASC 740) Footnote In Part XIII provide the te	ext of the footnote to the o	roanization's financial s	statements that re	ports the organization's

	110000000000000000000000000000000000000	·				
	dule D (Form 990) 2012 UNION OF AMERICA - NORTH D	AKOTA	DIVISION	45-0	0130613	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	nts With	n Revenue per R	eturn		
1	Total revenue, gains, and other support per audited financial statements			1	3,146	,706.
2	Amounts'included on line 1 but not on Form 990, Part VIII, line 12					
а	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 XIII)	2d	419,840.			
е	Add lines 2a through 2d			2e		840.
3	Subtract line 2e from line 1			3	2,726	866.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	2,726	<u>,866.</u>
Pai	* XII Reconciliation of Expenses per Audited Financial Statem	ents Wit	th Expenses per	Retu		
1	Total expenses and losses per audited financial statements			1	4,031	<u>,784.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
c	Other losses	2c	107,626.			
d	Other (Describe in Part XIII )	2d	419,840.			
е	Add lines 2a through 2d			2e	527	,466.
3	Subtract line 2e from line 1			3	3,504	,318.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
þ	Other (Describe in Part XIII )	4b				
C	Add lines 4a and 4b			4c	<del></del>	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		· · · · · · · · · · · · · · · · · · ·	5	3,504	<u>,318.</u>
	t XIII Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I	II, lines 1a	and 4; Part IV, lines 1	b and 2	b; Part V, line	4; Part
X, lın	e 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to	provide ai	ny additional informat	ion		

PART X, LINE 2: IT IS THE ORGANIZATION'S POLICY TO EVALUATE THE

LIKELIHOOD THAT ITS UNCERTAIN TAX POSITIONS WILL PREVAIL UPON EXAMINATION BASED ON THE EXTENT TO WHICH THOSE POSITIONS HAVE SUBSTANTIAL SUPPORT WITHIN THE INTERNAL REVENUE CODE AND REGULATIONS, REVENUE RULINGS, COURT DECISIONS, AND OTHER EVIDENCE. IT IS THE OPINION OF MANAGEMENT THAT THE ORGANIZATION HAS NO SIGNIFICANT UNCERTAIN TAX POSITIONS THAT WOULD BE SUBJECT TO CHANGE UPON EXAMINATION. THE FEDERAL INCOME TAX RETURNS OF THE ORGANIZATION ARE SUBJECT TO EXAMINATION BY THE IRS, GENERALLY FOR THREE

Schedule D (Form 990) 2012

# FARMERS EDUCATIONAL AND COOPERATIVE UNION OF AMERICA - NORTH DAKOTA DIVI

Schedule D (Form 990) 2012 UNION OF AMERICA - NORTH DAKOTA DIVISION45-01 Part XIII Supplemental Information (continued)	30613 Page 5
YEARS AFTER THEY WERE FILED.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
ALLOCATION OF RENTAL EXPENSE	416,886.
LOSS ON SALE OF FIXED ASSETS	2,954.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	419,840.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
ALLOCATION TO RENTAL EXPENSE	416,886.
LOSS ON SALE OF FIXED ASSETS	2,954.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	419,840.
	<del></del>

# SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012 Open to Public Inspection

Name of the organization

FARMERS EDUCATIONAL AND COOPERATIVE UNION OF AMERICA - NORTH DAKOTA DIVISION

Employer identification number 45-0130613

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
IS AN ORGANIZATION COMMITTED TO THE PROSPERITY OF FAMILY FARMS, RANCHES
AND RURAL COMMUNITIES.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS WHO
PAY ANNUAL DUES AND ARE ENTITLED TO ATTEND THE ANNUAL CONVENTION AND ELECT
THE BOARD OF DIRECTORS AND APPROVE CHANGES TO COMPANY POLICY. MEMBERS ARE
ALSO ABLE TO TRAVEL ON EDUCATIONAL BUS TRIPS AND HAVE THEIR CHILDREN ATTEND
THE EDUCATIONAL CAMPS.
FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S BOARD OF
DIRECTORS ARE ELECTED BY THE MEMBERS AT THE ANNUAL CONVENTION.
FORM 990, PART VI, SECTION A, LINE 7B: THE MEMBERS APPROVE CHANGES TO
COMPANY POLICY AS WELL AS ANY MAJOR CAPITAL OUTLAYS.
FORM 990, PART VI, SECTION B, LINE 11: AFTER THE FORM 990 IS PREPARED, A
COPY IS DISTRIBUTED TO ALL BOARD MEMBERS FOR THEIR REVIEW. A REASONABLE
AMOUNT OF TIME IS ALLOWED FOR BOARD MEMBERS TO RAISE ANY QUESTIONS OR
CONCERNS REGARDING THE FORM 990 PRIOR TO FILING THE RETURN.
FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REQUIRES ANNUALLY
THE BOARD OF DIRECTORS SUBMIT A STATEMENT DETAILING ANY CONFLICT OF
INTEREST THE PERSON MAY HAVE, IF ANY, WHICH IS THEN APPROVED AT THE JANUARY
BOARD MEETING.
BOARD MEETING.

Schedule O (Form 990 or 990-EZ) (2012)  Name of the organization FARMERS EDUCATIONAL AND COOPERATIVE	Page 2 Employer identification number
Name of the organization FARMERS EDUCATIONAL AND COOPERATIVE UNION OF AMERICA - NORTH DAKOTA DIVISION	45-0130613
TOTAL EXPENSES	58,003.
COUNTIES ACTIVITIES:	
TOTAL EXPENSES	56,578.
BOARD OF GOVERNORS:	
TOTAL EXPENSES	39,703.
OTHER - STATE OFFICE BUILDING:	
TOTAL EXPENSES	37,039.
COMMITTEE BY LAWS & PROGRAMS:	
TOTAL EXPENSES	34,627.
FUEL:	
TOTAL EXPENSES	29,404.
TELEPHONE:	
TOTAL EXPENSES	27,670.
RENT - OFFICE:	
TOTAL EXPENSES	23,220.
OTHER - YOUTH & CAMPSITES:	
TOTAL EXPENSES	22,221.
FOOD - CAMPS:	
TOTAL EXPENSES  232212 01-04-13 Sc	16,505. hedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012)  Name of the organization FARMERS EDUC	CATIONAL AND COOPERATIVE	Page 2 Employer identification number
UNION OF AM	ERICA - NORTH DAKOTA DIVISION	45-0130613
YOUNG FARMERS ACTIVITIES:		
TOTAL EXPENSES		7,876.
MEMBER & LOCAL ACTIVITIES	•	
TOTAL EXPENSES		4,730.
SUBSCRIPTIONS & BOOKS:		
TOTAL EXPENSES		1,439.
CO-OP OUTREACH:		
TOTAL EXPENSES		1,266.
ALLOCATION TO RENTAL EXPE	NSE:	
TOTAL EXPENSES		-416,886.
TOTAL OTHER EXPENSES ON F	ORM 990, PART IX, LINE 24E, CC	DL A 376,050.
FORM 990, PART XI, LINE 9	, CHANGES IN NET ASSETS:	
EQUITY EARNINGS IN FARMER	S UNION ENTERPRISES, INC.	1,522,906
EQUITY EARNINGS IN FARMER	S UNION SERVICE ASSOCIATION, I	INC. 2,643,382
TOTAL TO FORM 990, PART X	I, LINE 9	4,166,288.
	2C:	
	ROM PRIOR YEAR.	
<u> </u>		

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

# Related Organizations and Unrelated Partnerships

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

2012 Open to Public Inspection

OMB No 1545-0047

Employer identification number 45-0130613

▶ See separate instructions.

UNION OF AMERICA - NORTH DAKOTA DIVISION FARMERS EDUCATIONAL AND COOPERATIVE Name of the organization

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

Part

FARMERS EDUCATIONAL AND 35,605,072, AMERICA - ND DIVISION COPERATIVE UNION OF MEMBERS OF INSURANCE Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) 89,583,596.COMPANY End-of-year assets 2,447,502. 6,747,521. Total Income চ Legal domicile (state or foreign country) NORTH DAKOTA NORTH DAKOTA PROPERTY AND CASUALTY Primary activity INSURANCE COMPANY INSURANCE AGENCY 45-0214096, 1415 12TH AVE SE, JAMESTOWN, ND 45-0133342, 1415 12TH AVE SE, JAMESTOWN, ND LID FARMERS UNION MUTUAL INSURANCE COMPANY Name, address, and EIN (if applicable) FARMERS UNION SERVICE ASSOCIATION of disregarded entity Part # 58401 58401

(g) Section 512(b)(13) Ŷ × × controlled entity? Yes COOPERATIVE UNION COOPERATIVE UNION Direct controlling EDUCATIONAL AND EDUCATIONAL AND entity  $\boldsymbol{\varepsilon}$ FARMERS PARMERS status (if section Public charity 501(c)(3)) L70(B)(1) 509(A)(1) <u>e</u> (A)(VI) Exempt Code section 501(C)(3) 501(C)(3) T Legal domicile (state or foreign country) NORTH DAKOTA NORTH DAKOTA YOUTH CAMPING PROGRAM AND FARMERS UNION FOUNDATION SUPPORT THE NORTH DAKOTA DAY CLASSES TEACHING SCONOMIC DEVELOPMENT Primary activity ğ FOUNDATION - 11-3693935, 1415 12TH AVE SE 45-0457574, 1415 12TH AVE SE, JAMESTOWN, NORTH DAKOTA FARMERS UNION FOUNDATION NORTH DAKOTA FARMERS UNION EDUCATION Name, address, and EIN of related organization 58401 QZ. JAMESTOWN 58401

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2012

232161 12-10-12 LHA

Schedule R (Form 990) 2012

UNION OF AMERICA - NORTH DAKOTA DIVISION

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

Page 2

45-0130613

General or Percentage managing ownership 3 Yes No 9 Code V-UBI amount in box 120 of Schedule -K-1 (Form 1065)  $\epsilon$ ate allocations? Disproportion-Yes No Ξ Share of end-of-year assets 6 Share of total income ε Predominant income (related, unrelated, excluded from tax under sections 512-514) e Direct controlling entity € (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization

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

ı			1	ı			ı		ı				
	<u>.</u>	0(13) 10(13)	Yes No										
		512(b)(13) controlled	Yes										
	Ξ	Percentage ownership											
	(6)	Share of end-of-year	assets		_								
	ε	Share of total income											
	<b>(e)</b>	Type of entity (C corp, S corp,	or trust)										-
	9	Direct controlling entity									·		
	<u> </u>	Legal domicile (state or	country)										
iiig tile tan year.	<b>(</b> 2)	Primary activity											
organizations treated as a corporation of trust dufing the tax year.)	(a)	Name, address, and EIN of related organization											

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012

Page 3

Yes

<del>1</del>a 4 ပ္ P <del>1</del>

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

Note Complete line

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- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
  - Gift, grant, or capital contribution to related organization(s) م
- c Gift, grant, or capital contribution from related organization(s)
  - d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)

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- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
- Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses ۵
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete to	is line, including covered	relationships and transaction thresholds.
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) FARMERS UNION SERVICE ASSOCIATION, LTD.	ŋ	87,931.FMV	FMV
(2) FARMERS UNION SERVICE ASSOCIATION, LTD.	E	169,723.FMV	FMV
(3) FARMERS UNION SERVICE ASSOCIATION, LTD.	Ø	456,453.FMV	FMV
(4) FARMERS UNION MUTUAL INSURANCE COMPANY	Ŋ	144,732.FMV	FMV
(5) FARMERS UNION MUTUAL INSURANCE COMPANY	M	65,309.FMV	FMV
(6) FARMERS UNION MUTUAL INSURANCE COMPANY	Ŏ	229,418.FMV	FMV

45-0130613

UNION OF AMERICA - NORTH DAKOTA DIVISION FARMERS EDUCATIONAL AND COOPERATIVE

Page 4

Part Vi Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37) Schedule R (Form 990) 2012

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.

Doproportional Code V-UBI General or Percentage thorate amount in box 20 managing ownership yes No (Form 1065) Yes No Schedule R (Form 990) 2012 Yes No Yes No Ξ end-of-year Share of assets **6** Share of псоте total (e)
Are all
partners sec
501(c)(3)
orgs ? Predominant income pariers second (related, unrelated, orgs 2 excluded from tax under section 512-514) Yes No € (state or foreign Legal domicile country) <u>ئ</u> Primary activity Name, address, and EIN of entity

Schedule R (Form 990) 2012
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:
NAME OF RELATED ORGANIZATION:
NORTH DAKOTA FARMERS UNION FOUNDATION
DIRECT CONTROLLING ENTITY: FARMERS EDUCATIONAL AND COOPERATIVE UNION OF
AMERICA - ND DIVISION
NAME OF RELATED ORGANIZATION:
NORTH DAKOTA FARMERS UNION EDUCATION FOUNDATION
DIRECT CONTROLLING ENTITY: FARMERS EDUCATIONAL AND COOPERATIVE UNION OF
AMERICA - ND DIVISION

232165 12-10-12

Schedule R (Form 990) 2012

# 4562

**Depreciation and Amortization** (Including Information on Listed Property)

OMB No 1545-0172

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

► See separate instructions.

► Attach to your tax return. Business or activity to which this form relates

23

990

Identifying number

FARMERS EDUCATIONAL AN UNION OF AMERICA - NOT			SIONFOR	M 990 P	AGE 10		45-0130613
Part   Election To Expense Certain Proper	ty Under Section 17	9 Note If yo	ou have any lis	ted property, c	omplete Part	V before yo	
1 Maximum amount (see instructions)							500,000.
2 Total cost of section 179 property placed in service (see instructions)							
3 Threshold cost of section 179 property before reduction in limitation							2,000,000.
4 Reduction in limitation. Subtract line 3 from line 2 If zero or less, enter 0-							
5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If mamed filing separately, see instructions							
6 (a) Description of property (b) Cost (business use only) (c) Elected cost							
7 Listed property. Enter the amount from	line 29			7			
8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7							
9 Tentative deduction. Enter the smaller of line 5 or line 8							
10 Carryover of disallowed deduction from line 13 of your 2011 Form 4562							
11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5						11	
12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11						12	
13 Carryover of disallowed deduction to 2013 Add lines 9 and 10, less line 12							,
Note: Do not use Part II or Part III below for	r listed property li	nstead, use	Part V				
Part II Special Depreciation Allowa	nce and Other De	epreciation	(Do not inclu	de listed prope	rty)		
14 Special depreciation allowance for qualified property (other than listed property) placed in service during							
the tax year						14	_
15 Property subject to section 168(f)(1) election						15	
16 Other depreciation (including ACRS)						16	
Part III MACRS Depreciation (Do not include listed property.) (See instructions )							
Carpe managed		S	ection A			<del></del>	
17 MACRS deductions for assets placed i	n service in tax ye	ars beginnii	ng before 201	2		17	
18 If you are electing to group any assets placed in serv	rice during the tax year i	into one or more	e general asset acc	ounts, check here			
Section B - Assets					eral Deprecia	tion Syste	em
(a) Classification of property	(b) Month and year placed in service	(business/	or depreciation investment use e instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property							
<b>b</b> 5-year property							
c 7-year property	7						
d 10-year property	7 1						
e 15-year property	7						
f 20-year property	7						
g 25-year property	7			25 yrs.		S/L	
h Residential rental property	/			27.5 yrs	MM	S/L	
	/			27.5 yrs	MM	S/L	
i Nonresidential real property	/			39 yrs	MM	S/L	
	/			-	MM	S/L	
Section C - Assets F	laced in Service	During 201	2 Tax Year U	sing the Alter	native Depred	iation Sys	tem
20a Class life		_				S/L	<del></del>
<b>b</b> 12-year	7			12 yrs		S/L	
c 40-year	,			40 yrs	MM	S/L	
Part IV Summary (See instructions.)							
21 Listed property Enter amount from line 28							
22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21							
Enter here and on the appropriate lines of your return. Partnerships and S corporations • see instr							433,709.
23 For assets shown above and placed in							

portion of the basis attributable to section 263A costs

FARMERS EDUCATIONAL AND COOPERATIVE UNION OF AMERICA - NORTH DAKOTA DIVISION 45-0130613 Form 4562 (2012) Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or Part V amusement ' Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? No 24b If "Yes," is the evidence written? Yes Yes No (i) (c) (e) (f) (a) (d) (a) Elected Date Business Basis for depreciation Depreciation Recovery Method/ Type of property Cost or section 179 placed in investment (business/investment Convention deduction period (list vehicles first) other basis use only) service use percentage cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and 25 used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use: % % % 27 Property used 50% or less in a qualified business use S/L · % S/L -% S/L -% 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (d) (e) (f) (b) (c) (a) Vehicle Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the Vehicle Vehicle year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles 33 Total miles driven during the year. Add lines 30 through 32 No Yes No Yes No Yes Yes Nο Yes 34 Was the vehicle available for personal use Nο during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons Yes No 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI Amortization (f) (d) (e) (b) (c) Amortization Amortization for this year Amortizable amount Description of costs Date amortization begins period or percentage 42 Amortization of costs that begins during your 2012 tax year:

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43

44

43 Amortization of costs that began before your 2012 tax year

44 Total. Add amounts in column (f) See the instructions for where to report