DLN: 93493218007039 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Department of the ► Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable PROFESSIONAL DAIRY MANAGERS OF PA ☐ Address change 23-3066186 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite 500 NORTH THIRD STREET STE 9B E Telephone number ☐ Amended return ☐ Application pending (877) 326-5993 City or town, state or province, country, and ZIP or foreign postal code HARRISBURG, PA  $\,$  17101 G Gross receipts \$ 432,301 F Name and address of principal officer H(a) Is this a group return for DOUG HARBACH ☐Yes **☑**No subordinates? 235 LOGAN MILLS RD H(b) Are all subordinates <u>LOGANTOWN, PA 17747</u> ☐ Yes ☐No included? I Tax-exempt status 4947(a)(1) or □ 527 ☐ 501(c)(3) **☑** 501(c)(6) **◄** (insert no) If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► HTTP //WWW PDMP ORG/ L Year of formation 2000 M State of legal domicile PA **K** Form of organization  $\square$  Corporation  $\square$  Trust  $oldsymbol{
oldsymbol{V}}$  Association  $\square$  Other  $\triangleright$ Summary 1 Briefly describe the organization's mission or most significant activities PDMP IS THE ORGANIZATION LEAD BY DAIRY PRODUCERS FOR DAIRY PRODUCERS WORKING TO ADVANCE THE DAIRY INDUSTRY THROUGH IMPROVED PRODUCTIVITY AND PROFITABILITY ADVOCATING FOR DAIRY PRODUCERS WITH A STRONG VOICE TO CONSUMERS AND DECISION MAKERS EDUCATING DAIRY PRODUCERS ON TECHNOLOGIES AND METHODS TO INCREASE PRODUCTIVITY AND PROFITABILITY EDUCATING DAIRY FARMERS ON ENVIRONMENTAL IMPROVEMENTS, ANIMAL WELFARE AND SAFETY PRACTICES REPRESENTING DAIRY PRODUCERS ON LABOR, PRICING, MISLEADING LABELING AND OTHER ISSUES THAT IMPACT PROFITABILITY Activities & Governance PROMOTING THE DAIRY INDUSTRY TO RAISE AWARENESS OF THE POSITIVE PRODUCTION AND SAFETY OF OUR WHOLESOME DAIRY PRODUCTS ADVANCING RESEARCH THAT SUPPORTS THE IMPROVED PRODUCTION AND PROFITABILITY OF PDMP MEMBERS Check this box ▶ 🔲 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . . 3 4 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) . . . 6 16,500 7a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 13,850 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 126,863 149,287 9 Program service revenue (Part VIII, line 2g) . 306,607 300,359 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 27,592 -17,345 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 432,301 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 461,062 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3). 9,250 10,115 14 Benefits paid to or for members (Part IX, column (A), line 4) . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 382,243 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 425.775 435,025 392,358 18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) 39,943 19 Revenue less expenses Subtract line 18 from line 12 . 26,037 Net Assets or Fund Balances End of Year Beginning of Current Year 20 Total assets (Part X, line 16) . 454,005 493,948 21 Total liabilities (Part X, line 26) . Net assets or fund balances Subtract line 21 from line 20 . 454,005 493,948 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-07-01 Signature of officer Sign Here DOUG HARBACH PRESIDENT Type or print name and title Print/Type preparer's name Preparer's signature Check 🗹 ıf P00299822 Paid self-employed Firm's name 

KELLER FINANCIAL GROUP INC Firm's EIN ▶ 25-1821312 Preparer Use Only Firm's address ► 3815 MARKET STREET Phone no (717) 516-0700 CAMP HILL, PA 170114328 May the IRS discuss this return with the preparer shown above? (see instructions) . ✓ Yes 🗆 No For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2018)

Form	990 (2018)										Page <b>2</b>
Pa	rt III Statement	of Program Service	Accomplis	hments							
	Check If Sche	edule O contains a respoi	nse or note to a	any line in this Part III							✓
1	Briefly describe the	organization's mission									
IMPR MAKI FARN PRIC THE	OVED PRODUCTIVITY ERS EDUCATING DAIR MERS ON ENVIRONMEI ING, MISLEADING LAE POSITIVE PRODUCTIC	ON LEAD BY DAIRY PRO AND PROFITABILITY AI Y PRODUCERS ON TECH NTAL IMPROVEMENTS, A BELING AND OTHER ISSI ON AND SAFETY OF OUR ABILITY OF PDMP MEMB	DVOCATING FO NOLOGIES ANI NIMAL WELFAF JES THAT IMPA WHOLESOME I	R DAIRY PRODUCERS ' D METHODS TO INCRE/ RE AND SAFETY PRACTI ACT PROFITABILITY PRO	WITH A STROM ASE PRODUCTI CES REPRESE OMOTING THE	NG VOICE TO IVITY AND PR NTING DAIRY DAIRY INDUS	CONSU OFITAE PRODU STRY TO	IMERS BILITY JCERS D RAIS	AND D EDUCA ON LA E AWA	ECISI TING BOR, RENE	ON DAIRY
2	_	undertake any significar		- <i>'</i>	hıch were not	listed on					
		or 990-EZ?					•	L	Yes	✓	No
	•	ese new services on Sch									
3	Did the organization	cease conducting, or ma	ike significant	changes in how it cond	ucts, any prog	ram			_	_	_
	services?								☐ Ye	s 🛂	∐ No
	If "Yes," describe the	ese changes on Schedule	0								
4	Section 501(c)(3) ar	ation's program service nd 501(c)(4) organization nue, if any, for each prog	ns are required	to report the amount of						nses	
	(Code	) (Expenses \$	312,664	ıncludıng grants of \$	10,1	15 ) (Revenue s	<del></del>		300,359	')	
	See Additional Data										
4b	(Code	) (Expenses \$		including grants of \$		) (Revenue s	\$			)	
	See Additional Data										
4c	(Code	) (Expenses \$		ıncludıng grants of \$		) (Revenue s	\$			)	
	See Additional Data										
4d	Other program servi	ices (Describe in Schedul	e O )								
	/ <b>-</b>	i i			\ /B				`		
	(Expenses \$	inciu	ding grants of	\$	) (Revenu	e \$			)		

Form	990 (2018)			Page <b>3</b>
Par	t IV Checklist of Required Schedules			
_		$\square$	Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	<u> </u>	No
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u> </u>	No
	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 2	3	<u> </u>	No
	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		
	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5	Yes	
	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	<u> </u>	No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	No
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
<b>12</b> a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	 	No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	$\overline{}$	No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No

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

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

**20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

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

column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . . .

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,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

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Part IV

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Part V

Checklist of Required Schedules (continued)

Νo

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Nο

Nο

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Yes

Yes

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			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		
26	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? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M $\cdot$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			

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

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

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

Check if Schedule O contains a response or note to any line in this Part V .

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

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

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.

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

14a

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . . No

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O. 14b

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Nο

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Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N . . . . .

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Form 990 (2018)				Page <b>6</b>
Part VI  Governance, Management, and Disclosure For each "Yes" response to lines 2 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched Check if Schedule O contains a response or note to any line in this Part VI	lule O	See instructions	,	lines
Section A. Governing Body and Management				
			Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a	15		
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				

	ction At Governing Body and Hundgement			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 15			
	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 15			
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	Yes	
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
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	•
			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		No
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	

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
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	<b>8</b> a	Yes	
b	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	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	∍.)	
			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		No
Ь	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	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	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
Ь	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?	4.51		
_	ction C Disclosure	16b		

			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		No
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	
С	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		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	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	<b>'</b>	'	
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-A if applicable), 990, and 990-T (501(c)(3)s			

b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	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		No
14	Did the organization have a written document retention and destruction policy?	14		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	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			
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-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website $\square$ Another's website $ ewline  olimits$ Upon request $\square$ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►NOVAK STRATEGIC ADVISORS 500 N 3RD ST SUITE 9B HARRISBURG, PA 17101 (717) 234-9909			
		F	orm <b>99</b>	<b>0</b> (2018

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 persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

• 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 🗹 Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization organizations from the for related (W- 2/1099-(W- 2/1099organization and individual to or director MISC) MISC) organizations related lighest compensated nstitutional Trust⊌a below dotted employ organizations 큯 line) trustee 8 (1) NOVAK STRATEGIC ADVISORS 0 EXECUTIVE DI (2) DOUG HARBACH Х Χ 0 (3) FRANK GRAYBILL Х Χ TREASURER (4) BRETT REINFORD Х 0 VICE PRESIDE (5) KIRK SATTAHAHN Х 0 (6) CANDICE DOTTERER WHITE Х ..... DIRECTOR (7) DIANE HARTMAN 0 DIRECTOR (8) MATT WANNER Х 0 DIRECTOR (9) LUCAS WAYBRIGHT Х Х SECRETARY (10) JOHN WILLIAMSON 0 DIRECTOR (11) JOSHUA BIDDLE Х 0 (12) JESSICA SLAYMAKER DIRECTOR (13) RAECHEL SATTAZAHN 0 DIRECTOR (14) JOSIE RISER Х 0 (15) LISA HOLDEN DIRECTOR

Form 990 (	2018)										Page <b>8</b>
Part VII	Section A. Officers, Direct	tors, Trustees	, Key l	Emp	loye	es,	and I	High	nest Compensate	d Employees (col	ntinued)
	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, ι in of	t che unle: ficer	and a	on	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(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	2/1099-MISC)	2/1099-MISC)	organization and related organizations
					T	1					

1b 9	Sub-Total						<b>&gt;</b>				
c T	otal from continuation sheets to Pa	art VII <b>, Section</b>	Α				▶ [				
d٦	otal (add lines 1b and 1c)						<b>&gt;</b>				
2	Total number of individuals (including of reportable compensation from the		l to thos	e list	ed a	bove	e) who	rece	eived more than \$1	00,000	

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

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

services rendered to the organization? If "Yes," complete Schedule J for such person .

(A)

Name and business address

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

line 1a? If "Yes," complete Schedule J for such individual .

Section B. Independent Contractors

compensation from the organization >

3

4

5

1b Sub-Total						<b>&gt;</b>			'		
c Total from continuation sheets to Pa	c Total from continuation sheets to Part Ⅵ/, Section A ▶										
d Total (add lines 1b and 1c)						•					
	·										

			1			
1b Sub-Total			 	<b>&gt;</b>		
c Total from continuation sheets to Pa	art VII <b>, Section</b>	Α		▶		
d Total (add lines 1b and 1c)			 	•		

th Sub-Total										
Total number of individuals (including but not limited to those listed above) who received more than \$100,000										

Yes

3

4

5

(B)

Description of services

No

No

No

Νo

(C)

Compensation

Form 990 (2018)

Part		Statement of	Revenue									- rage 3
		Check if Schedule	O contains	a respoi	nse or note to any					<u></u>	<u> </u>	🗆
							<b>A)</b> revenue	e fu	(B) lated or xempt inction	(C) Unrela busine reven	ted ess	(D) Revenue excluded from ax under sections 512 - 514
	18	Federated campaign	ıs	1a				re	evenue			512 - 514
tributions, Gifts, Grants Other Similar Amounts		<b>b</b> Membership dues .		1b	28,350							
Gra mot	,	c Fundraising events		1c								
rs, Pa	,	d Related organization	ns	1d								
<u>i</u>	,	e Government grants (co	ntributions)	1e	120,937							
ns, Sin	1	F All other contributions, and similar amounts no	gifts, grants,									
utic Per		above	it iliciuded	1f								
를 등	!	9 Noncash contributio in lines 1a - 1f \$	ns ıncluded									
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a-	1f	<del>.</del> .	•		4.40.207					
<u> </u>					Business	Code	149,287	Τ				<del>                                     </del>
H.	<b>2</b> a	SEED RESEARCH INCOM	E			611710	1	15,050	115,	050		
4.6	b	ADVERTISING INCOME				541700		70,125	70,	125		
بر حد	c	CONFERENCE REVENUE						56,880	56,	880		
er vi	d	PREMIER PARTNER INCO	ME			611710		37,500	37,	500		
S	е	ADVERTISING INCOME-C	DUTSIDE			541800		16,500			16,50	0
Program Service Revenue	f	All other program ser	vice revenue					4,304	4,	304		
ĞΪ		<b>Total.</b> Add lines 2a-2f				300,359						
		Investment income (in			terest, and other	1						
	9	similar amounts)		•	•	•	-17,34	.5	-17,345			
		Income from investme Royalties			nd proceeds	<b>-</b>						
	(i) Real (ii) Pers											
	6a	Gross rents										
	ь	Less rental expenses				-						
	C	: Rental income or (loss)										
	c	Net rental income or			-							
	7-	Gross amount	(ı) Securit	ies	(II) Other	_						
	/ d	from sales of assets other										
		than inventory										
	b	Less cost or other basis and										
	,	sales expenses Gain or (loss)				4						
		Net gain or (loss)			<b>•</b>	┪						
	8a	Gross income from fu		- 1	<u> </u>							
Jue		(not including \$ contributions reported		of								
e e		See Part IV, line 18				_						
ă.		Less direct expenses : Net income or (loss) i		<b>b</b> L	nts							
Other Revenue		Gross income from ga	amıng actıvıtı	-								
0		See Part IV, line 19		a								
	ь	Less direct expenses		ь		-						
		: Net income or (loss) i		activitie	es <b>&gt;</b>							
	10	Gross sales of inventogrees										
				a								
	b	Less cost of goods so	old	ь								
-	C	Net income or (loss) i		invento	Business Code							
-	11		Revenue		Business Code	-						
	b	•		$\rightarrow$								
	c	:										
		All other revenue .				_						
		Total. Add lines 11a-			•							
	12	Total revenue. See	Instructions	• •	• • •		432,30	1	266,514		16,500	
												Form <b>990</b> (2018)

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)

Form 990 (2018) Page 10 Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)  $\overline{\mathbf{V}}$ Check if Schedule O contains a response or note to any line in this Part IX . (B) (C) Do not include amounts reported on lines 6b, (D) (A) Management and Program service Total expenses 7b, 8b, 9b, and 10b of Part VIII. Fundraisingexpenses expenses general expenses 1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 10,115 10,115 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees . . 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . . 9 Other employee benefits . 10 Payroll taxes . . 11 Fees for services (non-employees) 110,710 31,016 79.694 a Management . . . **b** Legal . 4,550 4.550 c Accounting . . . . **d** Lobbying . . . . . . . e Professional fundraising services See Part IV, line 17 f Investment management fees . g Other (If line 11g amount exceeds 10% of line 25, column 104,292 104,292 (A) amount, list line 11g expenses on Schedule O) 3,870 3,870 12 Advertising and promotion . 43,036 43,036 13 Office expenses . 1,932 1,932 14 Information technology 15 Royalties . 16 Occupancy 1,522 1,522 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 110,767 110,767 19 Conferences, conventions, and meetings . **20** Interest . . . . 21 Payments to affiliates . . . 22 Depreciation, depletion, and amortization . 1,564 1,564 23 Insurance . 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O ) b c d e All other expenses 392,358 312,664 79,694 25 Total functional expenses. Add lines 1 through 24e

Form **990** (2018)

Forn	n 990	(2018)				Page <b>11</b>
P	art X	Balance Sheet				
		Check if Schedule O contains a response or not	e to any line in this Part IX			🗆
				<b>(A)</b> Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		186,874	1	247,323
	2	Savings and temporary cash investments .	[		2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
ts	5	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L		5		
		section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organiza- voluntary employees' beneficiary organizations Part II of Schedule L	n 4958(c)(3)(B), and ations of section 501(c)(9) (see instructions) Complete		6	
ssets	7	Notes and loans receivable, net	_		7	
ΑS	8	Inventories for sale or use			8	
	9 10a	Prepaid expenses and deferred charges  Land, buildings, and equipment cost or other	10a	1,000	9	1,000
	h	basis Complete Part VI of Schedule D  Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities •	200	266.131	11	245,625
	12	Investments—other securities See Part IV, line	,,	200,101	12	210,020
	13	Investments—program-related See Part IV, line	<b>⊢</b>		13	
	14	Intangible assets	<b>⊢</b>		14	
	15	Other assets See Part IV, line 11		15		
	16	Total assets.Add lines 1 through 15 (must equ	_	454,005	16	493,948
	17	Accounts payable and accrued expenses		454,000	17	+95,940
		• •			18	
	18	Grants payable		19		
	19	Deferred revenue	· · -  -		20	
	20	Tax-exempt bond liabilities	<del> -</del>			
es	21	Escrow or custodial account liability Complete F	<u> </u>		21	
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee				
<u>.e</u>		persons Complete Part II of Schedule L	_		22	
_	23	Secured mortgages and notes payable to unrela	·		23	
	24	Unsecured notes and loans payable to unrelated	·		24	
	25	Other liabilities (including federal income tax, pland other liabilities not included on lines 17 - 24 Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		0	26	0
ces		Organizations that follow SFAS 117 (ASC 9 complete lines 27 through 29, and lines 33				
Fund Balance	27	Unrestricted net assets		454,005	27	493,948
ä	28	Temporarily restricted net assets			28	
Ē	29	Permanently restricted net assets	<u> </u>		29	
		Organizations that do not follow SFAS 117				
ō	30	check here ► □ and complete lines 30 th Capital stock or trust principal, or current funds			30	
ets	31	Paid-in or capital surplus, or land, building or ed	<u> </u>		31	
Assets or	32	Retained earnings, endowment, accumulated in	· · ·		32	
	33	Total net assets or fund balances	· · ·	454,005	33	493,948
Net	33	Total net assets of fund palatices		151,005		100,040

34

Total liabilities and net assets/fund balances

454,005

34

493,948 Form **990** (2018)

Form	990 (2018)				Page <b>12</b>
Pa	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			432,301
2	Total expenses (must equal Part IX, column (A), line 25)	2		-	392,358
3	Revenue less expenses Subtract line 2 from line 1	3			39,943
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			454,005
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			493,948
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
	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		No
	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		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil Audit Act and OMB Circular A-133?	ngle	3a		
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	red	3b		

3b

### **Additional Data**

Software ID:

**Software Version:** 

**EIN:** 23-3066186

Name: PROFESSIONAL DAIRY MANAGERS OF PA

Form 990 (2018)

#### Form 990, Part III, Line 4a:

PDMP PROVIDES CUTTING-EDGE EDUCATIONAL PROGRAMS YOU GET CONTENT THAT YOU TAKE HOME AND PUT TO WORK THE NEXT DAY AND YOU HELP BUILD THE NEXT GENERATION THROUGH SUPPORT OF THEIR EDUCATIONAL PROGRESS ISSUES FORUMS - MEMBERS RECEIVE A DEEP DISCOUNT ON REGISTRATION FEES FOR PDMP'S THREE ISSUES FORUMS HELD EACH YEAR THE TOPICS GIVE A "MEAT & POTATOES" EDUCATIONAL PROGRAM ON ISSUES THAT AFFECT PROFITABILITY WITH SPEAKERS WHO ARE RECOGNIZED FOR THEIR KNOWLEDGE AND EXPERTISE DAIRY SUMMIT MEMBERS CAN TAKE ADVANTAGE OF PDMPS PARTNERSHIP WITH THE PA DAIRY STAKEHOLDERS TO ATTEND THIS ONCE-A-YEAR CONFERENCE THAT BRINGS TOGETHER THE BEST OF PENNSYLVANIAS DAIRY INDUSTRY THE PROGRAM COMPRESSES DOZENS OF HIGH-QUALITY MOTIVATIONAL AND NUTS-AND-BOLTS PRESENTATIONS INTO A DAY-AND-A-HALF INTERNSHIPS MEMBERS DEVELOP THE NEXT GENERATION OF TOP DAIRY PRODUCERS BY WORKING WITH THE CENTER FOR DAIRY EXCELLENCE AND PA DAIRYMEN'S ASSOCIATION TO OFFER "ON-FARM" SUMMER INTERNSHIPS TO STUDENTS SCHOLARSHIPS MEMBERS SUPPORT PDMP SCHOLARSHIPS THAT ALLOW STUDENTS TO ATTEND A SPECIAL LEADERSHIP SCHOOL, AND REWARD INTERNSHIP EXPERIENCES

#### Form 990, Part III, Line 4b: A DAY-AND-A-HALF INTERNSHIPS MEMBERS DEVELOP THE NEXT GENERATION OF TOP DAIRY PRODUCERS BY WORKING WITH THE CENTER FOR DAIRY EXCELLENCE AND PA DAIRYMEN'S ASSOCIATION TO OFFER "ON-FARM" SUMMER INTERNSHIPS TO STUDENTS. SCHOLARSHIPS MEMBERS SUPPORT PDMP SCHOLARSHIPS THAT ALLOW.

STUDENTS TO ATTEND A SPECIAL LEADERSHIP SCHOOL, AND REWARD INTERNSHIP EXPERIENCES

# Form 990, Part III, Line 4c: THE 2016 PDMP CORN SILAGE HYBRID TESTING PROGRAM WAS EXPANDED TO GENERATE MORE EXTENSIVE DATA, INCLUDING STARCH DIGESTIBILITY, FOR HYBRID

REGION OF THE US SO IT HAS BECOME INCREASINGLY IMPORTANT FOR DAIRY PRODUCERS THROUGHOUT

PERFORMANCE EVALUATIONS PRODUCERS USE TO MAKE SEED PURCHASING DECISIONS. THIS NON- BIASED RESEARCH IS NOW THE ONLY PROJECT OF ITS KIND IN THIS

**SCHEDULE C** 

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

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

DLN: 93493218007039

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Go to www.irs.gov/Form990 for instructions and the latest information.

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

Open to Public Inspection

f the	Section 527 organizations Comple e organization answered "Yes" o Section 501(c)(3) organizations tha Section 501(c)(3) organizations tha	501(c)(3)) organizations Complete Parts te Part I-A only n Form 990, Part IV, Line 4, or Form 9 t have filed Form 5768 (election under s t have NOT filed Form 5768 (election un n Form 990, Part IV, Line 5 (Proxy Tax	1 <b>90-EZ, Part VI, III</b> section 501(h)) Conder section 501(h	ne <b>47 (Lobbying Activi</b> Omplete Part II-A Do no I)) Complete Part II-B [	ties); t com Do no	nplete Part II-l ot complete Pa	art II-A
Pro	xy Tax) (see separate instruction Section 501(c)(4), (5), or (6) organi	s), then	k) (See Separate i	nstructions, or Form a	13U-E	.z, Part <b>v</b> , IIII	e 330
Nar	me of the organization DESSIONAL DAIRY MANAGERS OF PA	casionio Gompieto Farem		23-3066186		ification nun	ıber
Par	t I-A Complete if the orga	nization is exempt under section	on 501(c) or is			ation.	
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political car	mpaign activities in	n Part IV (see instruction	ns for	r definition of	
2	Political campaign activity expend	ditures (see instructions)		<b>&gt;</b>	\$		
3	Volunteer hours for political camp	paign activities (see instructions)					
Par	t I-B Complete if the orga	nization is exempt under section	n 501(c)(3).				
1	Enter the amount of any excise to	ax incurred by the organization under se	ection 4955	•	\$		
2	Enter the amount of any excise to	ax incurred by organization managers u	nder section 4955	•	\$		
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for t	this year?			☐ Yes	□ No
4a	Was a correction made?					☐ Yes	□ No
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the orga	nization is exempt under section	n 501(c), exc	ept section 501(c)(	3).		
1	Enter the amount directly expend	led by the filing organization for section	527 exempt funct	tion activities	\$		
2	Enter the amount of the filing org function activities	ganization's funds contributed to other o	rganizations for se	ection 527 exempt	\$		
3	Total exempt function expenditur	es Add lines 1 and 2 Enter here and o	n Form 1120-POL,	line 17b ►	\$		
4	Did the filing organization file For	rm 1120-POL for this year?				☐ Yes	□ No
5	organization made payments For of political contributions received	employer identification number (EIN) of reach organization listed, enter the am that were promptly and directly deliver ee (PAC) If additional space is needed,	ount paid from the ed to a separate p	e filing organization's fur political organization, suc	nds A	Also enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid froi filing organization's funds If none, ente -0-		(e) Amount contributions and promp directly delives separate programmers and contributions are separated.	or received otly and vered to a political of If none,
1							
2							
3							
4							
5							
6					$\dashv$		
For P	Paperwork Reduction Act Notice, see	the instructions for Form 990 or 990-F7.	Cat	No E00945 Schodula	C (E	arm 000 or 00	0_E7\ 2018

Grassroots ceiling amount

expenditure next year?

Return Reference

Part IV

activity

1

(b)

Amount

(a)

No

Yes

<u>4</u>

#### Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? b 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? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 1 No 1 2 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? No Did the organization agree to carry over lobbying and political expenditures from the prior year? No 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 С 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

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

Explanation

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

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

the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

DLN: 93493218007039 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. 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 ▶ Go to www.irs.gov/Form990 for the latest information. Treasurv Internal Revenue Service Name of the organization Employer identification number PROFESSIONAL DAIRY MANAGERS OF PA 23-3066186 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (2)(4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . 2 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018

Schedule I (Form 990) 2018					Page <b>2</b>
Part III Grants and Other Assistance t Part III can be duplicated if addit		als. Complete if the orga	nızatıon answered "Yes'	on Form 990, Part IV, line 22	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) ALL SCHOLARSHIPS		10,115			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
Part IV Supplemental Information	<b>tion.</b> Provide the inf	ormation required in F	Part I, line 2; Part III	, column (b); and any other a	dditional information.

Schedule I (Form 990) 2018

efile GRAPHIC p	rint - DO NOT PROCESS As Filed Data -		DLN: 93493218007039				
SCHEDULE O	0	- t- F 000 000 F7	OMB No 1545-0047				
(Form 990 or 990- EZ)	Complete to provide information for Form 990 or 990-EZ or to provide	tal Information to Form 990 or 990-EZ  by ovide information for responses to specific questions on provide any additional information.					
Department of the Treasury	► Attach to Form ► Go to <u>www.irs.gov/Form99</u>		Open to Public Inspection				
Name! Betheronganizat		Employe	r identification number				
PROFESSIONAL DAIRY MA	ANAGERS OF PA	23-30661	86				
990 Schedule O,	Supplemental Information						
Return Reference		Explanation					
FORM 990 - ORGANIZATION'S MISSION	PDMP IS THE ORGANIZATION LEAD BY DAIRY PRED DAIRY INDUSTRY THROUGH IMPROVED PROD DUCERS WITH A STRONG VOICE TO CONSUMER ECHNOLOGIES AND METHODS TO INCREASE PRON ENVIRONMENTAL IMPROVEMENTS, ANIMAL VOICERS ON LABOR, PRICING, MISLEADING LABOR ROMOTING THE DAIRY INDUSTRY TO RAISE AWAR WHOLESOME DAIRY PRODUCTS ADVANCING FOR OFITABILITY OF PDMP MEMBERS	UCTIVITY AND PROFITABILITY ADVOC S AND DECISION MAKERS EDUCATING ODUCTIVITY AND PROFITABILITY EDU WELFARE AND SAFETY PRACTICES RE ELING AND OTHER ISSUES THAT IMPA ARENESS OF THE POSITIVE PRODUCT	CATING FOR DAIRY PRO G DAIRY PRODUCERS ON T ICATING DAIRY FARMERS EPRESENTING DAIRY PRO CT PROFITABILITY P TION AND SAFETY OF OU				

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	PDMP PROVIDES CUTTING-EDGE EDUCATIONAL PROGRAMS YOU GET CONTENT THAT YOU TAKE HOME AND PUT TO WORK THE NEXT DAY AND YOU HELP BUILD THE NEXT GENERATION THROUGH SUPPORT OF THEIR EDUCATIONAL PROGRESS ISSUES FORUMS - MEMBERS RECEIVE A DEEP DISCOUNT ON REGISTRATION FEES FOR PDMP'S THREE ISSUES FORUMS HELD EACH YEAR THE TOPICS GIVE A "MEAT & POTATOES" EDUCATIONAL PROGRAM ON ISSUES THAT AFFECT PROFITABILITY WITH SPEAKERS WHO ARE RECOGNIZED FOR THEIR KNOWLEDGE AND EXPERTISE DAIRY SUMMIT MEMBERS CAN TAKE ADVANTAGE OF PDMPS PARTNERSHIP WITH THE PADAIRY STAKEHOLDERS TO ATTEND THIS ONCE-A-YEAR CONFERENCE THAT BRINGS TOGETHER THE BEST OF PENNSYLVANIAS DAIRY INDUSTRY THE PROGRAM COMPRESSES DOZENS OF HIGH-QUALITY MOTIVATIONAL AND NUTS-AND-BOLTS PRESENTATIONS INTO A DAY-AND-A-HALF INTERNSHIPS MEMBERS DEVELOP THE NEXT GENERATION OF TOP DAIRY PRODUCERS BY WORKING WITH THE CENTER FOR DAIRY EXCELLENCE AND PADAIRYMEN'S ASSOCIATION TO OFFER "ON-FARM" SUMMER INTERNSHIPS TO STUDENTS SCHOLARSHIPS MEMBERS SUPPORT PDMP SCHOLARSHIPS THAT ALLOW STUDENTS TO ATTEND A SPECIAL LEADERSHIPS MEMBERS SUPPORT PDMP SCHOLARSHIPS THAT ALLOW STUDENTS TO ATTEND A SPECIAL LEADERSHIPS SCHOOL, AND REWARD INTERNSHIP EXPERIENCES

Return Explanation
Reference

FORM 990, MANAGEMENT DUTIES DELEGATED TO NOVAK STRATEGIC ADVISORS WHO DO ALL ADMIN, BOOKKEEPING AND PAGE 6, PART VI, LINE 3

Return Explanation
Reference

FORM 990, BYLAWS PROVIDE FOR THE BOARD OF DIRECTORS TO BE ELECTED BY VOTING MEMBERSHIP, WHICH OCCURS PAGE 6, EACH YEAR AT MEMBERSHIP MEETING A SLATE OF CANDIDATES IS PREPARED AND MEMBERS VOTE LINE 7A

Return Explanation
Reference

FORM 990,	COPY OF FORM 990 IS GIVEN TO TREASURER FOR REVIEW AND SAFE KEEPING FORM 990 IS ALSO REVIEWED AT
PAGE 6,	BOARD MEETING
PART VI,	
LINE 11B	

Return Explanation
Reference

FORM 990, YEARLY THE BOARD MUST SIGN FORM STATING NO CONFLICT IF THERE IS A CONFLICT NEW FORM IS SIGNED PAGE 6, ITEMIZING THE BENEFIT TO THEM OR FAMILY PART VI, LINE 12C

Return Explanation

Reference

FORM 990 ANNUAL REVIEW BY THE BOARD OF DIRECTORS OF THE CONTRACT WITH THE MANAGMENT TEAM

FORM 990, ANNUAL REVIEW BY THE BOARD OF DIRECTORS OF THE CONTRACT WITH THE MANAGMENT TEAM
PAGE 6,
PART VI,
LINE 15A

Return
Reference

Explanation

Explanation

LINE 15B

FORM 990, THERE ARE NO OTHER PAID EMPLOYEES OR OFFICERS OTHER THAN THE EXECUTIVE POSITION
PAGE 6,
PART VI,

Return Explanation
Reference
FORM 990. COPIES ARE AVAILABLE IN OFFICE IF SOMEONE ASKS FOR THEM

LINE 19

FORM 990, COPIES ARE AVAILABLE IN OFFICE IF SOMEONE ASKS FOR THEM PART VI.

990 Schedule O, Supplemental Information

Return

Reference	
FORM 990, PART IX,	AG WRITING AND PHOTO 6,425 0 0 BOOKKEEPING/PERKINS 5,214 0 0 CORN SILAGE 89,420 0 0 OTHER PROFESSIONAL FEES 3,233 0 0 TOTAL 104,292 0 0
LINE 11G	

Explanation