

For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form **990** (2018)

**Part III****Statement of Program Service Accomplishments**Check if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

DAIRY MANAGEMENT INC (DMI) WAS FORMED IN 1995 BY THE NATIONAL DAIRY PROMOTION AND RESEARCH BOARD (NDB) AND THE UNITED DAIRY INDUSTRY ASSOCIATION (UDIA) DMI IS A MANAGEMENT ORGANIZATION THAT INVESTS DAIRY PRODUCER CHECKOFF FUNDS IN STRATEGIC, COORDINATED MARKETING PROGRAMS DESIGNED TO INCREASE CONSUMPTION OF U S DAIRY PRODUCTS BOTH DOMESTICALLY AND INTERNATIONALLY THE FORMATION OF DMI HAS CREATED EFFICIENCIES, GAINED THROUGH THE ELIMINATION OF REDUNDANCIES AND THE POWER OF JOINT PLANNING

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

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported**4a** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

See Additional Data

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



















See Additional Data

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

See Additional Data

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )**4e** Total program service expenses ▶

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b>	No
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . . . .	<b>2</b>	No
<b>3</b> 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 . . . . .	<b>3</b>	No
<b>4 Section 501(c)(3) organizations.</b> 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 . . . . .	<b>4</b>	
<b>5</b> 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 . . . . .	<b>5</b>	No
<b>6</b> 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  . . . . .	<b>6</b>	No
<b>7</b> 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  . . . . .	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III  . . . . .	<b>8</b>	No
<b>9</b> 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  . . . . .	<b>9</b>	No
<b>10</b> 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  . . . . .	<b>10</b>	No
<b>11</b> If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI  . . . . .	<b>11a</b> Yes	
<b>b</b> Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  . . . . .	<b>11b</b>	No
<b>c</b> 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  . . . . .	<b>11c</b>	No
<b>d</b> 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  . . . . .	<b>11d</b> Yes	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X  . . . . .	<b>11e</b> Yes	
<b>f</b> 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  . . . . .	<b>11f</b>	No
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII  . . . . .	<b>12a</b> Yes	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  . . . . .	<b>12b</b>	No
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	No
<b>b</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  . . . . .	<b>14b</b> Yes	
<b>15</b> 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  . . . . .	<b>15</b>	No
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV  . . . . .	<b>16</b>	No
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . . .	<b>17</b>	No
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II . . . . .	<b>18</b>	No
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III . . . . .	<b>19</b>	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . .	<b>20a</b>	No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? . . . . .	<b>20b</b>	
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  . . . . .	<b>21</b> Yes	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  . . . . .	<b>22</b>	No

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

		Yes	No
<b>23</b>	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	Yes
<b>24a</b>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	24a	No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	24b	
<b>c</b>	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	
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .	24d	
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a	
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25b	
<b>26</b>	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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	26	No
<b>27</b>	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27	No
<b>28</b>	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)		
<b>a</b>	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a	No
<b>b</b>	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b	No
<b>c</b>	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? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c	No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	No
<b>30</b>	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
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31	No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32	No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> . . . . .	33	No
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes
<b>b</b>	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b	Yes
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36	
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37	No
<b>38</b>	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable . . . . .	1a	102
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . . . . .	1b	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	Yes

<b>2a</b> Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . . . . .		<b>2a</b>	298	<b>2b</b>	Yes	
<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
<b>3a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year? . . . .				<b>3a</b>		No
<b>b</b> If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O . . . .				<b>3b</b>		
<b>4a</b> 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)? . . . .				<b>4a</b>		No
<b>b</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>5a</b> Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . . .				<b>5a</b>		No
<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				<b>5b</b>		No
<b>c</b> If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . . . . .				<b>5c</b>		
<b>6a</b> 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? . . . .				<b>6a</b>		No
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? . . . . .				<b>6b</b>		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>						
<b>a</b> 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? . . . . .				<b>7a</b>		
<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided? . . . . .				<b>7b</b>		
<b>c</b> Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? . . . . .				<b>7c</b>		
<b>d</b> If "Yes," indicate the number of Forms 8282 filed during the year . . . . .				<b>7d</b>		
<b>e</b> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				<b>7e</b>		
<b>f</b> Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . .				<b>7f</b>		
<b>g</b> If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . . . .				<b>7g</b>		
<b>h</b> If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . . . . .				<b>7h</b>		
<b>8 Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . . . . .				<b>8</b>		
<b>9a</b> Did the sponsoring organization make any taxable distributions under section 4966? . . . .				<b>9a</b>		
<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . . .				<b>9b</b>		
<b>10 Section 501(c)(7) organizations.</b> Enter						
<b>a</b> Initiation fees and capital contributions included on Part VIII, line 12 . . . . .				<b>10a</b>		
<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				<b>10b</b>		
<b>11 Section 501(c)(12) organizations.</b> Enter						
<b>a</b> Gross income from members or shareholders . . . . .				<b>11a</b>		
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ) . . . . .				<b>11b</b>		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?				<b>12a</b>		
<b>b</b> If "Yes," enter the amount of tax-exempt interest received or accrued during the year				<b>12b</b>		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>						
<b>a</b> 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				<b>13a</b>		
<b>b</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 . . . . .				<b>13b</b>		
<b>c</b> Enter the amount of reserves on hand . . . . .				<b>13c</b>		
<b>14a</b> Did the organization receive any payments for indoor tanning services during the tax year? . . . . .				<b>14a</b>		No
<b>b</b> If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . .				<b>14b</b>		
<b>15</b> 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 . . . . .				<b>15</b>		No
<b>16</b> Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O . . . . .				<b>16</b>		No

**Part VI**

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

Check if Schedule O contains a response or note to any line in this Part VI ☒

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year		
	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>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
<b>2</b>	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?		No
<b>3</b>	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?		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
<b>6</b>	Did the organization have members or stockholders?		No
<b>7a</b>	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?		No
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	Yes	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	Yes	
<b>9</b>	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.		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates?		No
<b>10b</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?		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13.	Yes	
<b>12b</b>	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	Yes	
<b>13</b>	Did the organization have a written whistleblower policy?	Yes	
<b>14</b>	Did the organization have a written document retention and destruction policy?	Yes	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official.	Yes	
<b>b</b>	Other officers or key employees of the organization.	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
<b>b</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?		

**Section C. Disclosure**

**17** List the States with which a copy of this Form 990 is required to be filed: \_\_\_\_\_

**18** Section 6104 requires an organization to make its Form 1023 (or 1024-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 ☐ Another's website ☒ Upon request ☐ 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:  
 ► **QUINTON BAILY** 10255 W HIGGINS RD STE 900 Rosemont, IL 60018 (847) 803-2000

## 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 ☐

1

● 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

[illegible]

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

[illegible]

<b>1b Sub-Total</b>			
<b>c Total from continuation sheets to Part VII, Section A</b>			
<b>d Total (add lines 1b and 1c)</b>	5,111,450	205,175	442,828

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 137

		Yes	No
<b>3</b>	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> . . . . .	<b>3</b> Yes	
<b>4</b>	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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	<b>4</b> Yes	
<b>5</b>	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .	<b>5</b>	No

## Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Daniel J Edelman Inc, 200 East Randolph Street CHICAGO, IL 60601	Agency Services	16,276,300
Domino's National Advertising Fund, PO Box 997 ANN ARBOR, MI 48106	Promotion	9,137,221
FAIRLIFE LLC, 1001 WEST ADAMS STREET CHICAGO, IL 60607	PROMOTION	8,000,000
NFL PROPERTIES LLC, PO BOX 27278 NEW YORK, NY 10087	PROMOTION	5,797,500
MCDONALD'S USA LLC, 110 N CARPENTER STREET CHICAGO, IL 60607	PROMOTION	5,003,714

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 ▶ 70	
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Part VIII

Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
<div>Contributions, Gifts, Grants and Other Similar Amounts</div> <div><div>1a</div>Federated campaigns<div>1a</div></div> <div><div>b</div>Membership dues<div>1b</div></div> <div><div>c</div>Fundraising events<div>1c</div></div> <div><div>d</div>Related organizations<div>1d</div></div> <div><div>e</div>Government grants (contributions)<div>1e</div></div> <div><div>f</div>All other contributions, gifts, grants, and similar amounts not included above<div>1f</div></div> <div><div>g</div>Noncash contributions included in lines 1a - 1f \$</div> <div><div>h</div>Total. Add lines 1a-1f</div> <div>0</div>				

Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	0			
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	0			
	6a	(i) Real				
		(ii) Personal				
	b	Less rental expenses				
	c	Rental income or (loss)	0	0		
	d	Net rental income or (loss)		0		
	7a	(i) Securities				
		(ii) Other				
	b	Less cost or other basis and sales expenses				
c	Gain or (loss)					
d	Net gain or (loss)		0			
8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18					
	a	0				
	b	Less direct expenses				0
c	Net income or (loss) from fundraising events		0			
9a	Gross income from gaming activities See Part IV, line 19					
	a	0				
	b	Less direct expenses				0
c	Net income or (loss) from gaming activities		0			
10a	Gross sales of inventory, less returns and allowances					
	a	0				
	b	Less cost of goods sold				0
	c	Net income or (loss) from sales of inventory				0
Miscellaneous Revenue		Business Code				
11a						
b						
c						
d	All other revenue					
e	Total. Add lines 11a-11d		0			
12	Total revenue. See Instructions		159,678,406	159,678,406		

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	1,620,000			
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
<b>4</b> Benefits paid to or for members.	0			
<b>5</b> Compensation of current officers, directors, trustees, and key employees.	1,901,081			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
<b>7</b> Other salaries and wages.	18,233,960			
<b>8</b> Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	2,432,079			
<b>9</b> Other employee benefits.	2,538,690			
<b>10</b> Payroll taxes.	1,483,941			
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management.	0			
<b>b</b> Legal.	428,057			
<b>c</b> Accounting.	22,557			
<b>d</b> Lobbying.	0			
<b>e</b> Professional fundraising services. See Part IV, line 17.	0			
<b>f</b> Investment management fees.	0			
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	308,316			
<b>12</b> Advertising and promotion.	0			
<b>13</b> Office expenses.	1,727,879			
<b>14</b> Information technology.	2,579,819			
<b>15</b> Royalties.	0			
<b>16</b> Occupancy.	1,896,320			
<b>17</b> Travel.	3,184,161			
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
<b>19</b> Conferences, conventions, and meetings.	1,100,063			
<b>20</b> Interest.	-41,748			
<b>21</b> Payments to affiliates.	0			
<b>22</b> Depreciation, depletion, and amortization.	270,311			
<b>23</b> Insurance.	103,181			
<b>24</b> 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>a</b> DOMESTIC MARKETING	86,477,576			
<b>b</b> CONTRACT SERVICES	6,757,968			
<b>c</b> RESEARCH	7,613,020			
<b>d</b> EXPORT EXPENSES	18,761,427			
<b>e</b> All other expenses	279,748			
<b>25</b> Total functional expenses. Add lines 1 through 24e.	159,678,406			
<b>26</b> 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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**Check if Schedule O contains a response or note to any line in this Part IX ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	341,177	<b>1</b>	183,702
	<b>2</b> Savings and temporary cash investments . . . . .	0	<b>2</b>	0
	<b>3</b> Pledges and grants receivable, net . . . . .	0	<b>3</b>	0
	<b>4</b> Accounts receivable, net . . . . .	967,860	<b>4</b>	795,635
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	5,114,987	<b>7</b>	2,397,881
	<b>8</b> Inventories for sale or use . . . . .	0	<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges . . . . .	961,400	<b>9</b>	965,610
	<b>10a</b> Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 2,780,174		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 1,911,470	<b>10c</b> 1,056,958	868,704
	<b>11</b> Investments—publicly traded securities . . . . .	0	<b>11</b>	0
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	0	<b>12</b>	0
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	0	<b>13</b>	0
	<b>14</b> Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	19,513,086	<b>15</b>	12,247,542
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	27,955,468	<b>16</b>	17,459,074	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	20,758,647	<b>17</b>	14,574,770
	<b>18</b> Grants payable . . . . .	0	<b>18</b>	0
	<b>19</b> Deferred revenue . . . . .	42,165	<b>19</b>	12,691
	<b>20</b> Tax-exempt bond liabilities . . . . .	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	0	<b>21</b>	0
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	5,455,986	<b>24</b>	2,397,882
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	1,698,670	<b>25</b>	473,731
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	27,955,468	<b>26</b>	17,459,074
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets		<b>27</b>	
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets		<b>29</b>	
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	0	<b>33</b>	0	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	27,955,468	<b>34</b>	17,459,074	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response or note to any line in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	159,678,406
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	159,678,406
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	0
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	0
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	0

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b> Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b> 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</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		

Software ID:	
Software Version:	
EIN:	36-3992031
Name:	DAIRY MANAGEMENT INC

Form 990 (2018)

Form 990, Part III, Line 4a:

DMI PARTNERS WITH FOODSERVICE INDUSTRY LEADERS TO HELP CREATE DAIRY-BASED INNOVATION TO DRIVE DAIRY SALES AND BUILD TRUST IN DAIRY PRODUCTS. IN 2017, WE HAD FOUR DOMESTIC, U.S.-FOCUSED PARTNERS: DOMINOS, PIZZA HUT, TACO BELL AND MCDONALDS. BASED UPON THE SUCCESS OF OUR U.S. PARTNERSHIPS WITH YUM! BRANDS, WHICH INCLUDES TACO BELL, PIZZA HUT AND KFC, WE EXPANDED OUR PARTNERSHIP FOCUS AND ADDED TWO PILOT INTERNATIONAL PARTNERSHIPS: KFC, FOCUSED ON LATIN AMERICA CARIBBEAN AND PIZZA HUT, FOCUSED ON ASIA PACIFIC. THE GOAL OF INTERNATIONAL PARTNERSHIPS IS TO INCREASE U.S. DAIRY EXPORTS TO THESE MARKETS. DMI PARTNERS WITH THESE LARGE CATALYTIC COMPANIES BECAUSE THEY ARE INDUSTRY LEADERS WHO HAVE THE POTENTIAL TO DELIVER INCREMENTAL AND SUSTAINABLE DAIRY SALES. MOREOVER, THESE PARTNERS ARE CLOSELY WATCHED BY OTHERS IN FOODSERVICE. THEIR INNOVATION, WHETHER PRODUCT-BASED OR TECHNOLOGY BASED, CREATED A CATALYTIC EFFECT, WHERE OTHERS FOLLOW THEIR ACTIONS. THESE PARTNERS ARE CHOSEN BECAUSE THEY COMMIT TO INVEST IN INNOVATION AND MARKETING IN SUPPORT OF DAIRY-BASED PRODUCTS, AND THEY ARE WILLING TO PARTNER ON OTHER DAIRY INDUSTRY PRIORITIES. DMI SUPPORTS A RANGE OF PROGRAMS AND INITIATIVES WITH THESE INFLUENTIAL AND GLOBAL FOODSERVICE INDUSTRY LEADERS. THE PROGRAMS FOCUS ON PROVIDING DAIRY EXPERTISE AND INVESTMENT IN THE AREAS OF CONSUMER INSIGHTS, NEW PRODUCT DEVELOPMENT, NEW STORE AND NEW TECHNOLOGY TESTING, CONSUMER COMMUNICATIONS, AND CORPORATE SOCIAL RESPONSIBILITY. FURTHER, DMI PROVIDES ON-SITE SCIENTISTS AND/OR CULINARY EXPERTS WHO LEAD PRODUCT DEVELOPMENT OF DAIRY-BASED FOOD AND BEVERAGE PRODUCTS. DMI ALSO PROVIDES EXPERTISE AND CONSULTANTS IN THE AREAS OF MARKETING, CONSUMER INSIGHTS & RESEARCH, NUTRITION, SUSTAINABILITY, ANIMAL CARE, FOOD SAFETY, REGULATORY ENVIRONMENT AND DAIRY COMMUNICATIONS. DAIRY REPRESENTS A SUBSTANTIAL PORTION OF THE PARTNERS' MENUS. IN FACT, IT IS MORE THAN 70% OF ALL THEIR MENU ITEMS. Over the last five years, THESE PARTNERS HAVE SPENT \$7.5 BILLION ON dairy-focused ADVERTISING, featuring DAIRY-BASED PRODUCTS SUCH AS PIZZA, TACOS, ICE CREAM AND COFFEE DRINKS. SINCE THE START OF THESE PARTNERSHIPS IN 2009, THEIR COMBINED MILK EQUIVALENT TONNAGE HAS GROWN BY 2.2 BILLION MILK POUNDS AND AVERAGED 3.4% GROWTH PER YEAR. 2018 HIGHLIGHTS INCLUDE the relaunch of MCDONALDSS McCafe coffee and drinkable desserts product portfolio. In 2016 DMI helped support new product concept development and product formulation work against the McCafe portfolio. Items such as Macchiatos, Frappes and new Lattes were tested with consumers. DMI helped support a marketing test for these in Seattle in 2017. The test market was so successful that McDonalds launched the program nationally in 2018 to all 14,000+ US restaurants behind a \$100M marketing campaign and invested in new espresso equipment. The McCafe program was so successful that other major chains soon announced a similar espresso coffee platform investment, with chains such as Dunkin', Panera and Burger King announcing 2019 platform launches. IN 2018 CHECKOFF INVESTED IN TECHNOLOGY INNOVATION PLATFORMS AT DOMINOS, WHICH EXPAND AVAILABILITY AND ACCESS TO PIZZA. Examples include Dominos Hotspots, which enables consumers to create a new delivery location for pizza at places such as beaches and tailgate events. DOMINOS AND DMI CONTINUED TO PARTNER ON ITS SMART SLICE SCHOOL PIZZA PROGRAM. SMART SLICE IS NOW IN MORE THAN 11,500 SCHOOLS serving five million students. DOMINOS ALSO SUPPORTS BUILDING TRUST IN THE DAIRY INDUSTRY. IN 2018, DOMINOS INCREASED AWARENESS OF THE UNDENIABLY DAIRY CAMPAIGN BY INCLUDING FARMER MESSAGING ON SEVEN MILLION PIZZA BOXES PER WEEK and added the Undeniably Dairy messaging to their consumer Pizza Tracker, with exposure to over three million consumers per week. THESE EFFORTS HELPED DOMINOS GROW MILK EQUIVALENT TONNAGE BY 8.7% IN 2018. CHECKOFF STARTED TO PARTNER WITH PIZZA HUT IN LATE 2013 TO HELP TURN AROUND THEIR STRUGGLING U.S. BUSINESS. IN 2018 DMI PARTNERED WITH PIZZA HUT ON NEW PRODUCT PLATFORMS FOCUSED ON PUTTING CHEESE IN MORE PLACES. In 2018, DMI helped introduce the cheesiest Pan Pizza ever, the Double Cheesy Crust Pan Pizza. Described as a combination of Stuffed Crust Pizza and Original Pan Pizza, the new Double Cheesy Crust Pan Pizza combines a signature ring of melted cheese from the brands Stuffed Crust to deliver more than twice the cheese of a normal hand-tossed pizza. Further, DMI helped relaunch the signature Pan Pizza with 25% more cheese. This relaunch will deliver 150 million more pounds of milk in Pizza Huts 6,000 restaurants across the U.S. SINCE THE TACO BELL PARTNERSHIP BEGAN, DMI HAS HELPED TACO BELL EVOLVE IN HOW THEY USE DAIRY, FROM INCORPORATING IT AS A GARNISH TO EVOLVING INTO BEING MORE OF A KEY INGREDIENT TO DRIVE FLAVOR, PROTEIN AND/OR INNOVATION. IN 2018 DMI, PARTNERED WITH TACO BELL to introduce new touchpoints behind delivery and catering to ensure dairy relevance for those occasions. Further, we helped expand Taco Bells breakfast presence with the first dairy and steak product: Steak and Egg Stackers, with four times the cheese of a normal taco. Taco Bell has averaged 3.4 percent dairy sales growth since the inception of our partnership in 2012. OUR YUM INTERNATIONAL PILOT PARTNERSHIPS BEGAN IN 2017 AND HAS MADE SIGNIFICANT PROGRESS. THROUGH OUR PARTNERSHIP WITH PIZZA HUT IN ASIA PACIFIC, WE HAVE CREATED AWARENESS BY INCORPORATING MADE WITH U.S. CHEESE MESSAGING INTO ADVERTISING AND POINT OF PURCHASE MATERIALS FOR MENU ITEMS LIKE STUFFED CRUST PIZZA WHICH USES U.S. STRING CHEESE. WE'VE ALSO LAUNCHED FIVE NEW PIZZAS IN THE REGION THAT USE U.S. CHEESE. AS A RESULT, IN 2018, U.S. CHEESE SALES AT PIZZA HUT ASIA PACIFIC INCREASED 29% SINCE 2016, BEFORE THE PARTNERSHIP BEGAN. OUR KFC LATIN AMERICA & CARIBBEAN PARTNERSHIP BEGAN LATER IN 2017 AND HAS FOCUSED ON CREATING A PIPELINE OF CHICKEN AND U.S. CHEESE MENU ITEMS. THE FIRST ITEM WILL LAUNCH IN LEAD MARKETS IN JULY 2019, WITH MORE TO FOLLOW IN 2020+, THANKS TO A TEAM EFFORT INCLUDING DMI'S ON-SITE DAIRY SCIENTIST WHO WORKS WITH THE KFC LATIN AMERICA & CARIBBEAN TEAM. FLUID MILK PARTNERSHIPS: THE DAIRY CHECKOFF PROGRAM, WORKING WITH COMMITTED MILK PROCESSORS, HAS EMBARKED ON A COMPREHENSIVE REVITALIZATION STRATEGY TO REINVENT THE MILK EXPERIENCE FOR CONSUMERS. THE FOCUS INCLUDES MILK AS A STAND-ALONE BEVERAGE AS WELL AS AN INGREDIENT IN OTHER BEVERAGE SEGMENTS SUCH AS COFFEE, TEA, SMOOTHIES, ENERGY DRINKS AND MORE. AS PART OF THE EFFORTS TO REVITALIZE FLUID MILK, THE DMI BOARD APPROVED PARTNERSHIPS WITH EIGHT COMPANIES WHO ARE LEADERS AND INNOVATORS IN THE MILK AND BEVERAGE ARENA INCLUDING DAIRY FARMERS OF AMERICA (DFA), DARIGOLD/NORTHWEST DAIRY ASSOCIATION, THE KROGER COMPANY, HP HOOD, MARYLAND & VIRGINIA MILK PRODUCERS COOPERATIVE ASSOCIATION, INC., SHAMROCK FARMS, SOUTHEAST MILK, INC., AND COCA-COLA/FAIRLIFE. THE HP HOOD PARTNERSHIP CAME TO A CONCLUSION IN 2015, while fairlife completed in 2018. Since the launch of DMI's fluid milk partnerships, our partners have delivered a cumulative sales growth of more than \$500M. fairlife milk is the primary driver of these results. DMI ASSISTED AND INVESTED IN THE NATIONAL 2015 LAUNCH OF FAIRLIFE MILK. THE GOAL WAS TO CREATE A NATIONAL FLUID MILK BRAND LEVERAGING THE RESOURCES AND SCALE OF COCA-COLA. FAIRLIFE HAS BEEN A TREMENDOUS SUCCESS AND CONTINUES TO GROW, ACHIEVING DOLLARS SALES OF \$450M IN 2018, A FEAT THAT FEWER THAN ONE PERCENT OF NEW PRODUCTS ACHIEVE. More than 60 PERCENT OF CONSUMERS REPEAT THEIR PURCHASES OF FAIRLIFE, A GOOD PREDICTOR OF ITS SUCCESS MOVING FORWARD. BASED UPON FAIRLIFE'S INITIAL SUCCESS, FAIRLIFE'S OWNERS HAVE ANNOUNCED THE ADDITION OF TWO NEW PRODUCTION LINES TO MEET CONSUMER DEMAND. THESE WERE IN PROCESS IN 2018. FURTHER, FAIRLIFE ALSO ANNOUNCED A NEW ARIZONA PLANT SET TO COMMENCE FIRST MILK PRODUCTION IN LATE 2019. IN 2017 DMI WORKED WITH SHAMROCK FOODS TO LAUNCH SHAMROCK FARMS COLD BREW COFFEE & MILK IN SINGLE-SERVE BOTTLES. THE GOAL OF THIS LAUNCH IS TO HELP ENSURE MILK IS A KEY INGREDIENT IN THE GROWING READY-TO-DRINK COFFEE CATEGORY, WHICH HAS ACHIEVED \$3.5B OF SALES IN 2018. TO SUPPORT SHAMROCK'S EAST COAST MARKET EXPANSION, SHAMROCK ANNOUNCED THE COMPANY WILL INVEST MORE THAN \$40 MILLION TO EXPAND ITS FACILITIES IN VIRGINIA. THIS WILL ENABLE THE EAST COAST EXPANSION OF MILK-BASED, SINGLE-SERVE BEVERAGES SUCH AS THE SHAMROCK COLD BREW COFFEE & MILK AND ROCKIN' REFUEL, WHICH CHECKOFF ALSO HELPED DEVELOP AND SUPPORT FOR SHAMROCK FOODS. IN 2018 DMI PARTNERED WITH DAIRY FARMERS OF AMERICA (DFA) TO LAUNCH a yogurt smoothie product IN MINNEAPOLIS AND WISCONSIN AND SUPPORTED IT WITH TV ADVERTISING. KROGER COMMENCED INNOVATION ACTIVITIES AND HAS IDENTIFIED SEVERAL INNOVATION PLATFORM AREAS FOR LAUNCH. IN 2018, KROGER DEVELOPED A LINE OF FLAVORED WHOLE MILK BEVERAGES TO LAUNCH IN JANUARY 2019. OUR PARTNERSHIPS ARE ALREADY STIMULATING CHANGE IN THE INDUSTRY AND FUNDAMENTALLY CHANGING THE WAY THE FLUID MILK INDUSTRY DOES BUSINESS.

**Form 990, Part III, Line 4b:**

EXPORT DMI IMPLEMENTS MARKETING PROGRAMS TO FACILITATE THE SALES OF U S PRODUCED DAIRY PRODUCTS IN INTERNATIONAL MARKETS AND U S PRODUCED DAIRY INGREDIENTS OUTSIDE THE UNITED STATES DMI ALSO PROVIDES TRADE AND ACCESS SUPPORT FOR EXPORTS INTO INTERNATIONAL MARKETS

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

FUEL UP TO PLAY 60 FUEL UP TO PLAY 60 (FUTP 60) IS DAIRY'S BEST SUCCESS STORY WHEN IT COMES TO ADVANCING HEALTH AND WELLNESS AMONG YOUTH AT ITS CORE, FUTP 60 IS AN IN-SCHOOL HEALTH AND WELLNESS PROGRAM DESIGNED TO ENGAGE AND EMPOWER YOUTH TO TAKE ACTION FOR THEIR OWN HEALTH BY IMPLEMENTING LONG-TERM, POSITIVE CHANGES FOR THEMSELVES, THEIR SCHOOLS AND BEYOND CUSTOMIZABLE AND NON-PRESCRIPTIVE PROGRAM COMPONENTS ARE GROUNDED IN RESEARCH WITH YOUTH, INCLUDING TOOLS AND RESOURCES, IN-SCHOOL PROMOTIONAL MATERIALS, A WEBSITE, STUDENT ENGAGEMENT ACTIVITIES AND GRANTS TO FUND SUSTAINABLE CHANGES - ESPECIALLY IN PROVIDING INCREMENTAL ACCESS TO SCHOOL NUTRITION WITH AN EMPHASIS ON DAIRY FUTP 60 WAS FOUNDED IN 2009 BY THE NATIONAL DAIRY COUNCIL (NDC) AND THE NATIONAL FOOTBALL LEAGUE (NFL), IN COLLABORATION WITH THE U S DEPARTMENT OF AGRICULTURE SINCE THAT TIME FUTP 60 HAS BECOME THE LARGEST IN-SCHOOL HEALTH & WELLNESS PROGRAM IN THE UNITED STATES WITH OVER 73,000 SCHOOLS ENROLLED, REACHING 38 MILLION STUDENTS THE PROGRAM HAS HELPED TO CHANGE SCHOOL ENVIRONMENTS TO BETTER SUPPORT PROPER NUTRITION AND PHYSICAL ACTIVITY, AND BECAUSE OF FUEL UP TO PLAY 60, 14 MILLION STUDENTS ARE EATING HEALTHIER AND 18 MILLION ARE MORE PHYSICALLY ACTIVE THE PROGRAM HAS NOT ONLY BEEN WELL RECEIVED BY SCHOOLS AS IT HELPS THEM IMPROVE THE SCHOOL HEALTH AND WELLNESS ENVIRONMENT, ESPECIALLY IN UNDERSERVED SCHOOLS, BUT IT ALSO HAS BEEN EMBRACED BY THOSE OUTSIDE OF THE DAIRY INDUSTRY WHO SEE THE VALUE OF ENGAGING IN THE PROGRAM INCLUDING MANY OTHER HEALTH AND NUTRITION ORGANIZATIONS OUR SUCCESS WITH FUTP 60 GOES BEYOND HEALTHY EATING AND PHYSICAL ACTIVITY IN SCHOOLS IT IS ABOUT THE TOTAL HEALTH OF THE CHILD, AND THE POSITIVE IMPACT ON COMMUNITIES To help advance its mission to protect and grow sales and trust in dairy, DMI/Innovation Center for U S Dairy launched an industry-wide initiative in June 2017 Undeniably Dairy Now in its third year, Undeniably Dairy is leading the implementation of a loud and proud consumer-centric, multi-stakeholder, multi-year campaign that demonstrates the relevance and responsibility of dairy farmers and the dairy community, drawing from its values and practices across the value chain from the farm to the fridge Undeniably Dairy achieves this effort by engaging the dairy community, influencers and others to tell its story around four pillars that drive content and storytelling responsibly produced, locally driven, nutrient rich, and real enjoyment Further, the campaign accomplishes this by building integrated systems that expand reach, raise awareness and build participation through - Integrated communications A comprehensive approach that includes media and other channel partnerships, digital (websites, search, and social strategies), earned and social media, and through events and experiences - Influencer outreach Establishing and/or strengthening relationships with critical media, reputational (e g , dietitians, health professional organizations, environmental and animal care leaders) and cultural influencers (e g , food and lifestyle bloggers) that reach consumers - Community engagement Rallying the dairy, food and other relevant communities to amplify, customize and create content around Undeniably Dairy and its pillars to further unify and strengthen dairys voice, including engagement among farmers, processors and manufacturers, retailers, and agribusiness In its first two years, Undeniably Dairy has made an impact with consumers on behalf of farmers and the dairy community For example - More than 4 billion total impressions since the start of the campaign - More than 620 million total paid impressions - Nearly 130 video views - More than 2,000 earned media placements - More than 300 dairy community and other allied industry organizations and companies engaging in Undeniably Dairy

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Adams Cynthia ..... Director	1 0 ..... 0 0	X						0	0	0
Ahlem Carol ..... Director	1 0 ..... 0 0	X						0	0	0
Anglin WRyan ..... Director	1 0 ..... 0 0	X						0	0	0
Ballard Steve ..... Director	1 0 ..... 0 0	X						0	0	0
Bikowsky Patty ..... Director	1 0 ..... 0 0	X						0	0	0
Bossard Bret ..... Director	1 0 ..... 0 0	X						0	0	0
Brazil Christopher ..... Director	1 0 ..... 0 0	X						0	0	0
Brubaker John ..... Director	1 0 ..... 1 0	X						0	8,400	0
Byrna Richard ..... Director	1 0 ..... 1 0	X						0	2,600	0
Caballlero Craig ..... Director	1 0 ..... 0 0	X						0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Carrol Doug ..... Director	1 0 ..... 0 0	X						0	0	0
Chamberlain Warren ..... Director	1 0 ..... 0 0	X						0	0	0
Chapin Chen ..... Director	1 0 ..... 0 0	X						0	0	0
Combs Bobby ..... Director	1 0 ..... 0 0	X						0	0	0
Deutsch Bill ..... Director	1 0 ..... 1 0	X						0	4,100	0
Donahoe Audrey ..... Director	1 0 ..... 1 0	X						0	7,800	0
Dziurgot Melissa ..... Director	1 0 ..... 0 0	X						0	0	0
Easter Glen ..... Director	1 0 ..... 1 0	X						0	0	0
Eberle Stacy ..... Director	1 0 ..... 0 0	X						0	0	0
Esplin Brian ..... Director	1 0 ..... 1 0	X						0	6,500	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ferguson Mike ..... Director	1 0 ..... 1 0	X						0	3,400	0
Fullmer Chace ..... Director as of may 2018	1 0 ..... 1 0	X						0	1,300	0
Gibson Gregory ..... Director	1 0 ..... 0 0	X						0	0	0
Gilbert Dan ..... Director	1 0 ..... 1 0	X						0	3,600	0
Hancock Larry ..... Director as of Nov 2018	1 0 ..... 1 0	X						0	0	0
Hardie David Skip ..... Secretary	1 0 ..... 1 0	X						0	8,000	0
Hardy Jeffrey ..... Director	1 0 ..... 1 0	X						0	4,300	0
Heatwole Jerrel ..... Director	1 0 ..... 1 0	X						0	0	0
Hetzel Jennifer ..... Director	1 0 ..... 0 0	X						0	0	0
Hershey Marilyn ..... Chair as of Feb 2018	1 0 ..... 1 0	X						0	39,700	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Hilan Evan ..... Director	1 0 ..... 0 0	X						0	0	0
Hoewischer Mark ..... Director as of sept 2018	1 0 ..... 1 0	X						0	1,600	0
Hoff Neil ..... Director	1 0 ..... 1 0	X						0	25,875	0
Hoffman Ralph ..... Director	1 0 ..... 0 0	X						0	0	0
Hood Tim ..... Director	1 0 ..... 1 0	X						0	2,700	0
Horst Vernon ..... Director	1 0 ..... 1 0	X						0	3,100	0
Hotveldt Dan ..... Director	1 0 ..... 1 0	X						0	0	0
Hownigan Jr Harold ..... Director	1 0 ..... 1 0	X						0	2,700	0
Jackson David ..... Director	1 0 ..... 0 0	X						0	0	0
Jacquier James ..... Director	1 0 ..... 1 0	X						0	2,100	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kasper Tom ..... Director as of Nov 2018	1 0 ..... 1 0	X						0	0	0
Korn Kim ..... Director	1 0 ..... 0 0	X						0	0	0
Krause Charles ..... Director	1 0 ..... 1 0	X						0	4,100	0
Larson John ..... Director	1 0 ..... 0 0	X						0	0	0
Levzow Becky ..... Director	1 0 ..... 0 0	X						0	0	0
Maddox Stephen ..... Vice Chair	1 0 ..... 0 0	X						0	0	0
Mellema Sieto ..... Director	1 0 ..... 1 0	X						0	0	0
Merrill Allen ..... Director	1 0 ..... 1 0	X						0	2,500	0
Miller Orville ..... Director	1 0 ..... 0 0	X						0	0	0
Moore Kevin ..... Director as of feb 2018	1 0 ..... 1 0	X						0	4,200	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mueller Lowell ..... Director	1 0 ..... 0 0	X						0	3,000	0
Neahrng Steve ..... Director	1 0 ..... 0 0	X						0	3,400	0
Oosten Mike ..... Director	1 0 ..... 0 0	X						0	0	0
Peterson Alex ..... Director	1 0 ..... 0 0	X						0	0	0
Phares Steve ..... Director	1 0 ..... 1 0	X						0	3,400	0
Podtburg Rick ..... Director	1 0 ..... 1 0	X						0	3,900	0
Pyle David ..... Director	1 0 ..... 0 0	X						0	0	0
Ramsey Lynn ..... Director	1 0 ..... 1 0	X						0	0	0
Reid Jim ..... Director	1 0 ..... 1 0	X						0	6,100	0
Roecker Randy ..... Director	1 0 ..... 0 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Rovey Paul ..... Director (Chair thru Feb 2018)	1 0 ..... 1 0	X						0	12,900	0
Schap Eddie ..... Director	1 0 ..... 0 0	X						0	0	0
Schilter Michelle ..... Director	1 0 ..... 1 0	X						0	4,800	0
Scott Brad ..... Director	1 0 ..... 0 0	X						0	0	0
Seefeldt Connie ..... Director	1 0 ..... 0 0	X						0	0	0
Skiba Kathleen ..... Director	1 0 ..... 0 0	X						0	0	0
Stitzlein Earl ..... Director	1 0 ..... 1 0	X						0	3,300	0
Strassburg Jeff ..... Director	1 0 ..... 1 0	X						0	5,100	0
Sukalski Christine ..... Director	1 0 ..... 1 0	X						0	3,200	0
Titlon-Flood Jennifer ..... Director	1 0 ..... 1 0	X						0	4,400	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Tjaarda Pauline ..... Director	1 0 ..... 0 0	X						0	0	0
Tjaarda Perry ..... Director	1 0 ..... 0 0	X						0	1,500	0
Vander Eyk Arlene ..... Director	1 0 ..... 0 0	X						0	0	0
Vander Kooi Deb ..... Director	1 0 ..... 0 0	X						0	0	0
VanDyke Dan ..... Director as of March 2018	1 0 ..... 1 0	X						0	2,600	0
Webb James ..... Director	1 0 ..... 0 0	X						0	0	0
Werkhoven Dolores ..... Director as of June 2018	1 0 ..... 0 0	X						0	0	0
Werkhoven Jim ..... Director	1 0 ..... 1 0	X						0	2,000	0
Werth Corby ..... Director	1 0 ..... 1 0	X						0	3,800	0
Woods Tom ..... Director	1 0 ..... 1 0	X						0	3,200	0

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(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Zimbelman Rosemarie ..... Director as of Nov 2018	1 0 .....	X						0	0	0
ALEXANDER LARRY ..... DIRECTOR THRU SEPT 2018	1 0 .....	X						0	0	0
BOYLE JR JIM ..... DIRECTOR THRU OCT 2018	1 0 .....	X						0	0	0
DIEDERICH RAYMOND ..... DIRECTOR THRU NOV 2018	1 0 .....	X						0	0	0
DORSEY THOMAS ..... DIRECTOR THRU JULY 2018	1 0 .....	X						0	0	0
KELSAY JOE ..... DIRECTOR THRU NOV 2018	1 0 .....	X						0	0	0
KOLLER RANDALL ..... DIRECTOR THRU NOV 2018	1 0 .....	X						0	0	0
MEDEIROS BRIAN ..... DIRECTOR THRU JULY 2018	1 0 .....	X						0	0	0
NOBIS KEN ..... DIRECTOR THRU MAY 2018	1 0 .....	X						0	0	0
ROELOFFS ARIE ..... DIRECTOR THRU NOV 2018	1 0 .....	X						0	0	0



Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
TEKIPPE-SCHMITT JESSICA ..... DIRECTOR THRU NOV 2018	1 0 ..... 0 0	X						0	0	0
VANLIESHOUT CYNDY ..... DIRECTOR THRU NOV 2018	1 0 ..... 0 0	X						0	0	0
VISSER JEREMY ..... DIRECTOR THRU JULY 2018	1 0 ..... 1 0	X						0	0	0
Baily Quinton ..... CFO	30 0 ..... 0 0			X				326,006	0	44,727
O'Brien Barbara ..... President	40 0 ..... 0 0			X				575,508	0	78,943
Gallagher Thomas P ..... CEO	40 0 ..... 0 0			X				836,569	0	39,328
Engelmann Elizabeth A ..... Executive Vice President	40 0 ..... 0 0					X		455,053	0	77,816
Leitner Mark A ..... Executive Vice President	40 0 ..... 0 0					X		497,743	0	53,983
Miller Gregory D ..... Executive Vice President	40 0 ..... 0 0					X		563,472	0	76,179
Ragalie-Carr Jean H ..... Executive Vice President	40 0 ..... 0 0					X		442,874	0	51,767

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Vilsack Thomas J ..... Executive Vice President	40 0 ..... 0 0					X		979,336	0	20,085
Gibbs Carolyn ..... Former Officer	0 0 ..... 0 0						X	434,889	0	0

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493319152539	
<div>SCHEDULE D (Form 990)</div> <div>Department of the Treasury Internal Revenue Service</div>		<div>Supplemental Financial Statements</div> <div>▶ 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. ▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.</div>			<div>OMB No 1545-0047</div> <div>2018</div> <div>Open to Public Inspection</div>
Name of the organization DAIRY MANAGEMENT INC				Employer identification number 36-3992031	
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 year)			
3		Aggregate value of grants from (during year)			
4		Aggregate value at end of year			
5		Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
6		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? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>			
Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.					
1 Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space</div>					
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year					
				Held at the End of the Year	
a Total number of conservation easements				2a	
b Total acreage restricted by conservation easements				2b	
c Number of conservation easements on a certified historic structure included in (a)				2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register				2d	
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶					
4 Number of states where property subject to conservation easement is located ▶					
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶					
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$					
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>					
9 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					
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.					
1a 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					
b 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 <div><div>(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$</div><div>(ii) Assets included in Form 990, Part X ▶ \$</div></div>					
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items <div><div>a Revenue included on Form 990, Part VIII, line 1 ▶ \$</div><div>b Assets included in Form 990, Part X ▶ \$</div></div>					
For Paperwork Reduction Act Notice, see the Instructions for Form 990.					
		Cat No 52283D		Schedule D (Form 990) 2018	

Part III

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

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

☐

Part V

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

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

(i)

unrelated organizations

(ii)

related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		1,455,043	875,889	579,154
d Equipment		624,792	370,481	254,311
e Other		700,339	665,100	35,239
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				868,704

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.  
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶		

Part VIII

Investments—Program Related.  
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 ) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) DUE FROM AFFILIATES	12,247,542
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 ) . . . . . ▶	12,247,542

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.  
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
DUE TO AFFILIATES	473,731
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 ) ▶	473,731

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☐

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	159,678,406
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	159,678,406
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	159,678,406

**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.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	159,678,406
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	159,678,406
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	159,678,406

**Part XIII Supplemental Information**

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

Return Reference	Explanation
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<b>Part XIII</b>	<b>Supplemental Information <i>(continued)</i></b>
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Return Reference	Explanation
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**SCHEDULE F  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
DAIRY MANAGEMENT INC

**Statement of Activities Outside the United States**

- Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

**2018**

**Open to Public  
Inspection**

**Employer identification number**

36-3992031

**Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

**3** Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed )

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
<b>3a</b> Sub-total					4,332,002
<b>b</b> Total from continuation sheets to Part I					
<b>c Totals</b> (add lines 3a and 3b)					4,332,002



**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	<b>(h)</b> Description of non-cash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ► \_\_\_\_\_
- 3 Enter total number of other organizations or entities . . . . . ► \_\_\_\_\_

<b>Part III</b>	<b>Grants and Other Assistance to Individuals Outside the United States.</b> Complete if the organization answered "Yes" to Form 990, Part IV, line 16.
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Part III can be duplicated if additional space is needed.

[illegible]

**Part IV Foreign Forms**

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)* ☐ Yes ☒ No

**Part V**   **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

ReturnReference	Explanation

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 36-3992031  
**Name:** DAIRY MANAGEMENT INC

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
South America			Program Services	Marketing Support	1,360,482
North America			Program Services	Marketing Support	664,843

**Form 990 Schedule F Part I - Activities Outside The United States**

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
East Asia and the Pacific			Program Services	Marketing Support	2,306,677

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
DAIRY MANAGEMENT INC

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number  
36-3992031

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . 

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to 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 organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Youth Improved Inc 10255 West Higgins Rd Rosemont, IL 60018	27-0988546	501(c)(3)	1,505,000				Program service expenses
(2) DAIRY RESEARCH INSTITUTE 10255 WEST HIGGINS RD ROSEMONT, IL 60018	27-1756847	501(c)(3)	115,000				RESEARCH PROGRAMS

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

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

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

Part III can be duplicated if additional space is needed

(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)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	MANAGEMENT REVIEWS THE GRANTEES' PERIODIC FINANCIAL REPORTS TO MONITOR THE USE OF FUNDS AWARDED



Schedule J (Form 990)	Department of the Treasury Internal Revenue Service	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to <a href="http://www.irs.gov/Form990">www.irs.gov/Form990</a> for instructions and the latest information.</div>	OMB No 1545-0047
			2018
			Open to Public Inspection
Name of the organization DAIRY MANAGEMENT INC		Employer identification number 36-3992031	

Part I Questions Regarding Compensation		Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use		
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence		
<input checked="" type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)		
<b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		<b>1b</b>	Yes
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		<b>2</b>	Yes
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
<input checked="" type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract		
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization			
<b>a</b> Receive a severance payment or change-of-control payment?		<b>4a</b>	Yes
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?		<b>4b</b>	Yes
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement?		<b>4c</b>	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>			
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
<b>a</b> The organization?		<b>5a</b>	
<b>b</b> Any related organization?		<b>5b</b>	
If "Yes," on line 5a or 5b, describe in Part III			
<b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
<b>a</b> The organization?		<b>6a</b>	
<b>b</b> Any related organization?		<b>6b</b>	
If "Yes," on line 6a or 6b, describe in Part III			
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III		<b>7</b>	
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		<b>8</b>	
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		<b>9</b>	

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
<b>1</b> Baily Quinton CFO	(i)	309,000	20,000	-2,994	30,900	13,827	370,733	0
	(ii)	0	0	0	0	0	0	0
<b>2</b> O'Brien Barbara President	(i)	548,625	35,000	-8,117	46,000	32,943	654,451	0
	(ii)	0	0	0	0	0	0	0
<b>3</b> Gallagher Thomas P CEO	(i)	625,000	0	211,569	26,757	12,571	875,897	0
	(ii)	0	0	0	0	0	0	0
<b>4</b> Gibbs Carolyn Former Officer	(i)	0	0	434,889	0	0	434,889	434,889
	(ii)	0	0	0	0	0	0	0
<b>5</b> Engelmann Elizabeth A Executive Vice President	(i)	433,675	30,000	-8,622	43,368	34,448	532,869	0
	(ii)	0	0	0	0	0	0	0
<b>6</b> Leitner Mark A Executive Vice President	(i)	346,000	25,000	126,743	34,600	19,383	551,726	0
	(ii)	0	0	0	0	0	0	0
<b>7</b> Miller Gregory D Executive Vice President	(i)	465,750	30,000	67,722	46,000	30,179	639,651	0
	(ii)	0	0	0	0	0	0	0
<b>8</b> Ragalie-Carr Jean H Executive Vice President	(i)	346,725	25,000	71,149	34,673	17,094	494,641	0
	(ii)	0	0	0	0	0	0	0
<b>9</b> Vilsack Thomas J Executive Vice President	(i)	824,000	106,090	49,246	27,500	-7,415	999,421	0
	(ii)	0	0	0	0	0	0	0

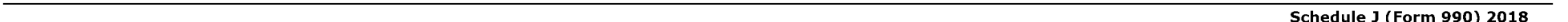
**Part III**   **Supplemental Information**

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A	First class travel is only available to the CEO as authorized by the board of directors. The travel is not taxable since it is part of an accountable plan. Tax indemnification is available to the CEO only and is included in taxable wages. Officers, key employees and highest compensated employees have the option of receiving health club benefits under the executive flexible benefits account.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4A	Carolyn Gibbs received a severance payment of \$434,889 in 2018, her second payment as part of a 2-year agreement. These amounts are included on schedule j, part ii, column b (iii). Carolyn Gibbs second year severance payment was paid in 2018 and was reported as deferred compensation on schedule j, part ii, column (c) in 2017.

Return Reference	Explanation
SCHEDULE J, PART I, LINE 4B	<p>DMI provides a non-qualified defined contribution benefit for executives whose thrift &amp; savings plan (401k plan) benefits are affected by the IRS annual compensation limits. DMI will automatically defer, on the behalf of a participant, employer contributions "lost" under the thrift &amp; savings plan due to federal tax laws that place a limit on the amount of compensation that a qualified plan can use in making benefit calculations. This annual compensation limit for 2018 as defined in IRS code section 401(a)(17) is \$275,000. The balance in each nonqualified plan account is credited to executives annually with interest based on an average of the wall street journal prime rates published on the first day of each calendar month. This balance accumulates over the course of the executives tenure at DMI and vests and becomes payable at termination of employment. As part of the process of terminating the defined benefit pension plan, DMI instituted a retirement transition program. Its purpose is to reduce the severity of the benefit reduction experienced by employees close to retirement age as DMI transitioned from a combination defined benefit/defined contribution benefit structure to an all defined contribution benefit structure. In 2018, Greg Miller was paid \$73,030, Jean Ragalie-Carr was paid \$72,085 and Mark Leitner was paid \$127,801 under this program. These amounts paid are also reported on schedule j, part ii, column b(iii). Thomas Gallagher participated in a supplemental nonqualified retirement program in which benefits vest at year-end and are paid by March 15 of the following year. The benefits represent employer contributions lost under the thrift &amp; savings plan due to federal tax laws that place a limit on the amount of compensation that a qualified plan can use in making benefit calculations. He was paid a benefit of \$62,555 in 2018 which is included on schedule j, part ii, column (b)(iii).</p>



Additional Data

Software ID:  
Software Version:  
EIN: 36-3992031  
Name: DAIRY MANAGEMENT INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
Baily Qunton CFO	(i)	309,000	20,000	-2,994	30,900	13,827	370,733	0
	(ii)	0	0	0	0	0	0	0
O'Brien Barbara President	(i)	548,625	35,000	-8,117	46,000	32,943	654,451	0
	(ii)	0	0	0	0	0	0	0
Gallagher Thomas P CEO	(i)	625,000	0	211,569	26,757	12,571	875,897	0
	(ii)	0	0	0	0	0	0	0
Gibbs Carolyn Former Officer	(i)	0	0	434,889	0	0	434,889	434,889
	(ii)	0	0	0	0	0	0	0
Engelmann Elizabeth A Executive Vice President	(i)	433,675	30,000	-8,622	43,368	34,448	532,869	0
	(ii)	0	0	0	0	0	0	0
Leitner Mark A Executive Vice President	(i)	346,000	25,000	126,743	34,600	19,383	551,726	0
	(ii)	0	0	0	0	0	0	0
Miller Gregory D Executive Vice President	(i)	465,750	30,000	67,722	46,000	30,179	639,651	0
	(ii)	0	0	0	0	0	0	0
Ragalie-Carr Jean H Executive Vice President	(i)	346,725	25,000	71,149	34,673	17,094	494,641	0
	(ii)	0	0	0	0	0	0	0
Vilsack Thomas J Executive Vice President	(i)	824,000	106,090	49,246	27,500	-7,415	999,421	0
	(ii)	0	0	0	0	0	0	0

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization  
DAIRY MANAGEMENT INC

**Supplemental Information to Form 990 or 990-EZ**

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No 1545-0047

**2018**

**Open to Public Inspection**

Employer identification number

36-3992031

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
DESCRIBE THE PROCESS USED BY MANAGEMENT &/OR GOVERNING BODY TO	REVIEW 990 FORM 990, PART VI, LINE 11A FORM 990 IS AVAILABLE TO ALL BOARD MEMBERS FOR REVIEW UPON REQUEST MANAGEMENT REVIEWS THE DETAILS OF THE FORM 990 WITH THE ORGANIZATION'S ATTORNEYS AND ITS AUDIT AND TAX FIRM



**990 Schedule O, Supplemental Information**

Return Reference	Explanation
DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICTS OF	INTEREST FORM 990, PART VI, LINE 12C THE CONFLICT OF INTEREST POLICY IS REVIEWED IN DETAIL WITH THE BOARD AND BY THE ORGANIZATION'S CORPORATE ATTORNEYS ANNUALLY BOARD MEMBERS ARE REQUIRED TO COMPLETE AN ANNUAL CERTIFICATION OF COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BOARD MEMBERS ARE ASKED TO RECUSE THEMSELVES FROM VOTING IF THEY ARE PERSONALLY INVOLVED IN A MATTER THAT COULD GIVE RISE TO CONFLICTS

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
OFFICES & POSITIONS FOR WHICH PROCESS WAS USED, & YEAR PROCESS	WAS BEGUN FORM 990, PART VI, LINE 15A AND 15B CEO COMPENSATION IS DETERMINED WITH THE INVOLVEMENT OF THE PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS CEO, OFFICER AND KEY EMPLOYEE COMPENSATION IS DETERMINED THROUGH THE USE OF INDUSTRY SURVEYS, MARKET SALARY GUIDES AND OTHER COMPETITIVE COMPENSATION INFORMATION

**990 Schedule O, Supplemental Information**

Return Reference	Explanation
AVAIL OF GOV DOCS, CONFLICT OF INTEREST POLICY, & FIN STMTS TO	GEN PUBLIC FORM 990, PART VI, LINE 19 GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, WHISTLE BLOWER POLICY, DOCUMENT RETENTION POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.  
► Attach to Form 990.  
► Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization  
DAIRY MANAGEMENT INC

Employer identification number  
36-3992031

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)United Dairy Industry Association 10255 W Higgins Road Ste 900  Rosemont, IL 60018 36-2702849	PROMOTION	IL	501(c)(6)	N/A	NA		No
(2)National Dairy Council 10255 W Higgins Road Ste 900  Rosemont, IL 60018 36-1522265	EDUCATION	IL	501(c)(3)	10	UDIA	Yes	
(3)Innovation Center for US Dairy 10255 W Higgins Road Ste 900  Rosemont, IL 60018 26-3918900	PROMOTION	IL	501(c)(6)	N/A	DMI	Yes	
(4)DAIRY RESEARCH INSTITUTE 10255 W HIGGINS ROAD STE 900  Rosemont, IL 60018 27-1756847	RESEARCH	DC	501(c)(3)	7	DMI	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512(b) (13) controlled entity?	
								Yes	No

**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**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?

	Yes	No
<b>a</b> Receipt of <b>(i)</b> interest, <b>(ii)</b> annuities, <b>(iii)</b> royalties, or <b>(iv)</b> rent from a controlled entity . . . . .		No
<b>b</b> Gift, grant, or capital contribution to related organization(s) . . . . .	Yes	
<b>c</b> Gift, grant, or capital contribution from related organization(s) . . . . .		No
<b>d</b> Loans or loan guarantees to or for related organization(s) . . . . .		No
<b>e</b> Loans or loan guarantees by related organization(s) . . . . .		No
<b>f</b> Dividends from related organization(s) . . . . .		No
<b>g</b> Sale of assets to related organization(s) . . . . .		No
<b>h</b> Purchase of assets from related organization(s) . . . . .		No
<b>i</b> Exchange of assets with related organization(s) . . . . .		No
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s) . . . . .		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s) . . . . .		No
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s) . . . . .		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) . . . . .		No
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .	Yes	
<b>o</b> Sharing of paid employees with related organization(s) . . . . .	Yes	
<b>p</b> Reimbursement paid to related organization(s) for expenses . . . . .		No
<b>q</b> Reimbursement paid by related organization(s) for expenses . . . . .	Yes	
<b>r</b> Other transfer of cash or property to related organization(s) . . . . .		No
<b>s</b> Other transfer of cash or property from related organization(s) . . . . .		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 type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) Dairy Research Institute	b	115,000	Cash

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.

[illegible]

**Part VII**   **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation