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DLN: 93493207005217 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Form 990

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public

Interna	ıl Reve	nue Service	Information about Form 990 and its instructions is at www in	RS gov/rorm	<u>990</u>		Inspection		
A F	or th	e 2016 ca	elendar year, or tax year beginning 01-01-2016 , and ending 12-31-2	2016					
		pplicable	C Name of organization RURAL ADVANCEMENT FOUNDATION		D Employ	er identi	fication number		
	ldress ime ch	change	INTERNATIONAL - USA		56-170	4863			
☐ Ini	ıtıal ret	-	Doing business as						
Fir ⊡etui		minated	Number and street (or P O box if mail is not delivered to street address) Room/suite		E Telephor	ne numbe	r		
		d return	P O BOX 640		(919) 5	42-1396	j		
⊔ Ар	plication	on pending	City or town, state or province, country, and ZIP or foreign postal code						
			PITTSBORO, NC 27312		<b>G</b> Gross re	ceipts \$ 3	,097,908		
			F Name and address of principal officer SCOTT MARLOW	l(a) Is this	a group re	turn for			
			PO BOX 640	subord ( <b>b)</b> Are all	inates?	-0.5	☐Yes ☑No		
T Ta	v-ovor	mpt status		include		.05	☐ Yes ☐No		
			✓ 501(c)(3) ☐ 501(c)( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527				instructions)		
J W	ebsit	te:► WW	W RAFIUSA ORG	H(c) Group	exemption	number	•		
K Form	m of o	rganization	☑ Corporation ☐ Trust ☐ Association ☐ Other ►	Year of format	ion 1990	<b>M</b> State	of legal domicile NC		
		- gamzadon	Corporation — mast — Association — other P			•			
Pa	T	Sumi	•						
	1 7	TO CÚLTIV	cribe the organization's mission or most significant activities ATE MARKETS, POLICIES AND COMMUNITIES THAT SUPPORT THRIVING, SO	CIALLY JUST	, AND ENV	IRONME	NTALLY SOUND		
ce	<u> </u>	FAMILY FA	RMS						
Ten L	-								
Activities & Governance	-								
ŝ			s box $lacktriangle$ If the organization discontinued its operations or disposed of mor f voting members of the governing body (Part VI, line 1a) $\cdot$		of its net a	ssets	9		
<b>&gt;ಶ</b> ್ಗ	1		f independent voting members of the governing body (Part VI, line 1b)		-	4	7		
Пte	1		ober of individuals employed in calendar year 2016 (Part V, line 2a)			5	21		
CE.	6	Total num	ber of volunteers (estimate if necessary)			6	30		
⋖	7a	Total unre	elated business revenue from Part VIII, column (C), line 12			7a	0		
	Ь	Net unrela	ated business taxable income from Form 990-T, line 34			7b	0		
				Prio	r Year		Current Year		
<u>g</u>	1		ons and grants (Part VIII, line 1h)		1,586,		2,958,855		
Ravenua	1	-	service revenue (Part VIII, line 2g)		140,	_	112,648		
ã	1		nt income (Part VIII, column (A), lines 3, 4, and 7d ) enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		22,:	403	25,559 25,559		
	1		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,749,4		3,097,908		
	_		d similar amounts paid (Part IX, column (A), lines 1–3 )		183,	_	230,518		
	14	Benefits p	oald to or for members (Part IX, column (A), line 4)		0	0			
S.	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)		954,2	279	836,226		
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)			0	0		
χbe	Ь	Total fundra	aising expenses (Part IX, column (D), line 25) ▶30,224						
ш	1		enses (Part IX, column (A), lines 11a–11d, 11f–24e)	731,404 806					
	1	•	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,868,8	_	1,873,705		
<u></u>	19	Kevenue	ess expenses Subtract line 18 from line 12	Beginning o	-119,4		1,224,203 End of Year		
Net Assets or Fund Balances				Deginning e	or current i	·	Lind of Teal		
Bake	20	Total asse	ets (Part X, line 16)		2,013,	538	3,250,317		
# E	1		lities (Part X, line 26)		210,9	926	223,835		
			s or fund balances Subtract line 21 from line 20		1,802,	712	3,026,482		
<b>Pa</b> l Unde			<b>ature Block</b> erjury, I declare that I have examined this return, including accompanying sci	hedules and	statement	s and to	the best of my		
know	ledge	and belief	, it is true, correct, and complete Declaration of preparer (other than officer						
any k	nowle	eage							
		* * * * * *	re of officer		-07-19				
Sign		Signatu	ile of officer	Date					
Here	3		MARLOW EXECUTIVE DIRECTOR  print name and title						
		17	rint/Type preparer's name Preparer's signature Date			PTIN			
Paid	d		AUL MILLER PAUL MILLER	Chec		P0016637	2		
	pare	רו ⊢	rm's name ► KOONCE WOOTEN & HAYWOOD LLP		s EIN ► 56-	0517823			
	On	1 5.	rm's address ▶ P O BOX 17806	Phon	ie no (919)	782-9265			
			RALEIGH, NC 276197806						
May t	he IR	S discuss	this return with the preparer shown above? (see instructions)			✓ ,	Yes 🗌 No		

Form	990 (2016)					Page <b>2</b>					
Par	t IIII Statement	of Program Service	Accomplis	hments							
	Check if Sched	dule O contains a respons	se or note to	any line in this Part III .		🗹					
1	Briefly describe the o	rganization's mission									
					CIES AND COMMUNITIES THAT SUP	PPORT THRIVING,					
SOC:	IALLY JUST, AND ENVIR	RONMENTALLY SOUND FA	MILY FARMS								
	Did the organization	undertake any significant	nrogram ser	vices during the year whice	ch were not listed on						
_	the prior Form 990 or	, -	program ser	vices during the year will	th were not listed on	☐ Yes ☑ No					
	•		 Hula O			Lifes Life					
3	If "Yes," describe these new services on Schedule O  Did the organization cease conducting, or make significant changes in how it conducts, any program										
_	services?		-		to, any program	☐ Yes ☑ No					
		se changes on Schedule (				_ 1c31t0					
4	,	<b>-</b>		ate for each of its three la	argest program services, as measure	ad hy evnences					
					grants and allocations to others, the						
	expenses, and revenu	ue, if any, for each progra	am service re	ported							
	(Code	) (Expenses \$	255,935	including grants of \$	197,635 ) (Revenue \$	)					
	See Additional Data	) (Expanded ¢	233,333	morading grants or \$	137,7000 ) (110701140 \$	,					
4b	(Code	) (Expenses \$	310,026	including grants of \$	32,883 ) (Revenue \$	51 )					
	See Additional Data										
4c	(Code	) (Expenses \$	372,179	including grants of \$	) (Revenue \$	80,759 )					
	See Additional Data										
	(Code	) (Expenses \$	765,006	including grants of \$	) (Revenue \$	31,838)					
					AM WORKS TOWARD A MORE SUSTAINAB VALUES THE JUST FOODS PROGRAM ING						
	INTEGRITY, AGRICULTU	RAL BIOTECHNOLOGY, AGRIC	CULTURAL BIOD	IVERSITY AND SOCIAL JUSTI	ICE THE PROGRAM ALSO WORKS TO PRO	DMOTE AND MAINTAIN					
	A LACK OF FUNDING AN	ID PUBLIC SUPPORT FOR CLA	SSICAL BREEDI	NG PROGRAMS RAFI'S BREFI	RESSING SOME OF THE SYSTEMIC POLICY DING FOR ORGANIC PRODUCTION SYSTE	MS PROJECT FACILITATES					
	PARTICIPATORY ON-FAR	RM FIELD TRIALS OF SEED VA	RIETIES UNDE	R ORGANIC PRODUCTION PRA	ACTICES, AND DEVELOPS THE ABILITY OF	F FARMERS AND					
					NSES  \$277,341 INCLUDING GRANTS OF ARRANGEMENTS BETWEEN INDIVIDUAL F						
	CORPORATIONS, AND PI	ROVIDES FARMERS A FORUM	FOR DEFINING	THEIR NEEDS AND ADVOCAT	TING ON THEIR OWN BEHALF FOR FAIRN VOCATE FOR JUST CONTRACTS AND FAIR	ESS WE ENGAGE					
	\$249,764 INCLUDING G	RANTS OF \$0 REVENUE \$0NA	TIONAL ORGAN	IIC COALITION THE NATIONA	L ORGANIC COALITION (NOC) IS A NATI	ONAL ALLIANCE OF					
	ORGANIZATIONS WORK	ING TO PROVIDE A "WASHIN	GTON VOICE" F	FOR FARMERS, RANCHERS, EN	NVIRONMENTALISTS, CONSUMERS AND I FURE AND ENSURE A UNITED VOICE FOR	INDUSTRY MEMBERS					
	WHICH MEANS STRONG	, ENFORCEABLE, AND CONTII	NUOUSLY IMPR	OVED STANDARDS TO MAXIM	IIZE THE MULTIPLE HEALTH, ENVIRONME	NTAL AND ECONOMIC					
	DENEFITS THAT ONLY O	RGANIC AGRICULTURE AFFOI	RDS THE COAL IN IS A PROUD	ITION WORKS TO ASSURE TH FOUNDING MEMBER OF NOC	HAT POLICIES ARE FAIR, EQUITABLE, AND AND SERVES AS FISCAL SPONSOR OF NO	D ENCOURAGE DIVERSITY OC DONATIONS EXPENSES					
		RANTS OF \$0 REVENUE \$0	13 ATROOD	COMBING MEMBER OF NOC	SERVES AS TESCHE STORSON OF THE	SO SOLVATIONS EN ENGLS					
4d	Other program service	ces (Describe in Schedule	0)								

31,838) (Expenses \$ 765,006 including grants of \$ ) (Revenue \$

1,703,146

4e Total program service expenses ▶

Yes

Yes

1

2

3

4

5

6

7

8

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10

11a

11b

11c

11d

11e

11f

12a

12b

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14a

14h

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16

17

18

19

Yes

Yes

Yes

Yes

or X as applicable

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?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

**b** Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year? 

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 💆 . . . . . . . . . . . . . .

No No

Page 3

No No

Nο

Nο

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No

No

Nο

Nο

No

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No

Νo

No

No

Nο

Form **990** (2016)

29

Checklist of Required Schedules (continued)

Yes No

10 If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

10 If "Yes" to line 20a, did the organization attach a copy of grants or other assistance to any domestic organization or domestic

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

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24a

24b

24c

24d

25a

25b

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28a

28b

28c

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Yes

Yes

Form 990 (2016)

Yes

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No

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Nο

Nο

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orm	990 (2016)			Page <b>5</b>
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 53			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by			
<b>L</b>	this return	2b	Yes	
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		103	
3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
<b>-</b> -	Weekle and the second of the s			N-
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
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		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	_		
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12   10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
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 )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
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			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
				n (2016

OHIII	990 (2010)			Page 0
Par	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	" respo	nse to li	ines
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	ction 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 a			
	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			
b	Enter the number of voting members included in line 1a, above, who are independent  1b  7			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7b		No
_	persons other than the governing body?	$\vdash$		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	2.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	<del></del>
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent			<del></del>
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		v	
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure	-30		
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
19	Own website Another's website Upon request Other (explain in Schedule O)  Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
20	policy, and financial statements available to the public during the tax year.  State the name, address, and telephone number of the person who possesses the organization's books and records			

Part VII

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

Check if Schedule O contains a response or note to any line 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, or highest compensated employees who received more than \$100,000
- of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations
- List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

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

Lightharpoonup Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
<b>(A)</b> Name and Title	(B) Average hours per week (list any volume		ne bo	ox, ι n of or/t	t che inles ficer	s pers	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(1) ALEX HITT DIRECTOR	1 00	Х						0	0	0
(2) MARY K HENDRICKSON DIRECTOR	1 00	Х						0	0	0
(3) RANDI ILYSE ROTH TREASURER	1 00	Х		x				0	0	0
(4) ARCHIE HART DIRECTOR	1 00	Х						0	0	0
(5) LARHEA PEPPER PRESIDENT	1 00	х		x				0	0	0
(6) SHIRLEY SHERROD DIRECTOR	1 00	Х						0	0	0
(7) GAYLE WILLIAMS DIRECTOR	1 00	Х						0	0	0
(8) BENNY BUNTING STAFF REPRESENTATIVE	40 00			×				56,469	0	5,406
(9) SCOTT MARLOW EXECUTIVE DIRECTOR	40 00			х				84,802	0	18,524
(10) EDNA RODRIGUEZ OPERATIONS DIRECTOR	40 00			х				67,923	0	19,843
								I.		

any hours	director/trustee)						organization (W-	organizations (W-	from the
for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	O.	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

4h Colo Total						

c Total from continuation sheets to Part VII, Section A . 209,194

d Total (add lines 1b and 1c) . 43,773 Total number of individuals (including but not limited to those listed above) who received more than \$100,000

	of reportable compensation from the organization P o				
			Yes	No	
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on				
	line 1a? If "Yes," complete Schedule J for such individual	3		No	

			Yes	No	
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such				

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

4	organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such						
	ındıvıdual	4		No			
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No			
Se	ection B. Independent Contractors						

5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization? If "Yes," complete Schedule J for such person	1	5	No				
Se	Section B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received from the organization. Report compensation for the calendar year ending with or within the contractors.		ensation					
	(A)	(B)		C)				
	Name and business address	Description of services	Compe	ensation				

S	ection B. Independent Contractors							
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year							
	( <b>A)</b> Name and business address	(B) Description of services		(C) Compen				
1303	/E ETKA, L HANCOCK AVENUE KANDRIA, VA 22301	CONSULTANT			142,183			

from the organization Report compensation for the calendar year ending with or within the c	organization's tax year	
(A) Name and business address	(B) Description of services	(C) Compensation
STEVE ETKA, 1301 HANCOCK AVENUE ALEXANDRIA, VA 22301	CONSULTANT	142,183

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 1 Form **990** (2016)

art	VIII Statement of Revenue								- rage J
	Check if Schedule O contains	a respo	onse or note to any						<u> 🗆</u>
					(A) revenue	Rela ex fur	(B) ated or empt action venue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
10	1a Federated campaigns	1a			<u> </u>	10,	renue		312-314
ons, Gifts, Grants Similar Amounts	<b>b</b> Membership dues	<b>1</b> b	204,785						
512 1012	c Fundraising events	1c							
- \$	d Related organizations	1d	_						
<u> </u>	e Government grants (contributions)	1e	106,290						
ns, Sim	<b>f</b> All other contributions, gifts, grants,		_						
er je	and similar amounts not included above	<b>1</b> f	2,647,780						
Contributions, Gifts, Grants and Other Similar Amounts	g Noncash contributions included in lines 1a-1f \$	22,6	58 <u>9</u>						
	h Total.Add lines 1a-1f		•	;	2,958,855				
<u>1</u>			Busines						
Service Revenue	2a SERVICE CONTRACTS & HO			900099	11	2,648	112,6	48	
æ	b ————————————————————————————————————	_							
a Ce	с —	_							
Š	d	_							
an	e ————————————————————————————————————								
Program	<b>f</b> All other program service revenue	2		112,648					<u> </u>
<u>~</u>	<b>GTotal.</b> Add lines 2a-2f		<u> </u>						
	<b>3</b> Investment income (including divided similar amounts)				846				846
	4 Income from investment of tax-ex		ond proceeds	•					
	<b>5</b> Royalties			<b>▶</b>					
	(ı) Rea	al	(II) Personal						
	<b>6a</b> Gross rents	8,846							
	<b>b</b> Less rental expenses	0							
	c Rental income or	8,846							
	(loss)	0,040							
	<b>d</b> Net rental income or (loss) .				8,846				8,846
	(ı) Securi	ties	(II) Other						
	7a Gross amount from sales of								
	assets other than inventory								
	<b>b</b> Less cost or								
	other basis and sales expenses								
	C Gain or (loss)			_					
	<ul><li>d Net gain or (loss)</li><li>8a Gross income from fundraising ev</li></ul>		<b>•</b>						
<u>ə</u>	(not including \$	of							
Other Revenue	contributions reported on line 1c) See Part IV, line 18		1,290	0					
ev.	<b>b</b> Less direct expenses	ь	· ·	0					
er	c Net income or (loss) from fundrai	sıng ev	ents		1,290				1,290
ŧ	9a Gross income from gaming activit	ies							
	See Part IV, line 19	а							
	<b>b</b> Less direct expenses	Ь							
	c Net income or (loss) from gaming	activit	ies						
	<b>10a</b> Gross sales of inventory, less returns and allowances								
	returns and anowances	а	l						
	<b>b</b> Less cost of goods sold	b							
	<b>c</b> Net income or (loss) from sales o	f invent	tory ►						
	Miscellaneous Revenue		Business Code						
	11aFISCAL SPONSOR ADMIN F		90009	99	15,423				15,423
	b								
	С								
	I All all								
	d All other revenue e Total. Add lines 11a-11d		<u> </u>						
			•		15,423				
	12 Total revenue. See Instructions	• •	•		3,097,908		112,648		0 26,405 Form <b>990</b> (2016)
									Form <b>990</b> (2016)

section 4958(c)(3)(B) . . . .

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . .

7 Other salaries and wages

10 Payroll taxes . . .

**b** Legal .

**c** Accounting

9 Other employee benefits . .

11 Fees for services (non-employees) a Management . . . .

**d** Lobbying . . . . . . .

f Investment management fees .

12 Advertising and promotion .

13 Office expenses .

15 Royalties .

**17** Travel .

16 Occupancy .

23 Insurance .

14 Information technology

**20** Interest . . . .

21 Payments to affiliates . . .

expenses on Schedule O ) a SEED PURCHASES

**b** MEMBERSHIPS AND SUBSCRI

c TELEPHONE & TELECOMMUNI

d EQUIPMENT MAINTENANCE

e All other expenses

22 Depreciation, depletion, and amortization

e Professional fundraising services See Part IV, line 17

18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings

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

25 Total functional expenses. Add lines 1 through 24e 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)

g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)

Form 990 (2016)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all c	olumns All other org	anizations must comp	olete column (A)	
Check if Schedule O contains a response or note to any	y line in this Part IX			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	123,995	123,995		
<b>2</b> Grants and other assistance to domestic individuals See Part IV, line 22	106,523	106,523		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	252,966	191,135	43,309	18,522
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in				

434,175

92,918

56,167

4,325

25,646

365,226

1,207

22,763

11,397

19,400

106,755

5,375

26,287

11,192

104,325

59,185

16,176

10,041

17,661

1,873,705

420,102

91,752

50,618

1,975

360,716

658

11,403

7,642

15,724

100,980

21,432

3,119

104,325

58,881

11,332

7,631

13,203

1,703,146

12,136

1,166

4,076

2,350 25,646

2,555

451

10,160

3,240

2,757

5.487

5,375

3,635

8,073

304

4,652

1,928

3,035

140,335

1,937

1,473

1,955

1,200

515

919

288

1,220

192

482

1,423

30,224

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Liabilities 22

Fund Balances

Assets or 30

Net

Investments-program-related See Part IV, line 11

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Intangible assets . . . . .

Other assets See Part IV, line 11 .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

1	Cash-non-interest-bearing	137,260	1	740,822
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net	988,679	3	1,696,573
4	Accounts receivable, net	124,827	4	53,415
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part		5	

	3	Pledges and grants receivable, net		•	988,679	3	1,696,573
	4	Accounts receivable, net	124,827	4	53,415		
	5	Loans and other receivables from current and for trustees, key employees, and highest compensa II of Schedule L		5			
Assets	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L  Notes and loans receivable, net		6			
Se	,	Inventories for sale or use		8			
S	"	inventories for sale of use		•			
~	9	Prepaid expenses and deferred charges			9,868	9	4,157
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	1,124,954			
	ь	Less accumulated depreciation	10b	392,173	734,779	<b>10</b> c	732,781
	11	Investments—publicly traded securities .	6,527	11	11,304		
	12	Investments—other securities See Part IV, line		12			

11,265

59,761

141.368

22.706

223,835

638,539

2,387,943

3,026,482

3.250.317

Form **990** (2016)

3,250,317

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31 32

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11.698

39,116

146.000

25.810

210,926

563,227

1,239,485

1,802,712

2,013,638

2,013,638

Form	990 (2016)				Page <b>12</b>
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3	,097,908
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,873,705
3	Revenue less expenses Subtract line 2 from line 1	3		1	,224,203
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1	,802,712
5	Net unrealized gains (losses) on investments	5			-433
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	,026,482
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<b>✓</b>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
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	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle			

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

За

3b

Νo

Form **990** (2016)

Audit Act and OMB Circular A-133?

## **Additional Data**

Software ID:

Software Version:

**EIN:** 56-1704863

Name: RURAL ADVANCEMENT FOUNDATION

INTERNATIONAL - USA

Form 990 (2016)

Form 990, Part III, Line 4a:

600 FARMERS AND COLLABORATIVE FARMER GROUPS THROUGHOUT THE STATE

AGRICULTURAL REINVESTMENT FUND (FORMERLY TOBACCO COMMUNITIES REINVESTMENT FUND) THE AGRICULTURAL REINVESTMENT FUND INVESTS IN FARMERS AND RURAL COMMUNITIES DEVELOPING NEW AND INNOVATIVE SOURCES OF AGRICULTURAL INCOME THROUGH THE PROVISION OF COST-SHARE GRANTS THESE SMALL CAPITAL INVESTMENTS HELP PRESERVE EXISTING JOBS AND BUSINESSES, LEVERAGE NEW INVESTMENT AND CREATE NEW JOBS AND INCOME FOR NORTH CAROLINA'S FARMERS AND RURAL COMMUNITIES THE FARM-BASED ENTERPRISES SUPPORTED THROUGH THIS PROGRAM REPRESENT A WIDE VARIETY OF LESSONS AND EXPERIENCES RELEVANT TO THOUSANDS WITHIN THE STATE'S AGRICULTURAL INDUSTRY TO DATE. THE PROGRAM HAS DISBURSED MORE THAN \$5 2M TO MORE THAN

BEYOND HUNGER RELIEF BEYOND HUNGER RELIEF IDENTIFIES AND LAUNCHES SYSTEMIC SOLUTIONS TO FOOD INSECURITY THAT STRENGTHEN JUST AND SUSTAINABLE AGRICULTURE IT SEEKS TO ENGAGE AND MOBILIZE PEOPLE OF FAITH, FARMERS, AND COMMUNITIES THROUGH ITS COME TO THE TABLE PROJECT, THROUGH RESEARCH ON THE BARRIERS AND OPPORTUNITIES FOR FARMERS SELLING INTO LOW WEALTH COMMUNITIES, AND THROUGH A NEW INITIATIVE DESIGNED TO IMPROVE SNAP/EBT

Form 990, Part III, Line 4b:

ACCESS AT FARMERS MARKETS AND OTHER FARM DIRECT SALE VENUES

# FARM SUSTAINABILITY RAFI'S FARM ADVOCACY STAFF PROVIDE EXPERT KNOWLEDGE IN COMPLEX LENDING SITUATIONS, PROVIDING INDIVIDUAL COUNSELING AND FINANCIAL PLANNING ASSISTANCE TO FARMERS IN FINANCIAL CRISIS WHO STAND TO LOSE THEIR FARMS WE SERVE DIVERSE FARMS ACROSS THE SOUTHEAST, RANGING FROM SMALL. SPECIALTY OPERATIONS TO LIVESTOCK AND COMMODITY OPERATIONS ON THOUSANDS OF ACRES SINCE 2010, WITH THE HELP OF OUR LEAD

FARMER ADVOCATE, BENNY BUNTING, WE ASSISTED MORE THAN 350 FAMILY FARMERS, PRESERVING APPROXIMATELY \$50 MILLION IN FARM ASSETS

Form 990, Part III, Line 4c:

efile GRAPHIC print - DO NO			<u>nt - DO NOT PROC</u>	ESS	As Filed Data -			DLN: 9	3493207005217
SCI	HED	ULE A	Puh	lic C	harity Statu	s and Pub	olic Supp	ort	OMB No 1545-0047
(For	m 990			the org	ganization is a secti	ion 501(c)(3) d	organization o		2016
990E	EZ)			•	4947(a)(1) nonexe ▶ Attach to Form 9				2010
		the Treasury	► Information	about	Schedule A (Form			ıctions is at	Open to Public Inspection
Nam	e of th	ne Service ne organiza	tion		<u> </u>	<u>, , , , , , , , , , , , , , , , , , , </u>		Employer identific	<u> </u>
		NCEMENT FOUI NAL - USA	NDATION					56-1704863	
	rt I		for Public Charity					See instructions.	
	rganız		a private foundation be		•	•	,	/A>/:>	
1		,	onvention of churches,					(A)(I).	
2			scribed in <b>section 17</b> 0			·	• • • • • • • • • • • • • • • • • • • •		
3			or a cooperative hospit		-				
4		name, city,	esearch organization of and state			-			·
5			ation operated for the l ( <b>iv).</b> (Complete Part II		of a college or univer	sity owned or op	erated by a gov	rernmental unit descri	bed in <b>section 1/0</b>
6		A federal, s	tate, or local governm	ent or o	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)( <i>A</i>	۱)(v).	
7	<b>✓</b>	section 17	ation that normally rec <b>0(b)(1)(A)(vi).</b> (Cor	nplete I	Part II )		-	ınıt or from the gener	al public described in
8		A communi	ty trust described in <b>s</b> e	ection	170(b)(1)(A)(vi)	Complete Part I	I )		
9			ural research organizat ant college of agriculti						ege or university or a
10		from activit	ition that normally rec les related to its exem income and unrelated see section 509(a)(2	pt func busine	tions—subject to cert ss taxable income (le	aın exceptions, a	and (2) no more	than 331/3% of its su	pport from gross
11	П	•	ation organized and op	- '		public safety S	ee section 509	(a)(4).	
12		more public	ition organized and op ly supported organizat through 12d that desc	ions de	escribed in section 5	<b>09(a)(1)</b> or <b>sec</b>	tion 509(a)(2	). See section 509(a	
а		<b>Type I.</b> A so	supporting organization  n(s) the power to regu  Part IV, Sections A a	opera larly ap	ted, supervised, or co	ontrolled by its si	upported organi	zation(s), typically by	
b		<b>Type II.</b> A manageme	supporting organization of the supporting or	n supe ganızat	ion vested in the san				
С		Type III fo	unctionally integrate organization(s) (see in:	d. A su	ipporting organization				ted with, its
d		functionally	on-functionally integrated The organ  ) You must complet	ization	generally must satisf	y a distribution i			
e		Check this	box if the organization or Type III non-function	receive	ed a written determin	ation from the II	RS that it is a Ty	pe I, Type II, Type II	I functionally
f	Enter	the number	of supported organiza	tions	_				
g			ing information about			•			
(i)N	ame of	f supported o	organization (ii)EI	N	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governin	ation listed in	Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
	1								
Total		vouls Dad	tion Act Notice, see	blac Tro	atuustians for	Cat No 11285	· -	Cahadula A (Esser 2	 90 or 990-EZ) 2016

	each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,632,685
6	<b>Public support.</b> Subtract line 5 from line 4						7,447,912
S	ection B. Total Support	•	•	'	'	•	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	<b>(b)</b> 2013	(c)2014	<b>(d)</b> 2015	(e)2016	<b>(f)</b> ⊤otal
7	Amounts from line 4	1,408,406	1,604,501	1,522,252	1,586,583	2,958,855	9,080,597
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	18,730	23,276	20,231	14,047	9,692	85,976
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI )						
11	<b>Total support.</b> Add lines 7 through 10						9,166,573
12	Gross receipts from related activities,	etc (see instruction	ons)			12	980,445
13	First five years. If the Form 990 is fo	r the organization	's first, second, thi	rd, fourth, or fifth	tax year as a sect	ion 501(c)(3) orga	anization,
	check this box and <b>stop here</b>					▶□	]
S	ection C. Computation of Public						
	Public support percentage for 2016 (lin			olumn (f))		14	81 250 %
15	Public support percentage for 2015 Sc	hedule A, Part II,	line 14			15	78 530 %

▶ 🗸

16a 33 1/3% support test-2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

17a 10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain

h 33 1/3% support test-2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

and stop here. The organization qualifies as a publicly supported organization

box and stop here. The organization qualifies as a publicly supported organization

Section A. Public Support	
the organization fails to qualify under the tests listed below, please complete Part II.)	
(Complete only if you checked the box on line 10 of Part 1 or if the organization failed to qualify under Part 11. I	ίT

Se	ection A. Public Support						
	Calendar year	(a)2012	<b>(b)</b> 2013	(c)2014	(d)2015	<b>(e)</b> 2016	(f)Total
1	(or fiscal year beginning in) ► Gifts, grants, contributions, and						
_	membership fees received (Do not	I					
	ınclude any "unusual grants`")	<u> </u>					
2	Gross receipts from admissions,	I					
	merchandise sold or services performed, or facilities furnished in	I					
	any activity that is related to the	I					
	organization's tax-exempt purpose	I					
_	Cross receipts from activities that are						
3	Gross receipts from activities that are not an unrelated trade or business	I					
	under section 513	I					
4	Tax revenues levied for the						
	organization's benefit and either paid	I					
5	to or expended on its behalf The value of services or facilities						
,	furnished by a governmental unit to	I					
	the organization without charge	ļ					
6	Total. Add lines 1 through 5	<u></u>					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	I					
	5 received from disqualified persons	<u> </u>					
b	Amounts included on lines 2 and 3						
	received from other than disqualified	I					
	persons that exceed the greater of \$5,000 or 1% of the amount on line	I					
	13 for the year	I					
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
31	ection B. Total Support	Г	1	T	Т		
	Calendar year (or fiscal year beginning in) ▶	(a)2012	<b>(b)</b> 2013	(c)2014	( <b>d)</b> 2015	<b>(e)</b> 2016	(f)Total
9	Amounts from line 6						
.0a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
ь	income from similar sources Unrelated business taxable income						
U	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
	Add lines 10a and 10b  Net income from unrelated business						
11	activities not included in line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI )						
13	Total support. (Add lines 9, 10c,						
	11, and 12 )  First five years. If the Form 990 is fo	r the organization	te first second the	hird fourth or fift	 	ction 501/c)(2) a:	raanization
14	check this box and <b>stop here</b>	Tale organización	r a mac, second, ti	ma, iourtii, or iiit	ii tax yeai as a se	CCOT 301(C)(3) 01	yanızatıon, <b>►</b> □
<u> </u>	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2016 (lin			column (f))		15	
16	Public support percentage from 2015 S		· ·	(.,,		16	
	ection D. Computation of Invest	<u> </u>				10	
17	Investment income percentage for 20:			line 13, column (f	))	17	
18	Investment income percentage from 2			,(	••	18	
	331/3% support tests—2016. If the			on line 14, and lir	ie 15 is more than		e 17 is not
	more than 33 1/3%, check this box and						▶ □
	33 1/3% support tests—2015. If the						. —

not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

ightharpoons

ightharpoons

Schedule A (Form 990 or 990-EZ) 2016

6

7

8

10a

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V ) Section A. All Supporting Organizations Yes No

Page 4

5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2016

_	If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,		
	describe the designation If historic and continuing relationship, explain	1	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described		
	ın section 509(a)(1) or (2)	2	
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)		
	below	3a	
b	Did the organization confirm that each supported organization qualified under section $501(c)(4)$ , $(5)$ , or $(6)$ and satisfied the public support tests under section $509(a)(2)$ ? If "Yes." describe in <b>Part VI</b> when and how the organization made the		

эa	Did the organization have a supported organization described in section 301(c)(4), (5), or (6), it res, answer (b) and (c)					
	below	3a				
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the					
	determination	3b				
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					

	the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the			
	determination	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations			
	Supervised by or in connection with its supported organizations			

	determination	3b					
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		-			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked 12a or 12b ın Part I, answer (b) and (c) below						
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			-			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or	4b					
С	supervised by or in connection with its supported organizations  Did the organization support any foreign supported organization that does not have an IRS determination under sections						
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support						
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes						
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and						

4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked 12a or 12b in Part I, answer (b) and (c) below	4a				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes					
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the					
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by	5a				

U	bld the organization have ditinate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes					
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the					
	organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)					
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the					
	organization's organizing document?	5b				

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Par	** Supporting Organizations (continued)						
			Yes	No			
11	Has the organization accepted a gift or contribution from any of the following persons?						
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the						
	governing body of a supported organization?	11a					
b	A family member of a person described in (a) above?	11b					
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c					
C-	ection B. Type I Supporting Organizations						
se	ection B. Type I Supporting Organizations		Yes	No			
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint of	ır 🗆	1.03	""			
	elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Pa						
	<b>VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or						
	trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such						
	powers during the tax year	1					
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that						
	operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting						
	organization	2					
			•	•			
Se	ection C. Type II Supporting Organizations		Yes	N.			
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees	of [	res	No			
1	were a majority of the organization's directors of trustees during the tax year also a majority of the directors of trustees each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the	or					
	supporting organization was vested in the same persons that controlled or managed the supported organization(s)						
		1					
				•			
Se	ection D. All Type III Supporting Organizations		Τ.,				
	Did the appropriate any would be each of the grown what a manufacture has the last through a COL manufacture.	,	Yes	No			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of						
	Form 990 that was most recently filed as of the date of notification, and (III) copies of the organization's governing						
	documents in effect on the date of notification, to the extent not previously provided?	1	-	<u> </u>			
2	Ware any of the organization's officers, directors, or tructoes either (1) appointed or elected by the supported organization						
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization						
	maintained a close and continuous working relationship with the supported organization(s)						
_	Divinion of the valeting described in (2) did the surround of	2					
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in torganization's investment policies and in directing the use of the organization's income or assets at all times during the t						
	year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3					
	ection E. Type III Functionally-Integrated Supporting Organizations						
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instr	actions)					
a							
b							
С	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (	see instru	ictions)	)			
2	Activities Test Answer (a) and (b) below.	_	Yes	No			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the						
	supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supporte</b> organizations and explain how these activities directly furthered their exempt purposes, how the organization was	<b>3</b>					
	responsive to those supported organizations, and how the organization determined that these activities constituted	<u> </u>					
	substantially all of its activities	2a					
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the						
	organization's position that its supported organization(s) would have engaged in these activities but for the organization's						
_	involvement ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (						
3	Parent of Supported Organizations Answer (a) and (b) below.	_					
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each the supported organizations? Provide details in Part VI.	of <b>3a</b>					
h	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its	<u> </u>	1				
,	supported organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard	3b					
		,	1				

-	Add lifles 1 till odgif 5			
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		

d	Total (add lines 1a, 1b, and 1c)	1d	
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	

Schedule A (Form 990 or 990-EZ) (2016)

c Excess from 2014.

d Excess from 2015. . . . . .

e Excess from 2016. . . .



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# **Political Campaign and Lobbying Activities**

www.irs.gov/form990.

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. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

OMB No 1545-0047

DLN: 93493207005217

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

3

4

SCHEDULE C (Form 990 or 990-

If the organization answered "Yes" on 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 527 organizations Complete Part I-A only

• Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B • 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" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c

(Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA 56-1704863 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV

Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2

Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes Was a correction made? ☐ Yes □ No

h If "Yes," describe in Part IV Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt

function activities

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization fileForm 1120-POL for this year?

3 5

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount

of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political

organization If none, enter -0-3 5

104,200

57,132

23,011

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

1,429,068

323,017

238,178

357,267

25,221

74,318

60,915

538

71,487

59,155

244

73,012

60,976

1,428

Schedule C (Form 990 or 990-EZ) 2016

Return Reference

activity

Volunteers?

1

(b)

Amount

(a)

Yes

No

#### Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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)? 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? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 1 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 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). 2a Current year 2b Carryover from last year c Total 2c 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Explanation

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

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

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493207005217						
TY 2016 Affiliated Group Schedule								
Name:	RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA							
EIN:	56-1704863							
Affiliated Group Business Name:	RURAL ADVANCEMENT INSTITUTE							
Address. Either US or Foreign Type:	PO BOX 640 PITTSBORO, NC 27312							
EIN:	06-1656357							
Electing Organization Checkbox:								
Total Grassroots Lobbying:	0							
Total Direct Lobbying:	0							
Total Lobbying Expenditures:	0							
Other Exempt Purpose Expenditures:	0							
Total Exempt Purpose Expenditures:	0							
Lobbying Nontaxable Amount:	0							
Grassroots Nontaxable Amount:	0							
Tot Lobbying Grassroot Minus Non Tx:	0							
Tot Lobby Expend Mns Lobbying Non Tx:	0							
Share Of Excess Lobbying:	0							

Affiliated Group Business Name:	RURAL ADVANCEMENT INSTITUTE				
Address. Either US or Foreign Type:	PO BOX 640 PITTSBORO, NC 27312				
EIN:	06-1656357				
Electing Organization Checkbox:					
Total Grassroots Lobbying:	0				
Total Direct Lobbying:	0				
Total Lobbying Expenditures:	0				
Other Exempt Purpose Expenditures:	0				
Total Exempt Purpose Expenditures:	0				
Lobbying Nontaxable Amount:	0				
<b>Grassroots Nontaxable Amount:</b>	0				
Tot Lobbying Grassroot Minus Non Tx:	0				
Tot Lobby Expend Mns Lobbying Non Tx:	0				
Share Of Excess Lobbying:	0				

SCHEDULE D

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

**Supplemental Financial Statements** 

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

DLN: 93493207005217 OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA 56-1704863 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 20 C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2016

Par	4111	Organizations M	iaintaining Coi	lections of	r Art,	HISTOR	ıcaı ı	reas	ures, o	r Otner	Similar A	.ssets (	continued	<u>)                                    </u>
3		the organization's acq (check all that apply)		n, and other	records		any of	the fo	ollowing t	that are a	significant	use of it	s collectio	n
а		Public exhibition				d		Loar	or exch	ange pro	grams			
b		Scholarly research				е		Othe	er					
С		Preservation for future	e generations											
4	Provi Part )	de a description of the XIII	organization's col	lections and	explain	how the	ey furtl	ner th	ie organiz	zation's e	xempt purp	ose in		
5		ng the year, did the org s to be sold to raise fui									nılar	□ <b>Y</b>	es 🗆	No
Pai	rt IV	Escrow and Cust Complete if the or X, line 21.			on Fo	rm 990	), Part	IV, I	ine 9, o	r reporto	ed an amo	unt on	Form 990	), Part
1a		e organization an agent ded on Form 990, Part		an or other II	nterme	diary for	contri	bution	ns or othe	er assets	not	□ Y	es 🗆	No
b	If "Y∈	es," explain the arrange	ement in Part XIII	and complet	te the f	ollowing	table				-	Amount		<del></del>
С	Begin	nning balance								1c				
d	Addıt	ions during the year								1d				
е	Dıstrı	butions during the yea	ır							1e				
f	Endır	ng balance								1f				
<b>2</b> a	Dıd tl	he organization include	e an amount on Fo	rm 990, Part	: X, line	21, for	escrow	or ci	ustodial a	account li	ability?	□ <b>Y</b>	es 🗌	No
ь	If "Y∈	es," explain the arrange											<u> L</u>	
Pa	rt V	Endowment Fun	<b>ds.</b> Complete if											
4	D = =	una of work balance		(a)Current	year	(b)₽	rior yea	r	(c)Two y	ears back	(d)Three ye	ars back	(e)Four y	ears back
	-	ning of year balance .												
		outions	!											
		vestment earnings, gair						-						
		or scholarships												
	and pr	expenditures for faciliting control of the control												
		istrative expenses .												
g	End of	year balance												
2		de the estimated perce	-	ent year end	balance	e (line 1	g, colu	mn (a	a)) held a	ıs				
а	Board	d designated or quasi-e	endowment ►											
b	Perm	anent endowment 🕨												
С	Temp	porarily restricted endo	wment 🟲											
		percentages on lines 2a												
За		here endowment funds nization by	not in the posses	ssion of the o	rganıza	tion tha	t are h	eld ar	nd admin	istered fo	or the		Yes	s No
	_	nrelated organizations										3	a(i)	110
	• •	elated organizations											a(ii)	+-
b		es" on 3a(II), are the re		ns listed as re	equired	on Sche	edule R	?				.	3b	<del>                                     </del>
4	Desci	ribe in Part XIII the inte	ended uses of the	organization	's endo	wment	funds					_	•	
Pai	t VI	Land, Buildings,												
	D	Complete if the or	<del>*************************************</del>			m 990, or other						· · ·		lus
	Descri	iption of property	(a) Cost or oth (investme		( <b>D</b> )Cost	or other	Dasis (C	otner)	(C)ACC	umulated (	depreciation		( <b>d)</b> Book va	ilue
1a	Land						16	58,229	)					168,229
b	Buildin	ngs					90	08,720			370,313			538,407
c	Leaseh	nold improvements												
d	Equipn	nent					4	12,902	2		16,757			26,145
е	Other							5,103	3		5,103			0
Tota	I. Add	lines 1a through 1e (C	column (d) must e	qual Form 99	0, Part	X, colu	mn (B)	, line	10(c))		<b>&gt;</b>			732,781

Part VII	<b>Investments—Other Securities.</b> Complete if the org See Form 990, Part X, line 12.			ered 'Yes' on F	orm 990, Pa	rt IV, line 11b.
	<ul><li>(a) Description of security or category (including name of security)</li></ul>		)Book alue		(c)Method of vorender of vorender of the contraction of the contractio	
(1)Financial (2)Closely-h (3)Other	derivatives	<u>:</u>				
(A)						
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
	n (b) must equal Form 990, Part X, col (B) line 12 )	•				
Part VIII	<b>Investments—Program Related.</b> Complete if the or See Form 990, Part X, line 13.	organizatio	on ans	wered 'Yes' on	Form 990, P	art IV, line 11c.
	(a) Description of investment	(b) Book	value	Cost	(c) Method of v	/aluation market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 13 )					
Part IX	Other Assets. Complete if the organization answered 'Yes' (a) Description	on Form 9	90, Pa	rt IV, line 11d S	ee Form 990, F	Part X, line 15 (b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
Total. (Colu	mn (b) must equal Form 990, Part X, col (B) line 15 )  Other Liabilities. Complete if the organization answe	red 'Yes'	on Fo	 rm 990 Part I\		11f
	See Form 990, Part X, line 25.  (a) Description of liability	1		ook value	.,	
(1) Federal ı	ncome taxes		(6) 50	SOR VAIUE		
SECURITY D	EPOSITS			150		
CHARITABLE	GIFT ANNUITY			1,071		
	OMPENSATION			21,485		
(4)						
(5)						
(6)						
(7)			_			
(8)						
(9)						
	n (b) must equal Form 990, Part X, col (B) line 25 )	<u> </u>		22,706		
	or uncertain tax positions In Part XIII, provide the text of the for sile in the form of t					

Other losses .

Other (Describe in Part XIII ) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Schedule D (Form 990) 2016

Part XI

2

а

b

c

d

е 3

а

b

c

Part XIII

5

4

2e

3

4c

5

Page 4

4,400

1.873.705

1,873,705

Schedule D (Form 990) 2015

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments . . . 2a -433 4,400 Donated services and use of facilities . 2b 2c Recoveries of prior year grants . . .

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

2d 2e

Other (Describe in Part XIII ) . d 3,967 е Add lines 2a through 2d . . . . 3 Subtract line 2e from line 1 . 3 3,097,908 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b. 4a Other (Describe in Part XIII ) . . . . . . 4b b Add lines 4a and 4b . . . 4c

5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . . . 3,097,908 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements .

1,878,105 2 Amounts included on line 1 but not on Form 990, Part IX, line 25

4,400 Donated services and use of facilities . 2a а

b 2b

Prior year adjustments . . . 2c

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

2d

4b

Explanation

Page <b>5</b>		Schedule D (Form 990) 2015
	Information <i>(continued)</i>	Part XIII Supplemental Info
planation		Return Reference

Schedule D (Form 990) 2016

## Additional Data

Software ID: Software Version:

EIN:

RURAL ADVANCEMENT FOUNDATION Name:

56-1704863

GH 2016. AND CONCLUDED THAT THERE ARE NO UNCERTAIN TAX POSITIONS, AND BELIEVES THERE IS NO

INTERNATIONAL - USA

Supplemental Information Return Reference

Explanation

PART X, LINE 2 IT IS THE ORGANIZATION'S POLICY TO EVALUATE ALL TAX POSITIONS TO IDENTIFY THOSE THAT MAY B E CONSIDERED UNCERTAIN ALL IDENTIFIED MATERIAL TAX POSITIONS ARE ASSESSED AND MEASURED BY A "MORE-LIKELY-THAN-NOT" THRESHOLD TO DETERMINE IF THE BENEFIT OF ANY UNCERTAIN TAX POSIT ION SHOULD BE RECOGNIZED IN THE FINANCIAL STATEMENTS. ANY CHANGES IN THE AMOUNT OF A TAX P. OSITION ARE RECOGNIZED IN THE PERIOD THE CHANGE OCCURS THE ORGANIZATION FILES FORM 990 IN FORMATION RETURNS IN THE U.S. FEDERAL JURISDICTION, THESE RETURNS ARE SUBJECT TO EXAMINATE ON BY THE INTERNAL REVENUE SERVICE FOR A PERIOD OF THREE YEARS AFTER THE RESPECTIVE FILING DEADLINES MANAGEMENT EVALUATED TAX POSITIONS FOR THE YEARS ENDED DECEMBER 31, 2013 THROU

INCOME TAX EFFECT ON THE FINANCIAL STATEMENTS

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493207005217 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number RURAL ADVANCEMENT FOUNDATION 56-1704863 INTERNATIONAL - USA Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes □ No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash other) or government assistance See Additional Data Table (1)(2)(3)(4)(6)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2016

Page 2

FOSTERING FARMER INNOVATION AND ENTREPRENEURSHIP IN RURAL COMMUNITIES	
(1)	

(2)

Schedule I (Form 990) 2016

Part III

(1)

(5)

(6)

(7)

Part IV

PART I, LINE 2

**Return Reference** 

(3) (4)

TO OTHER RESOURCES

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. **Explanation** 

recipients

21

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

(c) Amount of

cash grant

106,523

(d) Amount of

non-cash assistance

THE ORGANIZATION SELECTS DEMONSTRATION PROJECTS FOR FUNDING THROUGH A COMPETITIVE APPLICATION PROCESS FIRST, RAFI STAFF MEMBERS WORK WITH POTENTIAL APPLICANTS TO ASSESS APPLICATION MATERIALS AND UNDERSTAND PROJECT REQUIREMENTS. ONCE APPLICANTS HAVE COMPLETED AND

ADVANTAGE OF THE RESOURCES THAT ARE AVAILABLE TO THEM EACH DEMONSTRATION PROJECT IS VISITED AT LEAST TWICE BY RAFI STAFF MEMBERS AND SOME MORE OFTEN, DEPENDING UPON THE NEEDS OF THE SPECIFIC PROJECT DEMONSTRATION CONTRACT PARTICIPANTS ARE REQUIRED TO SUBMIT INTERIM AND FINAL REPORTS ON PROJECT PROGRESS THE REPORTS ASK PARTICIPANTS TO DETAIL PROGRESS BEING MADE TOWARDS PROJECT COMPLETION, TRACK IMPACTS, AND REQUIRE DETAILED ITEMIZATION OF EXPENDITURES (INCLUDING APPROPRIATE DOCUMENTATION) ADDITIONALLY, RAFI STAFF MEMBERS ARE IN CONSTANT CONTACT WITH PROJECT PARTICIPANTS DURING THE CONTRACT PERIOD IN ORDER TO ARRANGE INTERVIEWS, MEDIA COVERAGE, AND ASSIST FARMERS ACCESS

(e) Method of valuation (book,

FMV, appraisal, other)

Schedule I (Form 990) 2016

SUBMITTED PROPOSALS FOR FUNDING, THE PROPOSALS ARE TURNED OVER TO A REVIEW COMMITTEE COMPRISED OF FARMERS, MEMBERS OF FARMER SUPPORT ORGANIZATIONS, AGRIBUSINESS EXPERTS, RURAL CLERGY, AND UNIVERSITY RESEARCHERS. THE REVIEW COMMITTEE SCORES THE PROPOSALS USING A STANDARDIZED RATINGS SHEET. REVIEWERS THEN SELECT FINALISTS FROM AMONG THE TOP SCORING APPLICANTS. THE FINALISTS ARE THEN INTERVIEWED AFTER THE INTERVIEWS, THE REVIEW COMMITTEE MAKES RECOMMENDATIONS FOR FUNDING TO RAFI'S TOBACCO COMMUNITIES REINVESTMENT FUND (TCRF) OVERSIGHT COMMITTEE THE COMMITTEE THEN APPROVES FUNDING FOR EACH SPECIFIC PROJECT ONCE FUNDING IS APPROVED. RAFI STAFF MEMBERS WORK WITH DEMONSTRATION PROJECT AWARD WINNERS TO DEVELOP DEMONSTRATION CONTRACTS. THE CONTRACTS CLEARLY STATE THE REOUIREMENTS FOR FUNDING BY THE AWARD WINNERS AND THE TIMETABLE FOR REPORTING RAFI MONITORS DEMONSTRATION CONTRACT ACTIVITIES THROUGH SITE VISITS AND PROJECT REPORTS SITE VISITS ARE CONDUCTED FOR TWO REASONS FIRST, TO ENSURE THAT DEMONSTRATION INITIATIVES ARE BEING CARRIED OUT AS PROPOSED IN ACCORDANCE WITH THE APPROVED PLAN AND BUDGET SECOND, RAFI STAFF MEMBERS AIM TO ASSIST FARMER PARTICIPANTS TO OVERCOME BARRIERS AND TAKE

## Additional Data

(a) Name and address of

SAXAPAHAW, NC 27340

MEADOW LANE BEEF LLC

LOUISBURG, NC 27549

ORANGE COUNTY

101

571 LEONARD FARM ROAD

PARTNERSHIP FOR CHILDREN

120 PROVIDENCE RD SUITE

CHAPEL HILL, NC 27514

PO BOX 129

**Software Version: EIN:** 56-1704863 Name: RURAL ADVANCEMENT FOUNDATION

INTERNATIONAL - USA

8,000

9,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

Software ID:

or garnization	п аррпсавіс	9.4	cuo	(Sook) i i i v) appi albai)
or government			assistance	other)

(e) Amount of non-(f) Method of valuation cash

(g) Description of non-cash assistance

(h) Purpose of grant or assistance

FOSTERING FARMER

FOSTERING FARMER

FOSTERING FARMER

INNOVATION AND

INNOVATION AND

ENTREPRENEURSHIP IN RURAL COMMUNITIES

ENTREPRENEURSHIP IN RURAL COMMUNITIES

ENTREPRENEURSHIP IN

RURAL COMMUNITIES

INNOVATION AND

if applicable (book FMV appraisal organization grant

(d) Amount of cash

COZI FARM LLC 46-4638702 8,000

**(b)** EIN

26-3957762

56-1844192

(b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance or government other) assistance 8.000 PIEDMONT BIOFARM LLC 47-2560968 FOSTERING FARMER 220 LORAX LANE BOX 6 INNOVATION AND PITTSBORO, NC 27312 ENTREPRENEURSHIP IN RURAL COMMUNITIES 8.000 27-4967132 FOSTERING FARMER INNOVATION AND

FOSTERING FARMER

lentrepreneurship in RURAL COMMUNITIES

INNOVATION AND

BACKYARD FARM AND VINEYARD 120 LOUIS WILLIAMS RD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of

LILLY DEN FARM

GOLDSTON, NC 27252

5260 GOLDSTON GLENDON RDI

46-5758569

ENTREPRENEURSHIP IN HENDERSON, NC 27537 RURAL COMMUNITIES

8.000

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 7,896 PRODICAL FARM LLC 27-3075473 FOSTERING FARMER 4720 BAHAMA RD INNOVATION AND ROUGEMONT, NC 27572 ENTREPRENEURSHIP IN RURAL COMMUNITIES 9,669 46-1913707 FOSTERING FARMER

SUN RAISED FARMS PO BOX 544

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OAKBORO, NC 28129

INNOVATION AND

ENTREPRENEURSHIP IN RURAL COMMUNITIES

47-4782482 5,880 FOSTERING FARMER BUCK NAKED FARM

IRURAL COMMUNITIES

INNOVATION AND

PO BOX 28346

RALEIGH, NC 27559 ENTREPRENEURSHIP IN

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government other) assistance 8.000 DUCK DADDY RANCH LLC 47-5009236 FOSTERING FARMER 3843 TEAGUE FARM RD INNOVATION AND SEAGROVE, NC 27341 ENTREPRENEURSHIP IN RURAL COMMUNITIES 8.000 HUCKLEBERRY TRAIL FARM 45-4632845 FOSTERING FARMER LLC INNOVATION AND PO BOX 546 ENTREPRENEURSHIP IN PITTSBORO, NC 27312 RURAL COMMUNITIES

FOSTERING FARMER

ENTREPRENEURSHIP IN RURAL COMMUNITIES

INNOVATION AND

8.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

RED TAIL GRAINS

5652 CHURCH RD

GRAHAM, NC 27253

47-3940679

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization arant cash or assistance or government other) assistance TAYLOR FISH FARM 59-3833865 8.000 FOSTERING FARMER

**IENTREPRENEURSHIP IN** 

RURAL COMMUNITIES

PARTNERSHIP INNOVATION AND 3221 LONESOME RD ENTREPRENEURSHIP IN CEDAR GROVE, NC 27231

Form 990. Schedule I. Part II. Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501 FOSTER ST

DURHAM, NC 27701

THE DURHAM FARMERS 77-0592102 9.000

IRURAL COMMUNITIES FOSTERING FARMER MARKET INNOVATION AND

efile GRAPH	DLN:	93493207005217						
SCHEDUL	ΕO	Supplement	Supplemental Information to Form 990 or 990-EZ					
(Form 990 or EZ) Department of the T	ions on n.	2016 Open to Public Inspection						
Internal Revenue & Name of the org RURAL ADVANCEM INTERNATIONAL -	ENT FOUND				Employer identif	fication number		
990 Schedule	e O, Sup	pplemental Information	n					
Return Reference								
FORM 990, PART VI, SECTION B,	UDIT FI	RIBUTED TO THE IRER/ AUDIT FINA FINANCIAL STATM	NCE CHAIR					

LINE 11B

FORM 990

Return Explanation
Reference

FORM 990, COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY IS MONITORED WHENEVER A SITUATION ARISES T PART VI, HAT COULD BE A POTENTIAL CONFLICT OF INTEREST ADDITIONALLY, DISCLOSURES BY STAFF AND BOAR SECTION B, D MEMBERS ARE MADE ANNUALLY

Return Explanation
Reference

FORM 990,	THE ORGANIZATION'S SALARY STRUCTURE INTEGRATES COMPARABILITY DATA OBTAINED FROM A MARKET C
PART VI,	OMPENSATION STUDY COMMISSIONED AT THE END OF 2010 THE STUDY WAS BASED ON MARKET RATES FOR
SECTION B,	COMPARABLE JOBS IN COMPARABLE ORGANIZATIONS (SIZE, NONPROFIT, ETC ) THE CURRENT STRUCTUR
LINE 15	E WAS REVIEWED AND ADOPTED BY THE BOARD OF DIRECTORS IN OCTOBER 2012

Return Explanation
Reference

LINE 19

FORM 990, PART VI, SECTION C. GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

Return Explanation
Reference

FORM 990,	CONTRACTOR SERVICES PROGRAM SERVICE EXPENSES 360,716 MANAGEMENT AND GENERAL EXPENSES 2,5
PART IX,	55 FUNDRAISING EXPENSES 1,955 TOTAL EXPENSES 365,226
LINE 11G	

Return Explanation

FORM 990, PART XII, INE 2C

THE AUDIT COMMITTEE OVERSEES THE SELECTION OF THE AUDITORS AND THE AUDIT OF THE FINACIAL S
TATEMENTS OF THE ORGANIZATION NO CHANGES HAVE BEEN MADE FROM THE PRIOR YEAR

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493207005217 OMB No 1545-0047 **SCHEDULE R Related Organizations and Unrelated Partnerships 2016** (Form 990) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** RURAL ADVANCEMENT FOUNDATION INTERNATIONAL - USA 56-1704863 Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. Part I **(f)** Direct controlling (a)
Name, address, and EIN (if applicable) of disregarded entity (b) (c) Legal domicile (state (d) (e) Primary activity Total income End-of-year assets or foreign country) entity

Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.		anization answered	l "Yes" on Form 99	00, Part IV, line 34	because it had one or m	ore	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))			g) on 512 (13) rolled city?
(1)RURAL ADVANCEMENT INSTITUTE PO BOX 640	SUPPORTING ORGANIZATION	NC	501 (C)(3)	509 (A) 3 TYPE III	RURAL ADVANCEMENT FOUNDATION INTERNATIONAL	Yes	No No
PITTSBORO, NC 27312 06-1656357							
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		1 // // //	1 4 5 1		1 45	1 40	1 .			1 ()	1 4		
(a) Name, address, and EIN of related organization		<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predominant income(related unrelated, excluded from tax under sections 512-	Share of total income		(H Disprop alloca	rtionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	i) ral or aging ner?	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
											1	1 1	
Identification of Related Organiza because it had one or more related or						zation ansv	vered "Yes	" on Fo	orm 9!	90, Part IV,	line	34	
		a corporation	(c) egal micile or foreign	st during th	(d) controlling entity  Typ (C co	(e)	vered "Yes  (f) Share of total income	Share	(g) of end- year assets	(1	ı) ntage	Se (1	(I) ection 512 3) control entity?
because it had one or more related or  (a)  Name, address, and EIN of	rganizations treated as	a corporation	on or trus (c) egal micile	st during th	(d) controlling entity  Typ (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	<ol><li>control</li></ol>
because it had one or more related or  (a)  Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity  Typ (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related or  (a)  Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity  Typ (C co	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related or  (a)  Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity  Typ	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?
because it had one or more related or  (a)  Name, address, and EIN of	rganizations treated as	a corporation	(c) egal micile or foreign	st during th	(d) controlling entity  Typ	(e) e of entity orp, S corp,	<b>(f)</b> Share of total	Share	(g) of end- year	of- Perce	ı) ntage	Se (1	3) control entity?

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.											
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No								
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?											
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No								
<b>b</b> Gift, grant, or capital contribution to related organization(s)	1b		No								
c Gift, grant, or capital contribution from related organization(s)	1c		No								
d Loans or loan guarantees to or for related organization(s)	1d		No								
e Loans or loan guarantees by related organization(s)	1e		No								
f Dividends from related organization(s)	1f		No								
g Sale of assets to related organization(s)	<b>1</b> g		No								
h Purchase of assets from related organization(s)	1h		No								
i Exchange of assets with related organization(s)	1i		No								
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No								
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No								
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No								
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No								
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No								
o Sharing of paid employees with related organization(s)	10		No								

· · · · · · · · · · · · · · · · · · ·	.	
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	11	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	No
o Sharing of paid employees with related organization(s)	10	No
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p	No
q Reimbursement paid by related organization(s) for expenses	<b>1</b> q	No

No 1s No 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (a) Name of related organization (b) Transaction (d) (c) Amount involved Method of determining amount involved type (a-s)

Page **3** 

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

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

<b>(a)</b> Name, address, and EIN of entity	<b>(b)</b> Primary activity	l domicilo l	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) (h) Share of Disproprtion allocations assets		ite )	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
									_	Schedul	e R (Forn	1 99	0) 2016

Schedule R (Form 990) 2016 Page **5** Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation PART II, IDENTIFICATION OF RELATED NAME OF RELATED ORGANIZATION RURAL ADVANCEMENT INSTITUTE DIRECT CONTROLLING ENTITY RURAL ADVANCEMENT FOUNDATION INTERNATIONAL -USA SCHEDULE R. PART II ALL ACTIVITIES OF THE RURAL ADVANCEMENT INSTITUTE WERE TRANSFERRED TO RAFI AS OF 12/31/12 AS SUCH, RAI HAD NO TAX-EXEMPT ORGANIZATIONS ACTIVITY DURING 2016, AND THERE WERE NO RELATED PARTY TRANSACTIONS TO DISCLOSE

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