efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493055017000 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 10-01-2018 , and ending 09-30-2019 C Name of organization NATIONAL SORGHUM PRODUCERS D Employer identification number B Check if applicable □ Address change ASSOCIATION 75-0972863 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number ☐ Amended return Number and street (or P O box if mail is not delivered to street address) Room/suite ☐ Application pending (806) 749-3478 City or town, state or province, country, and ZIP or foreign postal code LUBBOCK, TX 79403 G Gross receipts \$ 1,119,521 Name and address of principal officer H(a) Is this a group return for ☐Yes **☑**No subordinates? 4201 N I-27 H(b) Are all subordinates LUBBOCK, TX ☐Yes ☐No ıncluded? 501(c)(3) **✓** 501(c) (5) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW SORGHUMGROWERS COM L Year of formation 1955 M State of legal domicile K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities THE PURPOSES OF THE ASSOCIATION ARE TO REPRESENT AND ASSIST GRAIN SORGHUM PRODUCERS Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 11 4 11 4 Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) . . . 6 25 Total unrelated business revenue from Part VIII, column (C), line 12 7a 353,240 **b** Net unrelated business taxable income from Form 990-T, line 34 300,831 **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 39,047 80,861 Ravenua 897,835 762,824 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 265,836 161,270 1,098,152 1,109,521 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 292,584 319,753 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 868,412 739,481 1,160,996 1,059,234 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -62,844 50,287 Net Assets or Fund Balances Beginning of Current Year **End of Year** 719,149 818,761 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 74,578 113,865 644,571 704,896 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2020-02-01 Signature of officer Sign Here TIMOTHY LUST EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check 🗹 ıf 2020-01-31 P00419741 Paid self-employed ▶ BOLINGER SEGARS GILBERT AND MOSS LLP Firm's EIN > 75-0882037 Firm's name Preparer Use Only Firm's address ▶ 8215 NASHVILLE AVENUE Phone no (806) 747-3806 LUBBOCK, TX 79423 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

THE PURPOSES OF THE ASSOCIATION ARE TO REPRESENT THE GRAIN SORGHUM PRODUCER AND TO DEVELOP PROGRAMS AND ACTIVITIES IN INTEREST IN THE FOLLOWING FIELDS 1) RESEARCH AND EDUCATION PROMULGATE BOTH PUBLIC AND PRIVATE RESEARCH IN GRAIN SORGH PRODUCTION, MARKETING, AND UTILIZATION 2) MARKET DEVELOPMENT SEEK TO DEVELOP AND MAINTAIN DOMESTIC AND FOREIGN MARKET FOR GRAIN SORGHUM, PROVIDED, HOWEVER, THAT THIS ASSOCIATION WILL NOT ENGAGE IN THE BUSINESS OF BUYING OR SELLING GRAIN SORGHUM OR ITS PRODUCTS 3) SERVICE DO ALL OTHER THINGS THAT MAY SEEM REASONABLE AND APPROPRIATE FOR IMPROVING THE CONDITIONS UNDER WHICH GRAIN SORGHUM IS PRODUCED AND MARKETED, INCLUDING COOPERATION WITH DEPARTMENTS AND AGENCIES LOCAL, STATE, NATIONAL, AND INTERNATIONAL GOVERNMENTS CHARGED WITH ANY RESPONSIBILITIES RELATING TO SORGHUM GRAIN  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Form 9	90 (20	18)			Page
1 Berly describe the organization's insision  INTEREST IN THE FOLLOWING FIELDS 1) RESEARCH AND EDUCATION PRODUCER AND TO DEVELOP PROGRAMS AND ACTIVITIES IN  INTEREST IN THE FOLLOWING FIELDS 1) RESEARCH AND EDUCATION PROMULGATE BOTH PUBLIC AND PRIVATE RESEARCH IN GRAIN SORGHOUNT FOR ANALYSIS ON A MARKET INCAME OF A MARKET INCAME OF A MARKET INCAME OF A MARKET INCAME OF A MARKET DEVELOP AND MAINTAIN DOMESTICA AND FOREIGN MARKET  OR GRAIN SORGHUM, PROVIDED, HOWEVER, THAT THIS ASSOCIATION WILL NOT ENGAGE IN THE BUSINESS OF BUTTING OR SELLING GRAIN  SORGHUM OR TIS PRODUCTS 3) SERVICE DO ALL OTHER THINGS THAT MAY SER RESONABLE AND APPROPRIATE AND AGENCIES OCAL, STATE, NATIONAL, AND INTERNATIONAL GOVERNMENTS CHARGED WITH ANY RESPONSIBILITIES RELATING TO SORGHUM GRAIN  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?	Part	Ш	Statement of Program Service	Accomplishments		
1 Berly describe the organization's insision  INTEREST IN THE FOLLOWING FIELDS 1) RESEARCH AND EDUCATION PRODUCER AND TO DEVELOP PROGRAMS AND ACTIVITIES IN  INTEREST IN THE FOLLOWING FIELDS 1) RESEARCH AND EDUCATION PROMULGATE BOTH PUBLIC AND PRIVATE RESEARCH IN GRAIN SORGHOUNT FOR ANALYSIS ON A MARKET INCAME OF A MARKET INCAME OF A MARKET INCAME OF A MARKET INCAME OF A MARKET DEVELOP AND MAINTAIN DOMESTICA AND FOREIGN MARKET  OR GRAIN SORGHUM, PROVIDED, HOWEVER, THAT THIS ASSOCIATION WILL NOT ENGAGE IN THE BUSINESS OF BUTTING OR SELLING GRAIN  SORGHUM OR TIS PRODUCTS 3) SERVICE DO ALL OTHER THINGS THAT MAY SER RESONABLE AND APPROPRIATE AND AGENCIES OCAL, STATE, NATIONAL, AND INTERNATIONAL GOVERNMENTS CHARGED WITH ANY RESPONSIBILITIES RELATING TO SORGHUM GRAIN  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?			Check if Schedule O contains a response	or note to any line in this Part III		🗸
INTEREST IN THE FOLLOWING FIELDS 1) RESEARCH AND EDUCATION PROMULGATE BOTH PUBLIC AND PRINTER RESEARCH IN GRAIN SORGHOM, PROVIDED, HOWEVER, THAT THIS ASSOCIATION WILL NOT ENAGE IN THE BUSINESS OF BUYING OR SELLING GRAIN SORGHUM, ROVIDED, HOWEVER, THAT THIS ASSOCIATION WILL NOT ENAGE IN THE BUSINESS OF BUYING OR SELLING GRAIN SORGHUM IS PRODUCED 3) SERVICE DO ALL OTHER THINGS THAT MAY SEEW REASONABLE AND PAPPORTE FOR IMPROVING THE CONDITIONS UNDER WHICH GRAIN SORGHUM IS PRODUCED AND MARKETED, INCLUDING COOPERATION WITH DEPARTMENTS AND AGENCIES OF BUYING OR SELLING GRAIN SORGHUM IS PRODUCED AND MARKETED, INCLUDING COOPERATION WITH DEPARTMENTS AND AGENCIES OF BUYING OR SORGHUM GRAIN SORGHUM IS PRODUCED AND MARKETED, INCLUDING COOPERATION WITH DEPARTMENTS AND AGENCIES OF BUTTON WITH DEPARTMENTS AND	1	Briefly		, , , , , , , , , , , , , , , , , , , ,		
the prior Form 990 or 990-EZ?	INTER PRODU FOR G SORGI CONDI	EST IN JCTION RAIN S HUM O TIONS	THE FOLLOWING FIELDS 1) RESEARCH , MARKETING, AND UTILIZATION 2) MA ORGHUM, PROVIDED, HOWEVER, THAT R ITS PRODUCTS 3) SERVICE DO ALL O UNDER WHICH GRAIN SORGHUM IS PR	AND EDUCATION PROMULGATE B RKET DEVELOPMENT SEEK TO DE THIS ASSOCIATION WILL NOT ENC THER THINGS THAT MAY SEEM RE ODUCED AND MARKETED, INCLUD	OTH PUBLIC AND PRIVATE RESEARC VELOP AND MAINTAIN DOMESTIC A GAGE IN THE BUSINESS OF BUYING ASONABLE AND APPROPRIATE FOR I ING COOPERATION WITH DEPARTMI	CH IN GRAIN SORGHUN ND FOREIGN MARKETS OR SELLING GRAIN MPROVING THE ENTS AND AGENCIES O
the prior Form 990 or 990-EZ?	2	Did the	organization undertake any significant i	program services during the year w	which were not listed on	
If "Ves," describe these new services on Schedule O  10 the organization cease conducting, or make significant changes in how it conducts, any program services or services?  10 the ves," describe these changes on Schedule O  11 Eves," describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section S01(c)(3) and S01(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 \$ )  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O )					mich were not nated on	□ves VNo
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?						Lies Lino
services?					ucts, any program	
4 Describe these changes on Schedule O  Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported  4a (Code ) (Expenses s including grants of s ) (Revenue s )  See Additional Data  4b (Code ) (Expenses s including grants of s ) (Revenue s )  Code ) (Expenses s including grants of s ) (Revenue s )  4c (Code ) (Expenses s including grants of s ) (Revenue s )  Other program services (Describe in Schedule O )			<u> </u>			☐ Yes ☑ No
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 \$ )  Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )						33 _ 110
See Additional Data  (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O )	4	Descril Sectioi	be the organization's program service act to 501(c)(3) and 501(c)(4) organizations	complishments for each of its three are required to report the amount		
4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  4d Other program services (Describe in Schedule O )	4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )		See Ad	litional Data			
4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )						
4d Other program services (Describe in Schedule O )	4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
4d Other program services (Describe in Schedule O )						
4d Other program services (Describe in Schedule O )						
4d Other program services (Describe in Schedule O )						
	4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
· · · · · · · · · · · · · · · · · · ·						
· ·						
(Expenses \$ including grants of \$ ) (Revenue \$ )	4d	Other	program services (Describe in Schedule	O )		
		(Exper	ses \$ includii	ng grants of \$	) (Revenue \$	)

19

21

	990 (2010)			Page 3
Par	IV Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🛸	2	Yes	
3	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	3	Yes	
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III 😼	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
.0	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏	10		No
.1	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			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🕏	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 🕏	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 😼	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏	11f	Yes	
.2a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII **	12a		No
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	12b	Yes	
.3	Is the organization a school described in section $170(b)(1)(A)(ii)$ ? If "Yes," complete Schedule E	13		No
.4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
.5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
L6	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	16		No
L7	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)	17		No

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

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

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

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

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

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

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

No Form **990** (2018)

Nο

Nο

Nο

Νo

18

19

20a

20b

21

Form	990 (2018)			Page <b>4</b>
Par	tiV Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,  Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule $M$	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?  If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	<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		
37	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? If "Yes," complete Schedule R, Part VI	37		No
38	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	
Pa	tV Statements Regarding Other IRS Filings and Tax Compliance			

 ${f c}$  Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 

1a

1b

9

0

Form **990** (2018)

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

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

Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 7h 

Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during 

8

9a

9h

13a

14a

14b

15

No

No

Form **990** (2018)

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

a Initiation fees and capital contributions included on Part VIII, line 12 . . .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Section 501(c)(7) organizations. Enter

11 Section 501(c)(12) organizations. Enter

**b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year? . . . . .

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

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

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

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

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 . . . . c Enter the amount of reserves on hand . . . . . . . . . . . . . . .

a Gross income from members or shareholders . 11a **b** Gross income from other sources (Do not net amounts due or paid to other sources 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

10a

10b

13b

13c

12b

Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?

orm 9	990 (2018)			Page <b>6</b>
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions  Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to	lınes 🗸
Sec	tion A. Governing Body and Management			1
			Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year 11			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 11			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a ·	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
.0a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
.2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
4	Did the organization have a written document retention and destruction policy?	14	Yes	
.5	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?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
.6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt			
:	status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
.7	List the States with which a copy of this Form 990 is required to be filed▶			
	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)			
	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			
0	State the name, address, and telephone number of the person who possesses the organization's books and records ▶TIMOTHY LUST 4201 NORTH I-27 LUBBOCK, TX 79403 (806) 749-3478			

Part VII

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)
- 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 Light Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

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

Companies   Comp	(A) Name and Title	(B) Average hours per week (list any hours		ne bo	ox, i n of tor/t	t ch unle ficei rust	ss pers and a	son	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
CALIFORNIA   CAL		organizations below dotted	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former			related
Comment   Comm					x				0	0	0
A					x				0	0	0
X					х				0	0	0
DIRECTOR									0	0	0
NAME									0	0	0
X	• • • • • • • • • • • • • • • • • • • •								0	0	0
STATES METEREN   X									0	0	0
X									0	0	0
CONTRICTOR   X									0	0	0
DIRECTOR									0	0	0
X 239,262 0 13,695  EXECUTIVE DIRECTOR									0	0	0
Form 990 (2018)					×				239,262	0	13,695
Form 990 (2018)											
Form 990 (2018)											
Form 990 (2018)											
											Form <b>990</b> (2018)

Form 990 (2018) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (D) (A) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation organization (Wany hours director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest compensatemptovee Individual trustee or director organizations related Institutional Trustee below dotted employee organizations line) 1b Sub-Total . . . . ۲ c Total from continuation sheets to Part VII, Section A . • d Total (add lines 1b and 1c) . 239,262 13,695 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 1 3 Did the organization list any former officer, director or trustee, key employee, or high line 1a? If "Yes," complete Schedule J for such individual . For any individual listed on line 1a, is the sum of reportable compensation and other co organization and related organizations greater than \$150,000? If "Yes," complete Sche

nest compensated employee on	
	3
compensation from the edule J for such	
	4
rappization or individual for	

(B)

Description of services

RETAINER FOR LOBBYING

RETAINER FOR LOBBYING

	Yes	No
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>		No
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
mulvidual	Yes	
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		No
ection B. Independent Contractors		
Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compe from the organization. Report compensation for the calendar year ending with or within the organization's tax year.	nsation	

(C)

Compensation

Form 990 (2018)

150,000

120,000

	-			1	_					_	$\overline{}$		-		
															_
		ser	VICE	es.	rer	nde	red	to	the	e o	raa	anı	zat	ıor	171
5	i	Did	an	УΙ	ber	sor	ılıs	te	lo b	n lı	ne	1a	re	ce	V€

Se	ction E	. Inde	pender	it Co	ntract	or
	services	s rendere	ed to the	orgar	ization?	?If
	Did dilly	PCISOII	iistea oii	mic I	a receiv	

compensation from the organization ▶ 2

COMBEST SELL & ASSOCIATES LLC

CORNERSTONE GOVERNMENT AFFAIRS

5109 82ND STSUITE 7-1111 LUBBOCK, TX 79424

800 MAIN AVE SW 7TH FLOOR WASHINGTON, DC 20024

1

Name and business address

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

								funct rever	I	revenue	tax under sections 512 - 514
	<b>1a</b> Federated campaig	ns	1a		l l			10001	ide		312 311
ants ants	<b>b</b> Membership dues		1b		4,000						
9 June 1	<b>c</b> Fundraising events		1c								
Z F	<b>d</b> Related organizatio	ns	1d								
<u>  [a</u>	e Government grants (co	ontributions)	1e		76,861						
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, and similar amounts no above		1f								
othe	g Noncash contribution in lines 1a - 1f \$	ons included									
	<b>h Total.</b> Add lines 1a	-1f			<b>&gt;</b>		80,861				
					Business	Code	00,001				
ج <u>ا</u> ج	2a MEMBERSHIP DUES					541900	51	10,116	510,11	6	
2	<b>b</b> COMMUNICATION SPON	ISORS				511120	Ċ	91,344		91,3	44
r G	C UCSP SERVICE FEE					541900	7	75,000	75,00	0	
Ž	d CONFERENCE REVENUE					541900	(	55,364	65,36	4	
3,	e SPONSORSHIP & PROJE	CT				541900	7	21,000	21,00	0	
gran						341900					
ا کھ	<b>f</b> All other program se			L	7	62,824				•	•
	<b>9 Total.</b> Add lines 2a-2			<u> </u>		•		1			<u> </u>
;	3 Investment income (ii similar amounts)	ncluding divid		interest, a	and other •						
4	<b>4</b> Income from investme			ond proce							
!	<b>5</b> Royalties				<b>&gt;</b>						
		(ı) Rea	ıl	(II) Pe	ersonal	4					
	<b>5a</b> Gross rents		13,940								
	<b>b</b> Less rental expenses		10,000			1					
	c Rental income or (loss)		3,940			1					
	<b>d</b> Net rental income o	r (loss)			<b>&gt;</b>	1	3,940				3,940
		(ı) Securi	ties	(11)	Other						
7	7a Gross amount from sales of assets other than inventory										
	<b>b</b> Less cost or other basis and sales expenses										
	C Gain or (loss)					_					
, ا	<b>d</b> Net gain or (loss) . <b>3a</b> Gross income from fi				<b>•</b>	-					
Other Revenue	(not including \$  contributions reporte See Part IV, line 18										
Rev	<b>b</b> Less direct expense:	s	b			_					
the	c Net income or (loss)  Gross income from g			ents .	• •	1					
9	See Part IV, line 19										
	<b>b</b> Less direct expense:		Ь								
1	<ul> <li>c Net income or (loss)</li> <li>0aGross sales of invent returns and allowance</li> </ul>	ies	<b>&gt;</b>								
	<b>b</b> Less cost of goods s										
	c Net income or (loss)		f <u>inv</u> ent	tory .	<u> </u>						
	Miscellaneous	Revenue			ss Code						
1	<b>l 1a</b> SUSTAINABLE CROF		524298	3	141,896	5		141,896			
	b SCI MANAGEMENT F		561000		120,000			120,000			
				l							
	с										
	d All other revenue .										
		-11d			<b>&gt;</b>		261,896	5			

orm 990 (2018)				Page <b>10</b>
Part IX Statement of Functional Expenses ection 501(c)(3) and 501(c)(4) organizations must complete all co	lumns All other orga	nizations must com	plete column (A)	
Check if Schedule O contains a response or note to any	line in this Part IX .		<u></u>	<u> <math>\square</math></u>
Do not include amounts reported on lines 6b, b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	252,957			
<b>6</b> Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	37,201			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	10,099			
. <b>0</b> Payroll taxes	19,496			
L1 Fees for services (non-employees)				
a Management				
b Legal				
<del>-</del>	6,634			
c Accounting				
d Lobbying	271,632			
e Professional fundraising services See Part IV, line 17				
f Investment management fees	20,199			
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
.2 Advertising and promotion	20,833			
.3 Office expenses	14,557			
.4 Information technology	8,663			
.5 Royalties				
. <b>6</b> Occupancy	32,321			
. <b>7</b> Travel	5,193			
8 Payments of travel or entertainment expenses for any federal, state, or local public officials	3,133			
L9 Conferences, conventions, and meetings	174,619			
· · · · · · · · · · · · · · · · · · ·	174,015			
20 Interest				
Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	6,741			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a UNRELATED BUS INC TAX	54,876			
b PRINTING & PUBLICATIONS	66,990			
c COMMUNICATIONS	31,390			
d DUES & SUBSCRIPTIONS	11,930			
e All other expenses	12,903			
25 Total functional expenses. Add lines 1 through 24e	1,059,234			
Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)				

6

8

9

10c

11

12

13

14

15

16

17

18

19

20

21

22 23

24

25

26

27 28

29

30

31 32

33

34

24.858

295,833

245.372

719.149

74.578

74.578

644.571

644.571

719,149

Page **11** 

300

285,833

397.306

818.761 23,536

90.329

113.865

704.896

704,896

818,761

Form **990** (2018)

of year

Check if Schedule O contains a response or note to any line in this Part IX .									
	В	egın	(A) ning	of y	ear			E	nd
Cash-non-interest-bearing						1			

2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	153,086	4	135,322
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
6	Loans and other receivables from other disqualified persons (as defined under			

400,000

114,167

Assets

12

13

14

15

16

17

18

19

20

21

23

24

26

27

28

29

31

32

33

34

Liabilities 22

Fund Balance

Assets or 30

Net

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 Notes and loans receivable, net . Inventories for sale or use .

Prepaid expenses and deferred charges 10a basis Complete Part VI of Schedule D

10a Land, buildings, and equipment cost or other Less accumulated depreciation 10b 11

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17 - 24)

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

Organizations that do not follow SFAS 117 (ASC 958), check here > \quad \text{and complete lines 30 through 34.}

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

**Total liabilities.**Add lines 17 through 25 .

Intangible assets . . . . .

Grants payable . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Unrestricted net assets

Investments—other securities See Part IV, line 11 .

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

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

Loans and other payables to current and former officers, directors, trustees,

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

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

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

Retained earnings, endowment, accumulated income, or other funds

Investments-program-related See Part IV, line 11

Form	990 (2018)				Page <b>12</b>
Pa	Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		<u> </u>
		_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			,109,521
2	Total expenses (must equal Part IX, column (A), line 25)	2		1	,059,234
3	Revenue less expenses Subtract line 2 from line 1	3			50,287
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			644,571
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			10,038
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			704,896
Pa	tXII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<b>✓</b>
				Yes	No
1	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	ĺ	No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both	on a			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both	basıs,			
	☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	3a		No

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

3b

Form **990** (2018)

## **Additional Data**

Software ID:

THE ASSOCIATION PROVIDED AND/OR SPONSORED AN ANNUAL CONVENTION, AN ANNUAL YIELD CONTEST, LEGISLATIVE AWARENESS. AND ONGOING PROMOTION.

Software Version:

**EIN:** 75-0972863

Name: NATIONAL SORGHUM PRODUCERS ASSOCIATION

Form 990 (2018)

Form 990, Part III, Line 4a:

EDUCATION, AND RESEARCH PROJECTS FOR THE GRAIN SORGHUM INDUSTRY

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

## **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

DLN: 93493055017000

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

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

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

Inspection

•	Section 527 organizations Comple	501(c)(3)) organızatıons  Complete F te Part I-A only n Form 990, Part IV, Line 4, or For		•		then	
• • f the Pro	Section 501(c)(3) organizations tha Section 501(c)(3) organizations tha	t have filed Form 5768 (election und t have NOT filed Form 5768 (election n Form 990, Part IV, Line 5 (Proxy is), then	er section 501(h))  Co n under section 501(h)	mplete Part II-A Do not i) Complete Part II-B D	com	nplete Part II-E ot complete Pa	art II-A
Na NA	me of the organization TIONAL SORGHUM PRODUCERS SOCIATION	zations Complete Part III		<b>Employer id</b> 75-0972863	lenti	fication nun	ıber
		nization is exempt under sec	tion 501(c) or is		niza	ation.	
1	Provide a description of the organ "political campaign activities")	nization's direct and indirect political	campaign activities in	Part IV (see instruction	s for	definition of	
2	Political campaign activity expend			•	\$		2,296
	Volunteer hours for political camp rt I-B Complete if the orga	paign activities (see instructions) nization is exempt under sec	ction 501(c)(3).				
1		ax incurred by the organization unde		<b>•</b>	\$		
2	· ·	ax incurred by organization manager		<b>&gt;</b>	\$		
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 f	or this year?			Yes	□ No
4a	Was a correction made?					□ Yes	□ No
b	If "Yes," describe in Part IV						
Pai	rt I-C Complete if the orga	nization is exempt under sec	tion 501(c), exce	pt section 501(c)(	3).		
1	Enter the amount directly expend	led by the filing organization for sect	ion 527 exempt functi	on activities 🕨	\$		
2	Enter the amount of the filing org function activities	ganization's funds contributed to othe	er organizations for se	ction 527 exempt	\$		2,296
3	Total exempt function expenditur	es Add lines 1 and 2 Enter here an	d on Form 1120-POL,	line 17b ▶	\$		2,296
4	Did the filing organization file Fo	rm 1120-POL for this year?			·	Yes	✓ No
5	organization made payments For of political contributions received	employer identification number (EIN r each organization listed, enter the that were promptly and directly deli ee (PAC) If additional space is need	amount paid from the vered to a separate po	filing organization's fun blitical organization, suc	ds A	Also enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid fror filing organization's funds If none, enter -0-		(e) Amount contributions and promp directly deliv separate porganization enter	received otly and vered to a political of the following th
(1):	SORGHUM PAC	4201 N I-27 LUBBOCK, TX 79403	75-0972863	2,2	96		
2							
3							
1							
5							
5							
or I	Paperwork Reduction Act Notice, see	the instructions for Form 990 or 990-l	EZ. Cat	No 50084S Schedule	C (Fo	rm 990 or 990	J-EZ) 2018

Calendar year (or fiscal year (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) Total beginning in) Lobbying nontaxable amount

Lobbying ceiling amount (150% of line 2a, column(e))

2a Total lobbying expenditures Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

	dule C (Form 990 or 990-EZ) 2018  rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fil	ed		Р	Page <b>3</b>
	Form 5768 (election under section 501(h)).	(:	a)	(b)	<u> </u>
or e ctiv	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity	Yes	No	Amoi	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ΙΓ		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		[		
Par	t III-A Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)$	(5), c	r section	1	
			_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	ــــــ
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		No
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				:)(6)
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
a	Current year	2a			
Ь	Carryover from last year	2b			
С _	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political				

## 5 Taxable amount of lobbying and political expenditures (see instructions) Part IV **Supplemental Information**

expenditure next year?

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
Part I-A, Line 1	THE CORPORATION FORMED A PAC TO SUPPORT CANDIDATES WHO SUPPORT THE SORGHUM INDUSTRY DURING THE YEAR ENDED SEPTEMBER 30, 2019 THE CORPORATION PROVIDED THE PAC SOME FUNDS FOR A FUNDRAISING EVENT
SCHEDULE C, PART III-A, LINE 1	REVENUE PROCEDURE 98-19 PROVIDES THAT, FOR PURPOSES OF THIS QUESTION AND RELATED REPORTING ISSUES, DUES ARE SUBSTANTIALLY NON-DEDUCTIBLE FOR A SECTION 501(C)(5) AGRICULTURAL AND HORTICULTURAL ORGANIZATION " IF MORE THAN 90% OF ALL ANNUAL DUES (OR SIMILAR AMOUNTS) ARE RECEIVED FROM PERSONS, FAMILIES, OR ENTITIES WHO EACH PAY ANNUAL DUES (OR SIMILAR AMOUNTS) OF \$75 00 OR LESS " AS ADJUSTED FOR INFLATION REVENUE PROCEDURE 2017-58 ADJUSTED THIS THRESHOLD TO \$115 00 SINCE THE ANNUAL DUES OF THE MEMBERS OF THE ORGANIZATION ARE \$100 00, THE ORGANIZATION HAS ANSWERED YES TO SCHEDULE C, PART III-A, LINE 1

5

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

**Supplemental Financial Statements** 

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

DLN: 93493055017000

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization **Employer identification number** NATIONAL SORGHUM PRODUCERS ASSOCIATION 75-0972863 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) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 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? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(II)? 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. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the

Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D

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

following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Schedule D (Form 990) 2018

Par	t III	Organizations Ma	aintaining Col	lections o	of Art, F	listori	cal Tı	reası	ıres, oı	Other	Similar As	sets (	continued)
3		the organization's acq	uisition, accession	n, and other	r records,	check	any of	the fo	llowing t	hat are a	significant u	ise of its	collection
а	items	s (check all that apply)				d							
	Ш	Public exhibition				•	Ш	Loan	or excha	ange pro	grams		
b		Scholarly research				е		Othe	r				
С		Preservation for future	e generations										
4	Provi Part :	de a description of the XIII	organızatıon's col	lections and	explain	how the	ey furth	ner the	e organız	ation's e	xempt purpo	se in	
5		ng the year, did the organise to be sold to raise fur									nılar	☐ Ye	s 🗆 No
Pa	rt IV	Escrow and Cust											
		Complete if the org X, line 21.	ganization answ	vered "Yes	" on For	m 990	, Part	IV, II	ne 9, or	r report	ed an amou	int on F	orm 990, Part
1a		e organization an agent ded on Form 990, Part )		an or other	ıntermed	iary for	contri	bution	s or othe	er assets	not	☐ Ye	es 🗌 No
ь	If "Y€	es," explain the arrange	ement in Part XIII	and comple	ete the fo	llowing	table				A	mount	
c		nning balance		·					l	1c			
d	Addıt	ions during the year								1d			
е	Distri	butions during the year	r							1e			
f	Endır	ng balance								1f			
2a	Did tl	he organization include	an amount on Fo	rm 990. Pa	rt X. line	21. for	escrow	or cu	Istodial a	ccount li	ability?	Пуе	s 🗆 No
ь		es," explain the arrange										_	
_	rt V	Endowment Fund											
				(a)Currer			rior yea				(d)Three yea		(e)Four years back
<b>1</b> a	Beginn	ning of year balance .											
b	Contrib	outions											
c	Net inv	vestment earnings, gair	ns, and losses										
d	Grants	or scholarships	•										
е		expenditures for facilitie	es										
f	Admin	strative expenses .											
g	End of	year balance											
2	Provi	de the estimated percei	ntage of the curre	ent vear end	d balance	(line 1	a. colu	mn (a	)) held a	s	1	<u> </u>	
а		d designated or quasi-e		,		<b>,</b>	5,		,,				
b	Perm	anent endowment ▶											
c	Temp	porarily restricted endov	wment ▶										
·		percentages on lines 2a		ld equal 10	0%								
3а		here endowment funds nization by	not in the posses	sion of the	organızat	on tha	t are h	eld an	d admını	stered fo	or the		Yes No
	(i) u	nrelated organizations										3	a(i)
		elated organizations .											n(ii)
b		es" on 3a(II), are the rel	-		•			?.				Ŀ	3b
4	_	ribe in Part XIII the inte			n s endo	wment	runas						
Pa	rt VI	Land, Buildings, Complete if the org			" on For	m 990	Part	TV li	ne 11a	See Fo	rm 990 Pa	rt X lır	ne 10
	Descr	iption of property	(a) Cost or oth (investme	er basıs	(b) Cost						depreciation		d) Book value
	Land												
		igs					40	00,000			114,167		285,833
		nold improvements											
		nent											
	Other												
		lines 1a through 1e (Co	u Olumn (d) must e	qual Form 9	990, Part	X, colui	nn (B)	, line .	10(c))		<b>&gt;</b>		285,833
											Sch	edule D	(Form 990) 2018

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	organiza	ation answ	ered "Yes" on F	orm 990, Pai	t IV, line 11b.
(a) Description of security or category (including name of security)		(b) Book value		c) Method of va	
(1) Financial derivatives		397,306		F	
(3)Other		337,300		<u> </u>	
(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.	•	397,306			
Complete if the organization answered 'Yes' on Fo					
(a) Description of investment	(b) E	Book value		<b>c)</b> Method of 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 Fo	rm 990, Pa	rt IV, line 11d Se	e Form 990, Pa	art X, line 15
(a) Description					(b) Book value
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )				•	
<b>Part X Other Liabilities.</b> Complete if the organization an See Form 990, Part X, line 25.	swered "	Yes' on Fo	rm 990, Part IV	, line 11e or	11f.
(a) Description of liability     (1) Federal income taxes		<b>(b)</b> Bo	ook value		
(1) reactar medice taxes					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	<u> </u>				
2. Liability for uncertain tax positions. In Part XIII, provide the text of to organization's liability for uncertain tax positions under FIN 48 (ASC 74)					

Schedule D (Form 990) 2018

Pa		venue per Audited Financial Statements With Reve zation answered 'Yes' on Form 990, Part IV, line 12a.	nue per Return	
1		upport per audited financial statements	. 1	
2		ot on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on i	nvestments   2a		
b	Donated services and use of facil	ties		
С	Recoveries of prior year grants	2c		
d				
е	Add lines 2a through 2d		2e	
3	Subtract line <b>2e</b> from line <b>1</b> .		3	
4	Amounts included on Form 990, I	Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not include	d on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII ) .	4b		
С	Add lines 4a and 4b	<del></del>	4c	
5	Total revenue Add lines 3 and 4	c. (This must equal Form 990, Part I, line 12)	. 5	
Par		penses per Audited Financial Statements With Expersation answered 'Yes' on Form 990, Part IV, line 12a.	enses per Return	
1	Total expenses and losses per au	dited financial statements	. 1	
2	Amounts included on line 1 but n	ot on Form 990, Part IX, line 25		
а	Donated services and use of facil	ties		
b	Prior year adjustments			
С	Other losses	2c		
d	Other (Describe in Part XIII ) $\ .$	2d		
е	Add lines 2a through 2d	<del></del>	. 2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .		. 3	
4	Amounts included on Form 990, I	Part IX, line 25, but not on line 1:		_
а	Investment expenses not include	d on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII ) $\ .$	4b		
С	Add lines 4a and 4b	<del></del>	. 4с	
5	Total expenses Add lines 3 and 4	1c. (This must equal Form 990, Part I, line 18)	5	
Pai	t XIII Supplemental Info	ormation		
		art II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b s 2d and 4b  Also complete this part to provide any additional info		4, Part X, line 2, Part
	Return Reference	Explanation		
See /	Addıtıonal Data Table			

Page **4** 

Schedule D (Form 990) 2018	Page <b>5</b>
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

## Additional Data

Software Version:

Software ID:

**EIN:** 75-0972863

Name: NATIONAL SORGHUM PRODUCERS

ASSOCIATION

**Supplemental Information** 

Return Reference

Explanation

Part X, Line 2

NSPA HAS ADOPTED THE "UNCERTAIN TAX POSITIONS" PROVISIONS OF ACCOUNTING PRINCIPLES GENERAL LY ACCEPTED IN THE UNITED STATES OF AMERICA. THE PRIMARY TAX POSITION OF NSPA IS ITS FILIN G STATUS AS A TAX EXEMPT ENTITY. NSPA DETERMINED THAT IT IS MORE LIKELY THAN NOT THAT THEI R TAX POSITION WILL BE SUSTAINED UPON EXAMINATION BY THE INTERNAL REVENUE SERVICE (IRS), OR OTHER STATE TAXING AUTHORITIES THERE WERE NO PENALTIES OR INTEREST RECOGNIZED DURING THE YEARS ENDED SEPTEMBER 30, 2019 AND 2018. NSPA IS NO LONGER SUBJECT TO EXAMINATIONS BY FEDERAL TAXING AUTHORITIES FOR YEARS BEFORE 2015

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	19305	55017	000		
Sch	edule J	Co	ompensati	ion Information	10	1B No	1545-0	0047		
(For	n 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest								
		► Complete if the org	Compensa anization answ	ated Employees vered "Yes" on Form 990, Part IV	, line 23.	2018				
Depar	tment of the Treasury	▶ Go to www.irs.ao		to Form 990. instructions and the latest infor		)pen i				
Intern	al Revenue Service	-				Insp	ectio	n		
	ne of the organiza IONAL SORGHUM PR				Employer identificat	tion nu	ımber			
	OCIATION				75-0972863					
Pa	rt I Questi	ons Regarding Compensa	tion							
1a				f the following to or for a person liste y relevant information regarding the			Yes	No		
	☐ First-class	s or charter travel		Housing allowance or residence for	personal use					
	☐ Travel for	companions		Payments for business use of perso	nal residence					
	☐ Tax idemi	nification and gross-up payment	s 📙	Health or social club dues or initiati				1		
	☐ Discretion	nary spending account	Ц	Personal services (e g , maid, chau	ffeur, chef)					
b		xes in line 1a are checked, did th all of the expenses described abo		ollow a written policy regarding payn iplete Part III to explain	nent or reimbursement	1b				
2				or allowing expenses incurred by all	- 1-3	2				
	airectors, truste	es, officers, including the CEO/E	executive Director	r, regarding the items checked in line	e Ia'					
3	organization's C	EO/Executive Director Check al	I that apply Dor	ed to establish the compensation of t not check any boxes for methods CEO/Executive Director, but explain						
	Compose.	ation committee		Written employment centract						
		ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study						
		of other organizations	$\overline{\checkmark}$	Approval by the board or compensa	ation committee					
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the f	filing organization or a					
_	_		tral naumant?			4-		No		
a b		ance payment or change-of-cont r receive payment from, a suppl		ified retirement plan?		4a 4b		No No		
c	•	r receive payment from, a suppl r receive payment from, an equi	•	·		4c		No		
_	•			olicable amounts for each item in Par	t III					
	Only 501(c)(3	), 501(c)(4), and 501(c)(29)	organizations	must complete lines 5-9.						
5	For persons liste		n A, line 1a, did	the organization pay or accrue any						
а	The organization	n?				5a				
b	Any related orga					5b				
	-	5a or 5b, describe in Part III								
6		ed on Form 990, Part VII, Sectio ontingent on the net earnings of		the organization pay or accrue any						
a	The organization					6a				
b	Any related orga					6b				
-	•	6a or 6b, describe in Part III	m A luma 4 1 1 1	<u> </u>	. 4					
7		ed on Form 990, Part VII, Section escribed in lines 5 and 67 If "Yes		the organization provide any nonfixe rt III	e <b>a</b>	7				
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," d	escribe	8				
9	If "Yes" on line 53 4958-6(c)?	8, did the organization also follo	w the rebuttable	presumption procedure described in	Regulations section	9				
For I	Paperwork Redu	iction Act Notice, see the Ins	tructions for Fo	orm 990. Cat No	50053T Schedule J	(Forn	1 990)	2018		

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 (D) Nontaxable (C) Retirement and (E) Total of columns (F) Compensation in column (B) reported other deferred benefits (B)(i)-(D)(i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 TIMOTHY LUST 219,262 (i) 20,000 6.000 7.695 252,957 EXECUTIVE DIRECTOR 0 (ii)

Schedule J (Form 990) 2018 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

Schedule J (Form 990) 2018

efile GRAPH	IIC print -	DO NOT PROCESS As Filed Data -	DLI	N: 93493055017000			
SCHEDUL (Form 990 or EZ)		Supplemental Information to Form 990 or 9  Complete to provide information for responses to specific question  Form 990 or 990-EZ or to provide any additional information  Attach to Form 990 or 990-EZ.	ons on	2018			
Department of the Treasury  Factach to Form 990 of 990-22.  So to <u>www.irs.qov/Form990</u> for the latest information.				Open to Public Inspection			
Name Stherofe NATIONAL SORGH ASSOCIATION 990 Schedul	IUM PRODUCE	RS	<b>Employer iden</b> 75-0972863	ntification number			
Return Reference		Explanation					
Form 990, Part VI, Section A, line 4  ARTICLE IV BOARD OF DIRECTORS SECTION 5 TERMS WAS AMENDED TO ALLOW AT THE BOARD'S discretion on one and only one seat (of the 11 voting members) may be appointed by the elected member so to serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve a 3 year term with no term limits and subject to reappointment by the elected member so the serve and				D'S discreti			

990 Schedule O, Supplemental Information

Return Reference	Explanation
Form 990, Part VI, Section A, Iine 6	THE CORPORATION WAS FORMED BY THE MEMBERS TO REPRESENT SORGHUM PRODUCERS THROUGH PROGRAMS OF LEGISLATIVE AND REGULATORY REPRESENTATION, RESEARCH, EDUCATION, AND MARKET DEVELOPMENT OF SORGHUM PRODUCTION The Corporation shall have two classes of members "Producer" membe rs shall consist of individuals or other legal entities who are engaged in the production of sorghum and have paid dues as determined by the Board's current dues structure, and "As sociate" members shall consist of individuals or other legal entities who are not engaged in the production of sorghum and have paid dues as determined by the Board's current dues structure

Return Explanation
Reference

Form 990,
Part VI,
Section A,
In TERM'S DIRECTORS

A NOMINATING COMMITTEE, CHAIRED BY THE PAST-CHAIRMAN, REVIEW BOARD APPLICATIONS AND MAKE R
ECOMMENDATIONS TO THE FULL BOARD FOR APPROVAL THE FULL BOARD OF DIRECTORS ELECT THE NEXT
TERM'S DIRECTORS

Return Explanation
Reference

Form 990,
Part VI,
Section B,
Inne 11b

MANAGEMENT PRESENTED A COPY OF THE FORM 990 TO THE BOARD FOR DISCUSSION, REVIEW AND APPROV
AL PRIOR TO FILING THE DISCUSSION AND REVIEW WAS PERFORMED AT THE BOARD MEETING IMMEDIATE

LY BEFORE FILING THE FORM 990

Return Explanation
Reference

WED ON AN ANNUAL BASIS

Form 990,
Part VI,
Section B,
Intel BOARD OF DIRECTORS AND OFFICERS ARE REQUIRED TO REVIEW AND BE FAMILIAR WITH THE POLICI
ES OUTLINED IN THE ORGANIZATION'S CONFLICT OF INTEREST POLICY THE BOARD OF DIRECTORS AND
OFFICERS ARE REQUIRED TO DISCLOSE ANY ACTION OR SITUATION THAT MIGHT VIOLATE THE POLICY TO
THE FULL BOARD OF DIRECTORS AS SOON AS POSSIBLE THE CONFLICT OF INTEREST POLICY IS REVIE

Return Explanation
Reference

Form 990,	THE BOARD USES A COMPENSATION SURVEY WHEN DETERMINING THE COMPENSATION OF THE EXECUTIVE DI
Part VI,	RECTOR THE SURVEY INCLUDES SALARIES FROM SIMILARLY SITUATED ORGANIZATIONS THROUGHOUT TEXA
Section B,	S AND THE NATION THE ASSOCIATION DOES NOT HAVE ANY OTHER EMPLOYEES MEETING THE DEFINITION
line 15	OF OFFICER OR KEY EMPLOYEE

Return Explanation
Reference

Form 990,	THE ASSOCIATION WILL PROVIDE A COMPLETE COPY OF ITS GOVERNING DOCUMENTS, CONFLICT OF INTER
Part VI,	EST POLICY, AND AUDITED FINANCIAL STATEMENTS TO ANY MEMBER WHO REQUESTS A COPY OF ANY SUCH
Section C,	DOCUMENT THE GOVERNING DOCUMENTS AND AUDITED FINANCIAL STATEMENTS ARE ALSO AVAILABLE FOR
line 19	VIEWING BY THE PUBLIC AT THE ASSOCIATION'S OFFICE IN LUBBOCK. TX

Return Explanation
Reference

Form 990, Part XI, line EQUITY METHOD INCOME FROM SORGO TRIO, INC & SUSTAINABLE CROP INSURANCE LP 10,038

Return Explanation

Reference	
	THE BOARD AS A WHOLE IS RESPONSIBLE FOR OVERSEEING THE FINANCIAL STATEMENT AUDIT AND SELECTING THE INDEPENDENT FINANCIAL STATEMENT AUDITOR
,	

efile GRAPHIC print - DC	NOT PROCESS	As Filed Data -										DLN: 93493	055017	000
SCHEDULE R (Form 990) Department of the Treasury	<b>▶</b> 0	Related ( Complete if the organ	nization an	swered "Yes ▶ Attach to	s" on Form Form 990.	990, Parl	IV, line 33	, 34, 35b,		37.		Open t	18 • Public	
Internal Revenue Service  Name of the organization NATIONAL SORGHUM PRODUCERS ASSOCIATION										loyer identif 972863	ication		ection	
Part I Identification	of Disregarded E	<b>ntities</b> Complete ıf	the organ	ızatıon answ	ered "Yes	" on Form	990, Part	IV, line 3						
Name, address, and	(a) EIN (If applicable) of disre	egarded entity		(b) Primary a			c) nicile (state n country)	(d) Total inco	ome	<b>(e)</b> End-of-year as	sets	(1 Direct co ent	introlling	
Part II Identification of	of Related Tax-Ex	empt Organizatio	<b>1s</b> Comple	ete if the org	anization	answered	"Yes" on F	orm 990.	Part IV	/. line 34 be	cause	ıt had one or	more	
	npt organizations di													
Name, address, and	(a) d EIN of related organızatı	on	Prim	<b>(b)</b> ary activity	Legal dom	c) nicile (state n country)	(d) Exempt Cod		Public ch	(e) narity status n 501(c)(3))	Dır	<b>(f)</b> rect controlling entity	Section (13) cor enti	512(b) trolled
For Paperwork Reduction Ac	t Notice see the Inc	structions for Form (	190			nt No 5013	35Y				Sche	edule R (Form	990) 26	118

SUSTAINABLE CROP INSURANCE SERVICES LP  IN INTERSTATE 27 BOCK, TX 794037507  SOURCE, TX 794037507	prporation o	or Tron or to	trust durin		141,896	463,263 swered "Ye	Yes	No No	141,896		No	98 00
INSURATE 27 30CK, TX 794037507 998558  TELIV Identification of Related Organizations Taxable as a Corporation of Related Organizations Taxable as a Corporation of Related Organizations treated as a Corporation of Related Organization of Related Organizations Taxable as a Corporation of Related Organization of Related	prporation of a corporation (c) Leg	or Tron or to	SORGHUM PRODUCERS  Fust Completrust during	ete if the orga			s" on I					98 01
Decause it had one or more related organizations treated as a  (a)  Name, address, and EIN of related organization  ORGO TRIO INC  INVESTMENT HOLDING COMPANY  OCK, TX 794037507	a corporation (c) Leg domin (state or	on or t	trust durin	the tax year.	nization ans	swered "Ye	s" on I	Form	990, Part I	Z, line	a 34	
Decause it had one or more related organizations treated as a  (a)  Name, address, and EIN of related organization  ORGO TRIO INC  N INTERSTATE 27 OCK, TX 794037507	a corporation (c) Leg domin (state or	on or t	trust durin	the tax year.	nization ans	swered "Ye	s" on I	Form 9	990, Part I	J, line	e 34	
because it had one or more related organizations treated as a  (a)  Name, address, and EIN of related organization  ORGO TRIO INC  N INTERSTATE 27 OCK, TX 794037507	a corporation (c) Leg domin (state or	on or t	trust durin	the tax year.	nization ans	swered "Ye	s" on I	Form 9	990, Part I	√, line	e 34	
Decause it had one or more related organizations treated as a  (a)  Name, address, and EIN of related organization  ORGO TRIO INC  N INTERSTATE 27 OCK, TX 794037507	a corporation (c) Leg domin (state or	on or t	trust durin	the tax year.	nization ans	swered "Ye	s" on I	Form 9	990, Part I	V, line	e 34	
Decause it had one or more related organizations treated as a  (a)  Name, address, and EIN of related organization  ORGO TRIO INC  N INTERSTATE 27 OCK, TX 794037507	a corporation (c) Leg domin (state or	on or t	trust durin	the tax year.	nızatıon ans	swered "Ye	s" on I	Form 9	990, Part I	v, line	e 34	
related organization  DRGO TRIO INC  INVESTMENT HOLDING COMPANY  N INTERSTATE 27 OCK, TX 794037507	Leg domi (state or	egal		(4)								
N INTERSTATE 27 OCK, TX 794037507	count	or foreig		rect controlling 📗	(e) Type of entity Corp, S corp, or trust)	(f) Share of tota Income	al Shar	(g) re of end year assets	d-of- Per ow	(h) centage nership		(ı) Section 5 (13) cont entity
	TX		SC PR	TIONAL C RGHUM DDUCERS SOCIATION		12,89	96	34,	,258 100	000 %		Yes Yes
												$\dashv$

Schedule R (Form 990) 2018		Pa	ge <b>3</b>
Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	П		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or(iv) rent from a controlled entity	1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)	<b>1</b> b		No
c Gift, grant, or capital contribution from related organization(s)	1c		No
d Loans or loan guarantees to or for related organization(s)	<b>1</b> d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	<b>1</b> g	$\neg \neg$	No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	<b>1</b> i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	10		No
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No
q Reimbursement paid by related organization(s) for expenses	<b>1</b> q	Yes	
r. Other transfer of cash or property to related organization(s)	1r		No

k Lease of facilities, equipm	ent, or other assets from related organization(s)				1k	No	
l Performance of services o	membership or fundraising solicitations for related organization(s) $\dots$ .						
<b>m</b> Performance of services o	r membership or fundraising solicitations by related organization(s) $\ldots$ .						
<b>n</b> Sharing of facilities, equip	ment, mailing lists, or other assets with related organization(s)						
<b>o</b> Sharing of paid employee	s with related organization(s)				10	No	
<b>p</b> Reimbursement paid to re	elated organization(s) for expenses				1p	No	
<b>q</b> Reimbursement paid by r	elated organization(s) for expenses				1q Ye	s	
r Other transfer of cash or	property to related organization(s)				1r	No	
<b>s</b> Other transfer of cash or	property from related organization(s)				1s	No	
2 If the answer to any of th	e above is "Yes," see the instructions for information on who must complete this	line, including covered	relationships and tra	ansaction thresholds			
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining an	nount involv	/ed	
(1)SUSTAINABLE CROP INSURANCE	_P	Q	120,000	CASH			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	01	(e) re all partners section 501(c)(3) rganizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(1) General o managin partner	g	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
													_
													_
	•								•	Schedul	e R (Form	1 99	0) 2018

