# ggn

Paid

Preparer

Use Only

ALFONSO PERILLO

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047 Open to Public

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

Department of the Treasury Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection and ending A For the 2015 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change FARM AID, INC Name change 36-3383233 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Final return/ (617)354-2922501 CAMBRIDGE STREET, 3RD FLOOR termin-ated 4,464,786. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return CAMBRIDGE, MA 02141 H(a) Is this a group return Applica-F Name and address of principal officer: GLENDA YODER Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) ( ) ◀ (insert no.) L 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.FARMAID.ORG **H(c)** Group exemption number ▶ **K** Form of organization: **X** Corporation Association Other > L Year of formation: 1985 M State of legal domicile: IL Part I Summary Briefly describe the organization's mission or most significant activities: FARM AID'S MISSION IS TO BUILD A Activities & Governance VIBRANT, FAMILY FARM-CENTERED SYSTEM OF AGRICULTURE IN AMERICA. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. 11 Number of voting members of the governing body (Part VI, line 1a) <u>11</u> Number of independent voting members of the governing body (Part VI, line 1b) 17 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) <u> 300</u> 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, line 34 ..... 7b **Prior Year Current Year** 1,299,576. 15,265. 1,787,621. Contributions and grants (Part VIII, line 1h) Revenue Program service revenue (Part VIII, line 2g) 27,648. 37,183. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 12,783. 959,240. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1,828,052. 2,311,264. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) ........ 607,766. 672,512. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 842,014. 699,013. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 579,544. 876,487. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,029,324. 2,248,012. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -201,272 63,252. Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year **End of Year** 2,392,705. 2,383,436. 20 Total assets (Part X, line 16) 148,205. 166,254. 21 Total liabilities (Part X, line 26) 2,217,182. 2,244,500. Net assets or fund balances. Subtract line 21 from line 20 Part II | 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. Signature of officer Date Sign GLENDA YODER, ASSOC. DIRECTOR & ASSIST. TREASURER Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature

X Yes No

P00950491

04-2442519

if self-employed

Phone no. 617 - 227 - 6161

Firm's EIN ▶

11/14/16

Firm's address 160 FEDERAL STREET, 9TH FLOOR

Firm's name EDELSTEIN AND COMPANY, LLP

BOSTON, MA 02110 May the IRS discuss this return with the preparer shown above? (see instructions)

. u.	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission:	_
	FARM AID'S MISSION IS TO BUILD A VIBRANT, FAMILY FARM-CENTERED SYSTEM	
	OF AGRICULTURE IN AMERICA. IT HOSTS AN ANNUAL CONCERT TO CELEBRATE	
	FARMERS, EATERS AND ARTISTS COMING TOGETHER FOR CHANGE IN AMERICA'S	
	FARM AND FOOD SYSTEM, AND TO INSPIRE PEOPLE TO CHOOSE FAMILY FARM	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	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 X	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 \$ 664,156 • including grants of \$ 340,765 • ) (Revenue \$ 640	. 1
	HELPING FARMERS THRIVE - THROUGH THE 1-800-FARM-AID HOTLINE AND	— ′
	FARMHELP@FARMAID.ORG EMAIL SERVICE, FARM AID'S FARM ADVOCATE REFERS	
	FARMERS TO AN EXTENSIVE NETWORK OF FAMILY FARM AND RURAL SUPPORT	
	ORGANIZATIONS ACROSS THE COUNTRY. REFERRALS PROVIDE IMMEDIATE SUPPORT	
	TO FARM FAMILIES IN CRISIS AND FARMERS SEEKING TO TRANSITION TO MORE	
	SUSTAINABLE FARMING PRACTICES, AS WELL AS FOR INDIVIDUALS LOOKING TO	
	BECOME FARMERS. THERE WERE 425 CALLS AND EMAILS TO THE FARM AID HOTLIN	ſΕ
	IN 2015 AND 145 ADDITIONAL FARMERS WHO RECEIVED DISASTER REFERRALS IN	
	SOUTH CAROLINA FOLLOWING HURRICANE JOAQUIN.	
	EXDM ATD'C DECOMPOR MEMBIODE /EXDMATD ODG/TDEAC\ OFFEDC AN INMEDACUTUE	
	FARM AID'S RESOURCE NETWORK (FARMAID.ORG/IDEAS) OFFERS AN INTERACTIVE WEBSITE AND DATABASE OF MORE THAN 750 ORGANIZATIONS THAT PROVIDE	
4b		<b>)</b> • )
40	(Code:) (Expenses \$ 492,428 ·	• )
	REGIONAL AND NATIONAL ORGANIZATIONS TO PROMOTE FAIR FARM POLICIES AND	
	GRASSROOTS ORGANIZING EFFORTS. FARM AID GRANTED \$235,000 TO FAMILY FAR	Μ
	ORGANIZATIONS WORKING TO KEEP FAMILY FARMERS ON THE LAND AND STRENGTHE	N
	LOCAL AND SUSTAINABLE AGRICULTURE.	
	FARM AID ALSO PROVIDED \$13,747 IN FARMER LEADERSHIP GRANTS TO FARM	
	ORGANIZATIONS TO DEFRAY EXPENSES FOR FARMER LEADERSHIP TRAINING PROGRAMS, STRATEGY MEETINGS AND OTHER OPPORTUNITIES TO ELEVATE THE	
	PROGRAMS, STRATEGY MEETINGS AND OTHER OPPORTUNITIES TO ELEVATE THE VOICE OF FAMILY FARMERS. THE LEADERSHIP FUND HELPED COVER EXPENSES FOR	,
	FARMERS AND FARM ADVOCATES TO TRAVEL TO ATLANTA, GEORGIA, FOR THE	-
	SOUTHEASTERN SUSTAINABLE LIVESTOCK CONFERENCE; TO CHICAGO, ILLINOIS, T	0'
4c	(Code: ) (Expenses \$ 310,840 • including grants of \$ 0 • ) (Revenue \$ 14,625	
	PROMOTING FOOD FROM FAMILY FARMS - THE HEART OF FARM AID'S WORK TO	<u> </u>
	PROMOTE FOOD FROM FAMILY FARMS IS OUR ANNUAL CONCERT EVENT. FARM AID	
	30-OUR 30TH ANNIVERSARY-WAS HELD AT FIRSTMERIT BANK PAVILION AT	
	NORTHERLY ISLAND, IN CHICAGO, ILLINOIS, ON SEPTEMBER 19. A CROWD OF	
	MORE THAN 27,000 ENJOYED PERFORMANCES BY FARM AID BOARD MEMBERS WILLIE	<u>.                                    </u>
	NELSON, NEIL YOUNG, JOHN MELLENCAMP, AND DAVE MATTHEWS WITH TIM	
	REYNOLDS. ADDITIONAL ARTISTS INCLUDED IMAGINE DRAGONS, JACK JOHNSON,	
	KACEY MUSGRAVES, MAVIS STAPLES, OLD CROW MEDICINE SHOW, JAMEY JOHNSON, HOLLY WILLIAMS, LUKAS NELSON & PROMISE OF THE REAL, INSECTS VS ROBOTS,	
	IAN MELLENCAMP, AND THE BLACKWOOD QUARTET. THE ARTISTS GENEROUSLY	
	DONATED THEIR TIME AND TRAVEL EXPENSES. [NOTE: REVENUES ABOVE DO NOT	
	REFLECT THE \$2.8 M IN CONCERT RECEIPTS REPORTED ON PART VIII, LINE 8A.	T
4d	Other program services (Describe in Schedule O.)	<u>-</u>
	(Expenses \$ 242,097 • including grants of \$ 83,000 •) (Revenue \$ 0 •)	
4e	Total program service expenses ► 1,709,521.	
	Form <b>990</b> (2	015

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# $\begin{array}{c|cccc} Form \ 990 \ (2015) & FARM \ AID \ , & INC \\ \hline \textbf{Part IV} \ \textbf{Checklist of Required Schedules} \\ \end{array}$

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		<b>.</b>
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_	v	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		x
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	•		1
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	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		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		37	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			x
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	טדו		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	_		
-	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	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	19		Х
			000	

Form **990** (2015)

# $\begin{array}{c|cccc} Form \ 990 \ (2015) & FARM \ AID \ , & INC \\ \hline \textbf{Part IV} & \textbf{Checklist of Required Schedules} \ (\textit{continued}) \end{array}$

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	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	21	Х	
22	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	22	Х	
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		Х
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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
<b>2</b> 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		<del></del>
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		054		x
00	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,"			X
	complete Schedule L, Part II	26		
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			\ <sub>3,7</sub>
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			l
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
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		Х
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		Х
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		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
- •	If "Yes," complete Schedule R, Part V, line 2	36		х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		<u> </u>
55	Note. All Form 990 filers are required to complete Schedule O	38	Х	
	1301017 W. F. Grant Good more departed to complete Contourie C	_ 50	<del></del> -	

Form **990** (2015)

FARM AID, INC 36-3383233 Page 5

# Form 990 (2015) FARM AID, INC | 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		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	38					
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0					
	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming					
	(gambling) winnings to prize winners?			1c	Х			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return	2a	17					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	Х			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		Х		
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	0		3b				
<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	accou	nt)?	4a		X		
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 A	Accour	nts (FBAR).					
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action	?	5b		X		
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	he org	anization solicit					
	any contributions that were not tax deductible as charitable contributions?			6a		X		
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	tions c	or gifts					
	were not tax deductible?			6b				
7	Organizations that may receive deductible contributions under section 170(c).							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices <sub>I</sub>	provided to the payor?	7a	X			
				7b	X			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	uired	_		v		
	to file Form 8282?	 I – .	I	7c		X		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	10	_		v		
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		X		
Ť	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution of the literature of the l		200	7f		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file File the organization received a contribution of organization and the organization and the organization received a contribution of organization and the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization and the organization are also as a simple of the organization are also as a simple of the organization and the organization are also as a simple of the organization are also as a simple of the organization are also as a simple of the organization are also as a simple organization and the organization are also as a simple organization and the organization are also as a simple organization are also a			7g		X		
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz <b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained			7h		21		
8	sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	а Бу ш	e	8				
9	Sponsoring organizations maintaining donor advised funds.							
	Did the sponsoring organization make any taxable distributions under section 4966?			9a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b				
10	Section 501(c)(7) organizations. Enter:							
	Initiation fees and capital contributions included on Part VIII, line 12	10a						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders	11a						
	Gross income from other sources (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)	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	12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?			13a				
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
	organization is licensed to issue qualified health plans	13b						
	Enter the amount of reserves on hand	13c				77		
	• • • • • • • • • • • • • • • • • • • •			14a		Х		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b	000	(0045)		
				rorm	<b>330</b>	(2015)		

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year									
	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 1									
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	Х							
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		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?	6		Х						
7a										
	more members of the governing body?	7a		Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b		Х						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a		X						
b	Other officers or key employees of the organization	15b		Х						
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE O									
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	ole							
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website Another's website X 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	l finan	cial							
	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:									
	GLENDA YODER - (617)354-2922									
	501 CAMBRIDGE STREET 3RD FLOOR, CAMBRIDGE, MA 02141									

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)			((	C)			(D)	(E)	(F)
Name and Title	Average hours per		not c	Position check more than one less person is both an				Reportable compensation	Reportable compensation	Estimated amount of
	week (list any	offi				or/trus		from	from related organizations	other compensation
	hours for related organizations	Individual trustee or director	Institutional trustee		loyee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related
	below line)	ndividu	nstitutio	Officer	Key employee	Highest employe	Former			organizations
(1) WILLIE NELSON	1.00							_	_	_
CHAIR	1 00	Х		Х				0.	0.	0
(2) PAUL ENGLISH	1.00	٠,		,,					0	_
TREASURER	1.00	Х		Х				0.	0.	0
(3) LANA NELSON SECRETARY	1.00	X		х				0.	0.	0
(4) DAVID ANDERSON	1.00	123						0.	<u> </u>	
DIRECTOR		x						0.	0.	0
(5) RICHARD FIELDS	1.00									
DIRECTOR		Х						0.	0.	0
(6) JOEL KATZ	1.00									
DIRECTOR		Х						0.	0.	0
(7) DAVID MATTHEWS	1.00								0	
DIRECTOR	1 00	Х						0.	0.	0
(8) JOHN MELLENCAMP DIRECTOR	1.00	X						0.	0.	0
(9) MARK ROTHBAUM	1.00	<del> </del>						•	•	
DIRECTOR		x						0.	0.	0
(10) EVELYN SHRIVER	1.00									
DIRECTOR		Х						0.	0.	0
(11) NEIL YOUNG	1.00									
DIRECTOR		Х						0.	0.	0
(12) CAROLYN MUGAR	20.00			,,				42 222	0	
EXE. DIRECTOR & VICE PRESIDENT	35.00			Х				43,323.	0.	0
(13) GLENDA YODER ASSOC. DIRECTOR & ASSIST. TREASURER	33.00	1		х				78,372.	0.	8,088
ASSOC. DIRECTOR & ASSIST. TREASURER				^				70,372.		0,000
		-								

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Form 990 (2015) FARM AID, INC 36-3383233 Page 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and title	Average hours per  week  (do not check more than one box, unless person is both an officer and a director/trustee)							( <b>D</b> ) Reportable compensation	<b>(E)</b> Reportable compensation	ion amou			
		week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer B		Highest compensated		from the organization (W-2/1099-MISC)	from related organization (W-2/1099-MIS	ıs	f org an	other npensa rom th ganizat id relat anizati	e ion ed
	Sub-total								121,695.		0.		8,0	88.
	Total from continuation sheets to Part V								0.		0.		- / -	0.
	Total (add lines 1b and 1c)								121,695.		0.		8,0	88.
2	Total number of individuals (including but r	not limited to th	ose	liste	ed al	bove	e) wł	no r	eceived more than \$100	,000 of reportab	le			^
	compensation from the organization												Yes	0 No
3	Did the organization list any <b>former</b> officer	director or tru	ıste	e ke	v er	nnlc	vee	or	highest compensated e	molovee on	I		163	140
Ū	line 1a? If "Yes," complete Schedule J for s			-	•	•	•		•			3		Х
4	For any individual listed on line 1a, is the s	um of reportab	le co	omp	ensa	atior	n and	d ot	her compensation from	the organization				
_	and related organizations greater than \$15										г	4		X
5	Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," <i>con</i>	•				,			· ·		·	5		Х
Sec	tion B. Independent Contractors	ipiete Scrieduii	<del>.</del> 0 1	01 30	JCII j	pers	SOIT .							21
1	Complete this table for your five highest co	mpensated inc	depe	ende	nt c	ont	racto	ors t	that received more than	\$100,000 of con	npens	ation	from	
	the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	ithi	n the organization's tax	year.				
	<b>(A)</b> Name and business	address							<b>(B)</b> Description of s	ervices	C		<b>C)</b> ensatio	n
VAI	IGUARD COMMUNICATIONS,		S	rri	Œ	ו יו	WV.		COMMUNICATIO			ompc	, i i Satio	<u>''                                    </u>
	TE 300, WASHINGTON, D					_			PUBLIC RELAT			24	7,2	72.
	N CREATIVE TECHNOLOGI								MARKETING, D					
220	) FELCH STREET, ANN AR	BOR, MI	4 8	31(	) 3			_	AND WEBSITE	SUPPORT		12	8,2	<u> 24.</u>
								$\dashv$						
	Total number of independent contractors (	including but a	ot III	mita	d +c	tha	SO 11:		d abovo) who received a	oro than				

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\$100,000 of compensation from the organization

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Form 990 (2015) FARM AI
Part VIII Statement of Revenue

			Check if Schedule O cont	aine a re	enonea	or note to any lin	e in this Dart VIII			
			Check if Schedule O cont	aiiis a re	зропве	or note to any iii	(A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts nts	1	а	Federated campaigns		1a	25,629.				
irar			Membership dues		1b	·				
Ĕ,G			Fundraising events		1c	478,388.				
ifts ar /			Related organizations		1d	, -				
n;e			Government grants (contribut		1e					
Sir			All other contributions, gifts, gran	,	16					
uţi Je		'			4.	705 550				
증글			similar amounts not included above		1f	795,559.				
Contributions, Gifts, Grants and Other Similar Amounts		_	Noncash contributions included in lines	_		131,817.	1 000 556			
a C		h	Total. Add lines 1a-1f				1,299,576.			
•	_		HOMEGROUNI GONGEGGTONG	TORNO		Business Code	11 627	11 627		
ice	2		HOMEGROWN CONCESSIONS		E FEE	110000	11,627.	11,627.		
ne r		-	HOMEGROWN YOUTHMARKET	SALES		110000	2,908.	2,908.		
n S /en		С	WORKSHOP AND TOUR			110000	730.	730.		
yra Re		d								
Program Service Revenue		е								
ъ.		f	1 3				15.055			
		g					15,265.			
	3		Investment income (including				16 005			16,995.
			other similar amounts)				16,995.			10,995.
	4		Income from investment of tax	•	•	· -				
	5		Royalties							
	_		_	(i) F	Real	(ii) Personal				
			Gross rents							
			Less: rental expenses							
			Rental income or (loss)							
		d	Net rental income or (loss)			······ •				
	7	а	Gross amount from sales of	- ` '	curities	(ii) Other				
			assets other than inventory	13	1,850.	1				
		b	Less: cost or other basis							
			and sales expenses		1,662.					
		С	Gain or (loss)	2	0,188.					
		d	Net gain or (loss)			····· •	20,188.			20,188.
Other Revenue	8	а	Gross income from fundraising including \$ 478	•	•					
ev.			contributions reported on line	1c). See	•					
F.			Part IV, line 18		a	2,929,492.				
Ţ.		b	Less: direct expenses			2,028,594.				
0		С	Net income or (loss) from fund	draising (	events	<b>_</b>	900,898.			900,898.
	9	а	Gross income from gaming ac	tivities.						
			Part IV, line 19		а					
		b	Less: direct expenses		b					
		С	Net income or (loss) from gam	ing activ	vities					
	10	а	Gross sales of inventory, less	returns						
			and allowances		а	40,506.				
		b	Less: cost of goods sold		b	13,266.				
		С	Net income or (loss) from sale	s of inve	entory		27,240.			27,240.
			Miscellaneous Revenu	е		Business Code				
	11	а	LICENSING FEES			110000	30,936.	30,936.		
		b	OTHER FEES			110000	166.	166.		
		С								
		d	All other revenue							
		е	Total. Add lines 11a-11d			▶ [	31,102.			
	12		Total revenue. See instructions.			<b>.</b>	2,311,264.	46,367.	0.	965,321.

# Form 990 (2015) FARM AID, INC 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										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses					
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	633,206.	633,206.							
2	Grants and other assistance to domestic individuals. See Part IV, line 22	39,306.	39,306.							
3	Grants and other assistance to foreign		,							
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors,		E4 004	10.006						
	trustees, and key employees	89,988.	71,891.	10,936.	7,161.					
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)									
7	Other salaries and wages	487,554.	337,758.	100,018.	49,778.					
8	Pension plan accruals and contributions (include									
	section 401(k) and 403(b) employer contributions)	11,352.	7,768.	2,365.	1,219. 6,591.					
9	Other employee benefits	61,903.	42,161.	13,151.	6,591.					
10	Payroll taxes	48,216.	33,529.	9,720.	4,967.					
11	Fees for services (non-employees):									
	Management	2,354.		2,354.						
	Legal	132,186.		123,586.	8,600.					
	Accounting Lobbying	132,100		123,300.	0,000.					
	Professional fundraising services. See Part IV, line 17									
	Investment management fees									
g										
_	column (A) amount, list line 11g expenses on Sch O.)	229,788.	214,411.	8,618.	6,759.					
12	Advertising and promotion	240.		240.						
13	Office expenses	29,112.	16,411.	7,595.	5,106.					
14	Information technology	45,530.	26,763.	9,449.	9,318.					
15	Royalties	114,188.	80,537.	21,942.	11 700					
16	Occupancy	22,737.	15,420.	512.	11,709. 6,805.					
17	Travel	22,131.	13,420.	312.	0,003.					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	52,638.	43,918.	878.	7,842.					
20	Interest	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,					
21	Payments to affiliates									
22	Depreciation, depletion, and amortization	32,821.		32,821.						
23	Insurance	7,545.	5,131.	1,595.	819.					
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)									
а	VIDEO PRODUCTION AND RE	119,106.	100,066.	18,135.	905.					
b	PRINTING AND REPRODUCTI	39,710.	11,542.	414.	27,754.					
С	OTHER BUSINESS EXPENSES	27,254.	22,660.	2,647.	1,947.					
d	BANK AND OTHER FEES	16,985.	3,006.	6,454.	7,525.					
	All other expenses	4,293.	4,037.	12.	244.					
25	Total functional expenses. Add lines 1 through 24e	2,248,012.	1,709,521.	373,442.	165,049.					
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)									
	If following SOP 98-2 (ASC 958-720)				- 000					

Pa	πλ	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing		1	1,309,000.
	2	Savings and temporary cash investments			444,886.
	3	Pledges and grants receivable, net	136,660.	3	67,765.
	4	Accounts receivable, net		4	21,097.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L	16,583.	5	
	6	Loans and other receivables from other disqualified persons (as defined un	der		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	iting		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
şţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use	36,820.	8	10,294.
	9	Prepaid expenses and deferred charges	16,705.	9	32,489.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 68,7'	72.		
	b	Less: accumulated depreciation 10b 53,5		10c	15,200.
	11	Investments - publicly traded securities	459,089.	11	431,484.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	14,882.	14	52,990.
	15	Other assets. See Part IV, line 11	7,500.	15	7,500.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	<u></u> 2,383,436.	16	2,392,705.
	17	Accounts payable and accrued expenses	143,188.	17	125,240.
	18	Grants payable	23,066.	18	22,965.
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees	,		
≝		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D		25	140 005
	26	Total liabilities. Add lines 17 through 25	166,254.	26	148,205.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X al	nd		
Ses		complete lines 27 through 29, and lines 33 and 34.	1 702 200		1 000 256
auc	27	Unrestricted net assets		27	1,808,356.
Fund Balances	28	Temporarily restricted net assets	493,892.	<del>                                     </del>	436,144.
pu	29	Permanently restricted net assets		29	
교		Organizations that do not follow SFAS 117 (ASC 958), check here ▶	<b>-</b>		
, or		and complete lines 30 through 34.			
šets	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or	32	Retained earnings, endowment, accumulated income, or other funds		32	2 244 522
2	33	Total net assets or fund balances		_	2,244,500.
	34	Total liabilities and net assets/fund balances	2,383,436.	34	2,392,705.

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Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
			2 21	1 0	٠,				
1	Total revenue (must equal Part VIII, column (A), line 12)		2,31						
2	Total expenses (must equal Part IX, column (A), line 25)		2,24	8,0	<u> 12.</u>				
3	Revenue less expenses. Subtract line 2 from line 1	3	6 2,21		52.				
4									
5	Net unrealized gains (losses) on investments								
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	2,24	4,5	00.				
Pa	rt XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII								
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other								
	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		X				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b	Х					
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat								
	consolidated basis, or both:								
	X 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	e audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c		Х				
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch								
За	3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit								
	Act and OMB Circular A-133?								
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit	3a						
_	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						
	, , , , , , , , , , , , , , , , , , , ,			990	(2015)				

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

FARM AID. INC Employer identification number 36-3383233

<b>D</b> = .			Observity Obstruct					0 0000200					
Pa		Reason for Public											
he o	organ	ization is not a private found	lation because it is: (	For lines 1 through 11, o	check only	one box.)							
1	Щ	A church, convention of ch					I)(A)(i).						
2	Н	A school described in <b>sect</b>											
3	Щ	A hospital or a cooperative					•						
4		A medical research organiz	ation operated in co	njunction with a hospita	I described	d in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,					
		city, and state:											
5		An organization operated for		llege or university owner	d or opera	ted by a g	overnmental unit describ	ped in					
		section 170(b)(1)(A)(iv). (C	•										
6		A federal, state, or local go	-										
7	X												
		section 170(b)(1)(A)(vi). (Complete Part II.)											
8	Щ	A community trust describe	ed in <b>section 170(b)(</b>	(1)(A)(vi). (Complete Par	t II.)								
9		An organization that norma	lly receives: (1) more	than 33 1/3% of its sup	port from	contribution	ons, membership fees, a	and gross receipts from					
		activities related to its exen	•	·			• • • • • • • • • • • • • • • • • • • •	•					
		income and unrelated busin		(less section 511 tax) fr	om busine	sses acqu	ired by the organization	after June 30, 1975.					
		See <b>section 509(a)(2).</b> (Con	,										
10	$\square$	An organization organized	•	•	•								
11		An organization organized	· ·	•	· ·		· · · · · · · · · · · · · · · · · · ·						
		more publicly supported or	~					Check the box in					
		lines 11a through 11d that				-							
а		☐ Type I. A supporting orga	· · · · · · · · · · · · · · · · · · ·	•	•	•							
		the supported organization			a majority	of the dire	ctors or trustees of the s	supporting					
		organization. You must o											
b			•					-					
		control or management o			same perso	ons that co	ontrol or manage the sup	ported					
		organization(s). You mus											
С		☐ Type III functionally inte					• •	ea with,					
		its supported organizatio						(-)					
a	L	☐ Type III non-functionally											
		that is not functionally int	-		•		-	iveness					
		requirement (see instruct	•	- ·									
е		Check this box if the orga					i Type i, Type ii, Type iii						
	Coto	functionally integrated, or											
'		er the number of supported or vide the following information	•	nd organization(s)									
<u>9</u>		i) Name of supported	(ii) EIN		(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of					
	•	organization	, ,	(described on lines 1-9	listed i	n your	support (see	other support (see					
				above (see instructions))	Yes	No	instructions)	instructions)					
- Tota	ı												

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 532021 09-23-15

### Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	1,256,878.	2,613,555.	2,540,866.	1,787,621.	1,296,648.	9,495,568.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	1,256,878.	2,613,555.	2,540,866.	1,787,621.	1,296,648.	9,495,568.	
	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						721,778.	
6	Public support. Subtract line 5 from line 4.						8,773,790.	
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total	
7	Amounts from line 4	1,256,878.	2,613,555.	2,540,866.	1,787,621.	1,296,648.	9,495,568.	
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar sources	45,548.	33,851.	29,117.	22,028.	16,995.	147,539.	
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10						9,643,107.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 8	,440,282.	
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3)	_	
	organization, check this box and stop	here					<b>&gt;</b>	
Sec	ction C. Computation of Publ	ic Support Pe	rcentage					
14	Public support percentage for 2015 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	90.99 %	
15	Public support percentage from 2014	Schedule A, Part	II, line 14			15	90.66 %	
16a	16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and							
	stop here. The organization qualifies as a publicly supported organization							
b	b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box							
	and stop here. The organization qualifies as a publicly supported organization							
17a	17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,							
	and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization							
	meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization							
b	10% -facts-and-circumstances tes	t - <b>2014.</b> If the orga	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the		•					
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	cly supported orga	anization	▶Щ	
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b		and see instruction		

Schedule A (Form 990 or 990-EZ) 2015

### Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	, i	,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2011	<b>(b)</b> 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
(	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization's	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organi	zation,
							<u></u> ▶∟⊥
	ction C. Computation of Publ					11	
	Public support percentage for 2015 (I					15	%
	Public support percentage from 2014					16	%
	ction D. Computation of Inves					147	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	<u> </u>
198	33 1/3% support tests - 2015. If the						
	more than 33 1/3%, check this box a						
k	33 1/3% support tests - 2014. If the	•			•	•	
00	line 18 is not more than 33 1/3%, che						·
70	Private tolingation if the organization	D DID DOT CDACK 3	$nnv \cap n = n \cap 1/1 = 10$	n ar iun chackt	THE DAY SHA CAA IN	CITIOTIONS	

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### Part IV | Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
30		
10a		
10b		

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

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Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All				
	other Type III non-functionally integrated supporting organizations must co	mplete S	ections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other				
	factors (explain in detail in <b>Part VI</b> ):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
_3_	Subtract line 2 from line 1d	3			
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
	see instructions).	4			
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
_6	Multiply line 5 by .035	6			
_7_	Recoveries of prior-year distributions	7			
_8_	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions)	6			
7	Check here if the current year is the organization's first as a non-functional	ly-integrat	ed Type III supporting org	ganization (see	
	instructions).				

Schedule A (Form 990 or 990-EZ) 2015

Par	<sup>ব</sup> V │ Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Secti	ion D - Distributions		Current Year	
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	IS	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which	he organization is responsive	e	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
C4:	ion E. Dietvikution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
Secu	ion E - Distribution Allocations (see instructions)		Pre-2015	Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
i	Carryover from 2010 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а				
b				
	Excess from 2013			
	Excess from 2014			
е	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Part IV Section A lines 1 2 3h 3c 4h 4c 5a 6 9 9h 9c 11a 11h and 11c Part IV Section B lines 1 and 2 Part IV Section C
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V,
	Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)
-	

#### **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2015

Open to Public Inspection

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

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

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Tax) (see separate instructions), then				
<ul> <li>Section 501(c)(4), (5), or (6) organization</li> </ul>	tions: Complete Part III.			
Name of organization			Empl	oyer identification number
FARM AI				36-3383233
Part I-A Complete if the org	janization is exempt unde	r section 501(c)	or is a section 527 o	rganization.
<ol> <li>Provide a description of the organiz</li> <li>Political expenditures</li> <li>Volunteer hours</li> </ol>			<b></b> ▶\$	
	janization is exempt unde			
1 Enter the amount of any excise tax	incurred by the organization unde	r section 4955	<b>▶</b> \$	
2 Enter the amount of any excise tax	incurred by organization manager	s under section 4955	<b></b> ▶\$	
3 If the organization incurred a section	n 4955 tax, did it file Form 4720 fo	or this year?		Yes No
4a Was a correction made?				Yes No
<b>b</b> If "Yes," describe in Part IV.		50.1/ \		( ) (6)
Part I-C Complete if the org	janization is exempt unde	r section 501(c),	except section 501(	c)(3).
<ul> <li>2 Enter the amount of the filing organ exempt function activities</li> <li>3 Total exempt function expenditures line 17b</li> <li>4 Did the filing organization file Form</li> <li>5 Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If</li> </ul>	Add lines 1 and 2. Enter here an	d on Form 1120-POL,  ) of all section 527 pol from the filing organizate political orga	tical organizations to whication's funds. Also enter the	Yes No the filing organization he amount of political
(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
		1	1	1

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

Schedule C (Form 990 or 990-EZ) 2015

LHA 532041 10-05-15

Schedule C (Form 990 or	990-EZ) 2015 FARM .	AID, INC	36-3	383233 Page 2	
Part II-A   Comple	te if the organization	on is exempt under section 501(c)(3) and fil	ed Form 5768 (e	lection under	
section	501(h)).				
A Check ► L if the	e filing organization belon	gs to an affiliated group (and list in Part IV each affiliated	group member's nam	e, address, EIN,	
	,	ss lobbying expenditures).			
B Check ▶ ☐ if the	e filing organization check	red box A and "limited control" provisions apply.			
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)			(a) Filing organization's totals	<b>(b)</b> Affiliated group totals	
1a Total lobbying expe	nditures to influence pub	lic opinion (grass roots lobbying)	5,916.		
<b>b</b> Total lobbying expe	nditures to influence a le	gislative body (direct lobbying)	1,459.		
c Total lobbying expe	nditures (add lines 1a an	d 1b)	7,375.		
d Other exempt purpo			2,240,637.		
e Total exempt purpo	se expenditures (add line	es 1c and 1d)	2,248,012.		
f Lobbying nontaxab	le amount. Enter the amo	ount from the following table in both columns.	262,401.		
If the amount on line	1e, column (a) or (b) is:	The lobbying nontaxable amount is:			
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but	not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.			
Over \$1,000,000 bu	ıt not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.			
Over \$1,500,000 bu	ıt not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.			
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxa	ıble amount (enter 25% o	f line 1f)	65,600.		
<u> </u>	m line 1a. If zero or less, e	, , , , , , , , , , , , , , , , , , , ,	0.		
•	•	nter -0-	0.		
	,	er line 1h or line 1i, did the organization file Form 4720			
				Yes No	
4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the separate instructions for lines 2a through 2f.)					
	1 - 1-1	wine Transmittings Diving 4 Veer Averaging Device			

	Lobbying Expenditures During 4-Year Averaging Period								
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2012	<b>(b)</b> 2013	<b>(c)</b> 2014	<b>(d)</b> 2015	(e) Total				
2a Lobbying nontaxable amount	302,609.	260,268.	326,627.	262,401.	1,151,905.				
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,727,858.				
c Total lobbying expenditures	2,448.	5,830.	5,458.	7,375.	21,111.				
d Grassroots nontaxable amount	75,652.	65,067.	81,657.	65,600.	287,976.				
e Grassroots ceiling amount (150% of line 2d, column (e))					431,964.				
f Grassroots lobbying expenditures	948.	4,512.	5,458.	5,916.	16,834.				

Schedule C (Form 990 or 990-EZ) 2015

# Schedule C (Form 990 or 990-EZ) 2015 FARM AID, INC 36-338323 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
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)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>	/F\	- 12	
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(	(5), or se		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?  t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members			t III-A, lir	ne 3, is
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)				
_	expenses for which the section 527(f) tax was paid).		20		
	Current year				
	Carryover from last year				
c	Total 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 exc				
4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
			4		
5	expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)		5		
Par			3		
		List\. Dort II	Λ lines 1	and 0 (aaa	
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	ilst), Part II-	A, ilites i a	and ∠ (see	
mstrt	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				

## **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

**Employer identification number** FARM ATD TNC 36-3383233

Pai	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Fund	s or Acco	unts. Complete if the			
	organization answered "Yes" on Form 990, Part IV, line			·			
	, ,	(a) Donor advised funds	<b>(b)</b> Fur	nds 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 w	riting that the assets held in donor advi	sed funds				
	are the organization's property, subject to the organization's e	_		Yes No			
6	Did the organization inform all grantees, donors, and donor ac						
	for charitable purposes and not for the benefit of the donor or						
			ŭ	Yes No			
Pai	t II Conservation Easements. Complete if the orga						
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).					
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of a his	torically impo	ortant land area			
	Protection of natural habitat	Preservation of a cer	tified historic	structure			
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	of a conserv	vation easement on the last			
	day of the tax year.			Held at the End of the Tax Year			
а	Total number of conservation easements		2a				
b	Total acreage restricted by conservation easements		2b				
С	Number of conservation easements on a certified historic stru	cture included in (a)	2c				
d	Number of conservation easements included in (c) acquired a	fter 8/17/06, and not on a historic struc	ture				
	listed in the National Register		2d				
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organizatio	n during the tax			
	year >						
4	Number of states where property subject to conservation eas	ement is located					
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of					
	violations, and enforcement of the conservation easements it						
6	Staff and volunteer hours devoted to monitoring, inspecting, $\ensuremath{\text{\textbf{h}}}$	nandling of violations, and enforcing cor	servation ea	sements during the year			
	<b></b>						
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conserva	ation easeme	ents during the year			
	<b>&gt;</b> \$						
8	Does each conservation easement reported on line 2(d) above	•					
	and section 170(h)(4)(B)(ii)?						
9	In Part XIII, describe how the organization reports conservation	·					
	include, if applicable, the text of the footnote to the organizati	on's financial statements that describes	the organiza	ation's accounting for			
Pai	conservation easements. t III Organizations Maintaining Collections of	Art Historical Transuras or C	Othor Simi	lar Assats			
Га	Complete if the organization answered "Yes" on Form		Julei Sillii	iai Assets.			
12	If the organization elected, as permitted under SFAS 116 (ASC		ment and hal	lance sheet works of art			
ıu							
	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		nt and halanc	e sheet works of art historical			
	treasures, or other similar assets held for public exhibition, ed						
	relating to these items:	deation, or research in furtherance of pe	abile service,	provide the following amounts			
	(i) Revenue included on Form 990, Part VIII, line 1		•	\$			
			_	\$			
2	If the organization received or held works of art, historical trea			*			
_	the following amounts required to be reported under SFAS 11	•	a. gani, provid	<b></b>			
а	Revenue included on Form 990, Part VIII, line 1	-	•	\$			
	Assets included in Form 990, Part X						

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

Schedule D (Form 990) 2015

Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or C	ther	Simila	ar Asse	<b>ts</b> (continu	ed)				
3	Using the organization's acquisition, accessi	on, and other records	s, check any of the	following that are	a sigr	nificant	use of its	collection	items				
	(check all that apply):												
а	Public exhibition	d	Loan or exc	hange programs									
b	b Scholarly research e Other												
С	Preservation for future generations												
4	Provide a description of the organization's co	ollections and explain	n how they further th	ne organization's	exemp	ot purpo	se in Par	t XIII.					
5	During the year, did the organization solicit o												
	to be sold to raise funds rather than to be ma	aintained as part of th	ne organization's co	ollection?			$\square$	Yes	☐ No				
Par	t IV Escrow and Custodial Arran							line 9, or					
	reported an amount on Form 990, Par												
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for contribution	s or other assets	not in	cluded							
	on Form 990, Part X?							Yes	☐ No				
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:										
	, ,	·	· ·					Amount					
С	Beginning balance					1c							
	Additions during the year					1d							
	Distributions during the year					1e							
f	Ending balance					1f							
	Did the organization include an amount on Fe	orm 990. Part X. line	21. for escrow or cu	ustodial account	liability	-		Yes	No				
	If "Yes," explain the arrangement in Part XIII.				-								
Par													
	·	(a) Current year	(b) Prior year	(c) Two years ba	-		ears back	(e) Four y	ears back				
1a	Beginning of year balance	457,892.	462,971.	462.9			43,180.		60,990.				
b	Contributions	,	, -	,			,						
	Net investment earnings, gains, and losses	6,746.	24,069.	28,70	51.		48,216.		10,042.				
d	Grants or scholarships												
	Other expenditures for facilities			,	$\dashv$		,		22,196.				
·	and programs												
f	Administrative expenses	5,529.	6,082.	6,08	30.		4,781.		5,656.				
g	End of year balance	436,144.	457,892.	462,9		4	62,972.	4	43,180.				
2	Provide the estimated percentage of the curr			-			,		,				
	Board designated or quasi-endowment	crit year eria balario	%	ijj ricia as.									
b	Permanent endowment	%											
	Temporarily restricted endowment ▶ 10												
C	The percentages on lines 2a, 2b, and 2c sho												
32	Are there endowment funds not in the posse	•	tion that are hold a	nd administered	for the	organi	ration						
Ja	by:	33ion of the organiza	mon mar are neid a	na administered	ioi tiie	Organiz	ation	T.	es No				
	(i) unrelated organizations							-	X				
	(ii) related organizations								X				
h	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R2					3b	<del></del>				
4	Describe in Part XIII the intended uses of the							OD					
_	t VI Land, Buildings, and Equipm		WITICITE TUTTUS.										
	Complete if the organization answered		Part IV line 11a S	See Form 990 Pa	rt X lir	ne 10							
	Description of property	(a) Cost or ot				umulate	nd l	(d) Book	value				
	bescription of property	basis (investm		1 '	•	eciation		(a) Book	value				
12	Land	`	-, 22310	/									
	Land Buildings												
	Leasehold improvements												
			<u> </u>	8,772.	-	53,5	72.	15	,200.				
	Equipment Other		<u>_</u>	-,		, .			,				
	. Add lines 1a through 1e. (Column (d) must e		X. column (B) line 1	0c.)				15	,200.				

Schedule D (Form 990) 2015

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

Schedule D (Form 990) 2015 FARM AID, I	INC		3 (	5-3383233	Page 3
Part VII Investments - Other Securities.					
Complete if the organization answered "Yes"					
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of	valuation: Cost or er	nd-of-year market v	value
(1) Financial derivatives					
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (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 er	nd-of-year market v	value
(1)				-	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes"	on Form 000 Dort IV line	11d Coo Form 000	Dort V line 15		
	Description	Tru. See Form 990	, Fait A, line 15.	(b) Book va	مر باد
	Description			(b) Book va	aiue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	ne 15.)		<b>)</b>	·	
Part X Other Liabilities.					
Complete if the organization answered "Yes"			m 990, Part X, line 2	25.	
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					
(5)					
(6)					
<del></del>	<u> </u>				

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

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 □

Schedule D (Form 990) 2015

(8)

Complete if the organization answered "Yes" on Form 990, Part				
1 Total revenue, gains, and other support per audited financial statement	ts		1	2,277,366.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments		-35,934.		
<b>b</b> Donated services and use of facilities		40,838.		
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)	2d	-38,802.		22 222
e Add lines 2a through 2d			2e	-33,898.
3 Subtract line 2e from line 1			3	2,311,264.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
<b>b</b> Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b			4c	0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	2,311,264.
Part XII Reconciliation of Expenses per Audited Financia		h Expenses per	Retu	rn.
Complete if the organization answered "Yes" on Form 990, Part				0 050 040
Total expenses and losses per audited financial statements			1	2,250,048.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1	40 020		
a Donated services and use of facilities		40,838.		
<b>b</b> Prior year adjustments				
c Other losses		20 000		
d Other (Describe in Part XIII.)	2d	-38,802.		2 026
e Add lines 2a through 2d			2e	2,036.
3 Subtract line 2e from line 1			3	2,248,012.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
a Investment expenses not included on Form 990, Part VIII, line 7b				
b Other (Describe in Part XIII.)				0
c Add lines 4a and 4b			4c	0.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, I Part XIII Supplemental Information.	line 18.)		5	2,248,012.
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to prov			4; Part	X, line 2; Part XI,
PART XI, LINE 2D - OTHER ADJUSTMENTS:	WDENIGEG TO	IDECTAL		
CONTRIBUTED SERVICES THAT ARE DIRECT EX	APENSES TO S	PECIAL		
EVENTS				-38,802.
PART XII, LINE 2D - OTHER ADJUSTMENTS:				
CONTRIBUTED SERVICES THAT ARE DIRECT EX	XPENSES TO S	SPECIAL		
EVENTS				-38,802.

23425\_\_1

#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization  FARM AI	D, INC					Employer ide 36-3383	ntification number 233
	Complete if the organization answer	ered "Y	'es" o	n Form 990, Part IV, I	ine 17	7. Form 990-EZ	I filers are not
<ul> <li>Indicate whether the organization raise</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>c Phone solicitations</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written of key employees listed in Form 990, P</li> <li>b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the</li> </ul>	sed funds through any of the following Solicitars of Solicitars of Solicitars of Special Special Special Special Part VII) or entity in connection with prividuals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus fundraising services?	stees	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No				
Total		<u> </u>	<b></b>				
List all states in which the organization or licensing.			outions	s or has been notified	d it is e	exempt from re	egistration

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

Schedule G (Form 990 or 990-EZ) 2015

Schedule G (Form 990 or 990 EZ) 2015 FARM AID, INC 36-3383233 Page 2 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events BENEFIT NONE (add col. (a) through CONCERT DINNERS col. (c)) (event type) (event type) (total number) 3,407,880. 3,151,500 256,380. 1 Gross receipts 386,005 92,383. 478,388. 2 Less: Contributions 163,997. 2,765,495 2,929,492. **3** Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses 242,573. 0. 242,573. 6 Rent/facility costs 67,664. 65,377. 133,041. 7 Food and beverages 8 Entertainment 9 Other direct expenses 1,442,750. 210,230. 1,652,980. 2,028,594. **10** Direct expense summary. Add lines 4 through 9 in column (d) 900,898. 11 Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue ..... 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs **5** Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? \_\_\_\_\_ Yes \_\_\_\_ No

Schedule G (Form 990 or 990-EZ) 2015

**b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2015 FARM AID, INC	6-3383233 Page 3
11 Does the organization conduct gaming activities with nonmembers?	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a %
<b>b</b> An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.	
Name ▶	
Address	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization <b>&gt;</b> and the amount	t
of gaming revenue retained by the third party  \$	
c If "Yes," enter name and address of the third party:	
Name ▶	
Address ►	
16 Gaming manager information:	
Name	
Gaming manager compensation > \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	the
organization's own exempt activities during the tax year ▶ \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part IV	t III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	

Schedule G (Form 990 or 990-EZ) FARM AID, INC	36-3383233 Page 4
Schedule G (Form 990 or 990-EZ) FARM AID, INC  Part IV Supplemental Information (continued)	<u> </u>

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

FARM AID,	INC						36-3383233
Part I General Information on Grants a	nd Assistance					•	
Does the organization maintain records to	o substantiate th	e amount of the grant	s or assistance, the	grantees' eligibilit	y for the grants or as	sistance, and the select	tion
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro	ocedures for mon	toring the use of gran	t funds in the Unite	d States.			
Part II Grants and Other Assistance to	Domestic Organ	izations and Domest	i <b>c Governments.</b> C	omplete if the org	anization answered "	Yes" on Form 990, Part	IV, line 21, for any
recipient that received more than	5,000. Part II car	be duplicated if addi	tional space is need	ded.			
(a) Name and address of organization or government	<b>(b)</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 non-cash assistance	(h) Purpose of grant or assistance
FAMILYFARMED.ORG							
7115 W. NORTH AVENUE #504							GROWING THE GOOD FOOD
OAK PARK, IL 60302	36-4095287	501(C)(3)	7,500.	0.			MOVEMENT
APPALACHIAN SUSTAINABLE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
AGRICULTURE PROJECT - 306 WEST							
HAYWOOD STREET - ASHEVILLE, NC							GROWING THE GOOD FOOD
28801	06-1642769	501(C)(3)	5,000.	0.			MOVEMENT
			,				
BLACK OAKS CENTER FOR SUSTAINABLE							
RENEWABLE LIVING - 10249 S.							GROWING THE GOOD FOOD
HALSTED STREET - CHICAGO, IL 60628	20-4280294	501(C)(3)	7,500.	0.			MOVEMENT
FAMILY AGRICULTURE RESOURCE							
MANAGEMENT SERVICES - 2051							GROWING THE GOOD FOOD
BUNKERHILL ROAD - DILLON, SC 29536	46-4623115	501(C)(3)	5,000.	0.			MOVEMENT
FARMWORKER ASSOCIATION OF FLORIDA							
1264 APOPKA BLVD.	F0 06030F0	E01/G)/2)	5 000	0			GROWING THE GOOD FOOD
APOPKA, FL 32703	59-2683978	501(C)(3)	5,000.	0.			MOVEMENT
FEDERATION OF SOUTHERN							
COOPERATIVES - 2769 CHURCH ST							GROWING THE GOOD FOOD
EAST POINT, GA 30344	58-1026695	501(C)(3)	20,000.	0.			MOVEMENT
2 Enter total number of section 501(c)(3) a		1 1 1 1	,	-			
3 Enter total number of other organizations							
LHA For Paperwork Reduction Act Notice							Schedule I (Form 990) (2015)

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(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 non-cash assistance	(h) Purpose of grant or assistance
GROWING POWER							
3333 S. IRON STREET							GROWING THE GOOD FOOD
CHICAGO, IL 60608	39-1876495	501(C)(3)	5,000.	0.			MOVEMENT
	05 1070150		3,000.				
PENNSYLVANIA ASSOCIATION FOR							
SUSTAINABLE AGRICULTURE - P.O.							GROWING THE GOOD FOOD
BOX 419 - MILLHEIM, PA 16854	25-1685497	501(C)(3)	7,000.	0.			MOVEMENT
POWDER RIVER BASIN RESOURCE							
COUNCIL - 934 NORTH MAIN ST							GROWING THE GOOD FOOD
SHERIDAN, WY 82801	74-2183158	501(C)(3)	6,000.	0.			MOVEMENT
THIRD SECTOR NEW ENGLAND							GROWING THE GOOD FOOD
89 SOUTH ST., SUITE 700							MOVEMENT - REAL FOOD
BOSTON, MA 02111	04-2261109	501(C)(3)	5,000.	0.			CHALLENGE
SUSTAINABLE FOOD CENTER							
2921 E. 17TH STREET, BUILDING C		504 (5) (2)					GROWING THE GOOD FOOD
AUSTIN, TX 78702	74-2441468	501(C)(3)	5,000.	0.			MOVEMENT
AGRICULTURE AND LAND-BASED							
TRAINING ASSOCIATION - PO BOX 6264							
- SALINAS, CA 93912	77-0566055	501 (C) (3)	5,000.	0.			HELPING FARMERS THRIVE
DAULINAD, CA 93912	77 0300033	501(0)(5)	3,000.	0.			TEDITING PARMERS TIMIVE
ANGELIC ORGANICS LEARNING CENTER							
1547 ROCKTON ROAD							
CALEDONIA, IL 61011	36-4288904	501(C)(3)	7,500.	0.			HELPING FARMERS THRIVE
,			,				
APPALACHIAN SUSTAINABLE							
DEVELOPMENT - P.O. BOX 791 -							
ABINGDON, VA 24212	31-1445533	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE
-							
AREA AG INFORMATION CENTER, INC.							
17303 US HIGHWAY 59 N.E.							
THIEF RIVER FALLS, MN 56701	41-1565848	501(C)(3)	6,000.	0.			HELPING FARMERS THRIVE

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	, ago
(a) Name and address of organization or government	<b>(b)</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 non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA FARMLINK							
303 POTRERO ST., SUITE 29-201							
SANTA CRUZ, CA 95060	94-3332630	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE
,			,				
CHICAGO BOTANIC GARDEN (WINDY CITY							
HARVEST) - 1000 LAKE COOK ROAD -							
GLENCOE, IL 60022	36-2225482	501(C)(3)	7,500.	0.			HELPING FARMERS THRIVE
COMMUNITY ALLIANCE WITH FAMILY							
FARMERS - P.O. BOX 363 - DAVIS, CA 95617	94-2914745	501(C)(3)	6,000.	0.			HELPING FARMERS THRIVE
<u>CA 33017</u>	J4 2J14743	501(0)(3)	0,000.	<u> </u>			HEBITING PARMERS HIRTVE
CONSERVATION LAW FOUNDATION							
62 SUMMER STREET							
BOSTON, MA 02110	04-6149986	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE
CULTIVATE KANSAS CITY							
4223 GIBBS ROAD							
KANSAS CITY, KS 66106	20-2365320	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE
FARMERS' LEGAL ACTION GROUP							
6 FIFTH ST. WEST, SUITE 650							
ST. PAUL, MN 55102	36-3431212	501(C)(3)	20,000.	0.			HELPING FARMERS THRIVE
21, 1102, 110 00101	00 0101111		20,000.	-			
FOOD WORKS							
P.O. BOX 3855							
CARBONDALE, IL 62902	26-3662215	501(C)(3)	7,500.	0.			HELPING FARMERS THRIVE
INTERCHURCH MINISTRIES OF NEBRASKA							
2012 SOUTH 13TH STREET				_			
LINCOLN, NE 68502	47-0379495	501(C)(3)	6,000.	0.			HELPING FARMERS THRIVE
KANSAS FARMERS UNION FOUNDATION							
901 W. FIRST ST., P.O. BOX 1064							HELPING FARMERS THRIVE -
MCPHERSON, KS 67460	48-1183833	501(C)(3)	5,000.	0.			KANSAS FARMERS UNION
		, . , , . ,		<u> </u>	<u> </u>	1	Cabadula I/Farra 000

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(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 non-cash assistance	(h) Purpose of grant or assistance		
N.C. ASSOCIATION OF BLACK LAWYERS P.O. BOX 179 DURHAM, NC 27702	56-1348982	501(C)(3)	15,000.	0.			HELPING FARMERS THRIVE - LAND LOSS PREVENTION PROJECT		
LIBERTY PRAIRIE FOUNDATION 32400 N. HARRIS ROAD GRAYSLAKE, IL 60030	36-3888439	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
LOCAL FOOD HUB PO BOX 4647 CHARLOTTESVILLE, VA 22905	26-4137130	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
LOUISIANA INTERCHURCH CONFERENCE 527 NORTH BOULEVARD, 4TH FLOOR BATON ROUGE, LA 70802	72-0632780	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
MAINE ORGANIC FARMERS & GARDENERS ASSOCIATION - P.O. BOX 170 - UNITY, ME 04988	01-6048322	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
MICHAEL FIELDS AGRICULTURAL INSTITUTE - W2493 COUNTY ROAD ES - EAST TROY, WI 53120	39-1449246	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
MIDWEST ORGANIC AND SUSTAINABLE EDUCATION SERVICE - P.O. BOX 339 - SPRING VALLEY, WI 54767	39-1824623	501(C)(3)	7,000.	0.			HELPING FARMERS THRIVE		
MINNESOTA FOOD ASSOCIATION 14220-B OSTLUND TRAIL NORTH MARINE ON ST. CROIX, MN 55047	36-3336907	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
NATIONAL CENTER FOR APPROPRIATE TECHNOLOGY - P.O. BOX 3838 - BUTTE, MT 59702	81-0361047	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	<b>(b)</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 non-cash assistance	(h) Purpose of grant or assistance		
NEBRASKA SUSTAINABLE AGRICULTURE									
SOCIETY - 414 COUNTY ROAD 15 -									
CERESCO, NE 68017	36-3521903	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
THIRD SECTOR NEW ENGLAND 89 SOUTH ST., 7TH FLOOR BOSTON, MA 20111	04-2261109	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE - NEW ENTRY SUSTAINABLE FARMING PROJECT		
ORGANIC FARMING RESEARCH									
FOUNDATION - P.O. BOX 440 - SANTA CRUZ, CA 95061	77-0252545	501(C)(3)	7,000.	0.			HELPING FARMERS THRIVE		
			,,,,,,,,						
PRACTICAL FARMERS OF IOWA									
600 FIFTH ST., SUITE 100									
AMES, IA 50010	42-1255174	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
QUIVIRA COALITION									
1413 SECOND STREET, SUITE 1									
SANTA FE, NM 87505	31-1551770	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
ROGUE FARM CORPS PO BOX 533									
ASHLAND, OR 97520	03-0529330	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE		
,			,	<u> </u>					
RURAL ADVANCEMENT FOUNDATION									
INTERNATIONAL-USA - P.O. BOX 640 -									
PITTSBORO, NC 27312	56-1704863	501(C)(3)	20,000.	0.			HELPING FARMERS THRIVE		
SOUTHWEST GEORGIA PROJECT FOR									
COMMUNITY EDUCATION - 1216 DAWSON									
ROAD, SUITE 108 - ALBANY, GA 31721	58-1172475	501(C)(3)	7,500.	0.			HELPING FARMERS THRIVE		
THIRD SECTOR NEW ENGLAND							DELDING EXDMEDS MUDITE		
89 SOUTH ST., 7TH FLOOR BOSTON, MA 02111	04-2261109	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE - THE CARROT PROJECT		
2001011, 1111 02111	07 2201107	P(-/(-)/	3,000.	٠.	l		Cohodula I (Forma 200)		

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	<b>(b)</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 non-cash assistance	(h) Purpose of grant or assistance
THE KOHALA CENTER							
P.O. BOX 437462							
KAMUELA, HI 96743	99-0354676	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE
THE LAND CONNECTION 505 W UNIVERSITY AVE., SUITE 203	27 1412044	E01/(0)/(3)	7 500	0			UNI DING HARMERG MURIUM
CHAMPAIGN, IL 61821	37-1413944	501(C)(3)	7,500.	0.			HELPING FARMERS THRIVE
TEXAS ORGANIC FARMERS & GARDENERS ASSOCIATION - P.O. BOX 48 - ELGIN, TX 78621	74-2687511	501(C)(3)	10,500.	0.			HELPING FARMERS THRIVE
FARMERS LEGAL ACTION GROUP 6 FIFTH ST. WEST, SUITE 650 ST. PAUL, MN 55102	36-3431212	501(C)(3)	5,000.	0.			HELPING FARMERS THRIVE
RURAL ADVANCEMENT FOUNDATION INTERNATIONAL-USA - P.O. BOX 640 -							
PITTSBORO, NC 27312	56-1704863	501(C)(3)	8,000.	0.			HELPING FARMERS THRIVE
NATIONAL CENTER FOR APPROPRIATE TECHNOLOGY - P.O. BOX 3838 - BUTTE, MT 59702	81-0361047	501(C)(3)	6,000.	0.			HELPING FARMERS THRIVE
DAKOTA RURAL ACTION 910 FOURTH ST., SUITE A BROOKINGS, SD 57006	46-0398656	501(C)(3)	7,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
CENTER FOR RURAL AFFAIRS 145 MAIN STREET, P.O. BOX 136 LYONS, NE 68038	47-0553823	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM - NATIONAL SUSTAINABLE AGRICULTURE COALITION
OCCIDENTAL ARTS & ECOLOGY CENTER 15290 COLEMAN VALLEY ROAD OCCIDENTAL, CA 95465	68-0359676		6,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM - CALIFORNIA CLIMATE & AGRICULTURE NETWORK (CALCAN)

P.O. BOX 130  BEREA, KY 40403  61-1092056  501(C)(3)  5,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM   DAKOTA RESOURCE COUNCIL  P.O. BOX 1095  DAKOTA RURAL ACTION  910 FOURTH ST., SUITE A  BEOCKINGS, ND 58602  45-0363903  501(C)(3)  7,000.  0.  THE SYSTEM  TAKING ACTION TO CHANGE  TAKING ACTION TO CHANGE  THE SYSTEM  TAKING ACTION TO CHANGE  THE SYSTEM TAKING ACTION TO CHANGE  TAKING ACTION TO CHANGE	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)								
P.O. DOX 136 LYONS, NE 58038 47-0553823 501(C)(3) 6,000. 0. HEE SYSTEM  COMMUNITY FARM ALLIANCE P.O. BOX 130 BEREA, KY 40403 51-1092056 501(C)(3) 5,000. 0. FAING ACTION TO CHANGE BEREA, KY 40403 51-1092056 501(C)(3) 5,000. 0. FRE SYSTEM  DAKOTA RESOURCE COUNCIL P.O. BOX 1995 DICKINSON, ND 58602 45-0363903 501(C)(3) 7,000. 0. FRE SYSTEM  DAKOTA RURAL ACTION 910 FOURTH 97., SUITE A BROOKINGS, SD 57006 46-0398656 501(C)(3) 7,000. 0. FRE SYSTEM  FAMILY FARM DEFENDERS P.O. BOX 1772 MADISON, WI 53701 39-1814573 501(C)(3) 8,000. 0. FRE SYSTEM  FARM COMMONS PO BOX 3050 MADISON, WI 53704 45-5445890 501(C)(3) 5,000. 0. FRE SYSTEM  FARING ACTION TO CHANGE PER SYSTEM  FARING ACTION TO CHANGE FRE SYSTEM  FRENDS OF FAMILY FARMERS 249 LIBERTY ST. N.E, SUITE 212 FARING ACTION TO CHANGE FRE SYSTEM  FRENDS OF FRENUT FARMERS 249 LIBERTY ST. N.E, SUITE 212 FARING ACTION TO CHANGE FRE SYSTEM  FRENDS OF FRENUT FARMERS 249 LIBERTY ST. N.E, SUITE 212 FARING ACTION TO CHANGE FRE SYSTEM  FRENDS OF FRENUT FARMERS 249 LIBERTY ST. N.E, SUITE 212 FARING ACTION TO CHANGE FRE SYSTEM  FRENDS OF FRENUT FARMERS 249 LIBERTY ST. N.E, SUITE 212 FARING ACTION TO CHANGE FRE SYSTEM  FRENDS OF FRENUT FARMERS 249 LIBERTY ST., SUITE B FRENDS OF FRENUT FRENCH FRE	• •	(b) EIN			non-cash	valuation (book, FMV,			
P.O. DOX 136 LYONS, NE 58038 47-0553823 501(C)(3) 6,000. 0. PIRE SYSTEM  COMMUNITY FARM ALLIANCE P.O. BOX 130 BEREA, KY 40403 51-1092056 501(C)(3) 5,000. 0. PIRE SYSTEM  DAKOTA RESOURCE COUNCIL P.O. BOX 1905 DICKINSON, ND 58602 45-0363903 501(C)(3) 7,000. 0. PIRE SYSTEM  DAKOTA RESOURCE COUNCIL P.O. BOX 1905 DICKINSON, ND 58602 45-0363903 501(C)(3) 7,000. 0. PIRE SYSTEM  DAKOTA RURAL ACTION 910 FOURTH 97., SUITE A BROOKINGS, SD 57006 46-0398656 501(C)(3) 7,000. 0. PIRE SYSTEM  PARILY FARM DEFENDERS P.O. BOX 1772 MADISON, WI 53701 39-1814573 501(C)(3) 8,000. 0. PIRE SYSTEM  PARILY FARM COMMONS PO BOX 3050 MADISON, WI 53704 45-5445890 501(C)(3) 5,000. 0. PIRE SYSTEM  PARILY FARM COMMONS PO BOX 3050 FAXING ACTION TO CHANGE PRESOURCE COUNCIDS ADDISON, WI 53704 55-3006664 501(C)(3) 7,000. 0. PIRE SYSTEM  PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 55-3006664 501(C)(3) 7,000. 0. PIRE SYSTEM  PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 59-3006664 501(C)(3) 5,000. 0. PIRE SYSTEM  PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 501(C)(3) 5,000. 0. PIRE SYSTEM  PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 501(C)(3) 5,000. 0. PIRE SYSTEM  PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 501(C)(3) 5,000. 0. PIRE SYSTEM  PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 501(C)(3) 5,000. 0. PIRE SYSTEM  PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAING ACTION TO CHANGE PRINTS OF FAMILY FARMERS AND CONSUMERS - P.O. BOX 12311 - GAING ACTION TO CHANGE PRINTS OF RESOURCE COUNCILS  DAKING ACTION TO CHANGE PRINTS OF RESOURCE COUNCILS  PRINTS OF PRINTS OF RESOURCE COUNCILS  DAKING ACTION TO CHANGE PRINTS OF PRINTS OF RESOURCE COUNCILS  PRINTS OF PRINTS OF PRINTS OF RESOURCE COUNCILS  DAKED OF PRINTS OF RESOURCE COUNCILS  DAKED OF PRINTS OF RESOURCE COUNCILS  PRINTS OF PRINTS OF PRINTS OF RESOURCE COUNCILS  PRINTS OF PRINT	CEMNED FOR DURAL AFFAIRS								
LYONS, NE 68038 47-0553823 501(c)(3) 6,000. 0. THE SYSTEM  COMMUNITY FARM ALLIANCE P.O. BOX 130  BERREA, KY 40403 61-1092056 501(c)(3) 5,000. 0. TAKING ACTION TO CHANGE BERREA, KY 40403 61-1092056 501(c)(3) 7,000. 0. TAKING ACTION TO CHANGE DICKINGON, ND 58602 45-0363903 501(c)(3) 7,000. 0. TAKING ACTION TO CHANGE DICKINGON, ND 58602 45-0363903 501(c)(3) 7,000. 0. TAKING ACTION TO CHANGE BROOKINGS, SD 57006 46-0398656 501(c)(3) 7,000. 0. THE SYSTEM  FAMILY FARM DEFENDERS P.O. BOX 1772 TAKING ACTION TO CHANGE BROOKINGS, SD 57006 45-5445890 501(c)(3) 8,000. 0. THE SYSTEM  FARM COMMONS PO BOX 3750 THE SYSTEM  FARM COMMONS PO BOX 3750 TAKING ACTION TO CHANGE MADISON, WI 53704 45-5445890 501(c)(3) 5,000. 0. TAKING ACTION TO CHANGE MADISON, WI 53704 59-300664 501(c)(3) 7,000. 0. TAKING ACTION TO CHANGE FLORIDA CERTIFIED ORGANIC GROWERS AND CONSIDERS P.O. BOX 12311 - GAINESVILLE, FL 32604 59-300664 501(c)(3) 7,000. 0. TAKING ACTION TO CHANGE FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(c)(3) 5,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS WESTERN ORG. OF RESOURCE COUNCILS WESTERN ORG. OF RESOURCE COUNCILS  WESTERN ORG. OF RESOURCE COUNCILS THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM								TAKING ACTION TO CHANGE	
COMMUNITY FARM ALLIANCE P.O. BOX 130 BERRA, KY 40403 61-1092056 501(C)(3) 5,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  DAKOTA RESOURCE COUNCIL P.O. BOX 1095 DICKINSON, ND 58602 45-0363903 501(C)(3) 7,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  DAKOTA RURAL ACTION 910 FOURTH ST., SUITE A BROOKINGS, SD 57006 46-0398656 501(C)(3) 7,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  PARMILY FARM DEFENDERS P.O. BOX 1772 MADISON, WI 53701 39-1814573 501(C)(3) 8,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM		47-0553823	501(C)(3)	6 000.	0.				
P.O. BOX 130  BEREA, KY 40403  61-1092056  501(C)(3)  5,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM   DAKOTA RESOURCE COUNCIL  P.O. BOX 1095  DAKOTA RURAL ACTION  910 FOURTH ST., SUITE A  BEOCKINGS, ND 58602  45-0363903  501(C)(3)  7,000.  0.  THE SYSTEM  TAKING ACTION TO CHANGE  TAKING ACTION TO CHANGE  THE SYSTEM  TAKING ACTION TO CHANGE  THE SYSTEM TAKING ACTION TO CHANGE  TAKING ACTION TO CHANGE	,								
BEREA, KY 40403 61-1092056 501(C)(3) 5,000. 0. THE SYSTEM  DAKOTA RESOURCE COUNCIL P.O. BOX 1095 DICKINSON, ND 58602 45-0363903 501(C)(3) 7,000. 0. THE SYSTEM  DAKOTA RURAL ACTION TO CHANGE DAKOTA RURAL ACTION TO CHANGE DAKOTA RURAL ACTION TO CHANGE PAMILY FARM DEFENDERS P.O. BOX 1772 TAKING ACTION TO CHANGE HE SYSTEM  PAMILY FARM COMMONS PO BOX 3050 MADISON, WI 53704 45-5445890 501(C)(3) 5,000. 0. THE SYSTEM  FAKING ACTION TO CHANGE HE SYSTEM  TAKING ACTION TO CHANGE HE SYSTEM  TAKING ACTION TO CHANGE HE SYSTEM  FAKING ACTION TO CHANGE HE SYSTEM  TAKING ACTION TO CHANGE HE SYSTEM  TO CHANGE  THE SYSTEM COMMON TO CHANGE HE SYSTEM  TAKING ACTION TO CHANGE HE SYSTEM  TAKING ACTION TO CHANGE HE SYSTE	COMMUNITY FARM ALLIANCE								
DAKOTA RESOURCE COUNCIL P.O. BOX 1095 DICKINSON, ND 58602  45-0363903  501(c)(3)  7,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM - IDAHO TAKING ACTION TO CHANGE THE SYSTEM	P.O. BOX 130							TAKING ACTION TO CHANGE	
P.O. BOX 1095 DICKINSON, ND 58602  45-0363903  501(C)(3)  7,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM  TAK	BEREA, KY 40403	61-1092056	501(C)(3)	5,000.	0.			THE SYSTEM	
P.O. BOX 1095 DICKINSON, ND 58602  45-0363903  501(C)(3)  7,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE THE SYST									
DICKINSON, ND 58602 45-0363903 501(C)(3) 7,000. 0. THE SYSTEM  DAKOTA RURAL ACTION 910 FOURTH ST., SUITE A BROOKINGS, SD 57006 46-0398656 501(C)(3) 7,000. 0. THE SYSTEM  FAMILY FARM DEFENDERS P.O. BOX 1772 TAKING ACTION TO CHANGE FARM COMMONS FO BOX 3050 TAKING ACTION TO CHANGE MADISON, WI 53701 45-5445890 501(C)(3) 5,000. 0. THE SYSTEM  FLORIDA CERTIFIED ORGANIC GROWERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 59-300664 501(C)(3) 7,000. 0. THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  FAKING ACTION TO CHANGE THE SYSTEM  FIRSTSTEM - IDAHO DRGANIZATION OF RESOURCE  FIRSTSTEM - IDAHO DRGANIZATION OF RESOURCE									
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910 FOURTH ST., SUITE A BROOKINGS, SD 57006 46-0398656 501(C)(3) 7,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  FAMILY FARM DEFENDERS P.O. BOX 1772 MADISON, WI 53701 39-1814573 501(C)(3) 8,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  FOR BOX 3050 MADISON, WI 53704 45-5445890 501(C)(3) 5,000. 0. THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM IDAHO ORGANIZATION OF RESOURCE	DICKINSON, ND 58602	45-0363903	501(C)(3)	7,000.	0.			THE SYSTEM	
910 FOURTH ST., SUITE A BROOKINGS, SD 57006 46-0398656 501(C)(3) 7,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  FAMILY FARM DEFENDERS P.O. BOX 1772 MADISON, WI 53701 39-1814573 501(C)(3) 8,000. 0. TAKING ACTION TO CHANGE THE SYSTEM  FOR BOX 3050 MADISON, WI 53704 45-5445890 501(C)(3) 5,000. 0. THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM IDAHO ORGANIZATION OF RESOURCE	DAKOTA RIIRAI. ACTION								
### BROOKINGS, SD 57006								TAKING ACTION TO CHANGE	
FAMILY FARM DEFENDERS P.O. BOX 1772  MADISON, WI 53701  39-1814573  501(C)(3)  8,000.  0.  THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE	•	46-0398656	501(C)(3)	7 000.	0.				
P.O. BOX 1772  MADISON, WI 53701  39-1814573  501(C)(3)  8,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE TAKING ACTION TO CHANGE TAKING ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM THE SYSTEM TO CHANGE THE SYS	,								
MADISON, WI 53701 39-1814573 501(C)(3) 8,000. 0. THE SYSTEM  FARM COMMONS PO BOX 3050 MADISON, WI 53704 45-5445890 501(C)(3) 5,000. 0. THE SYSTEM  FLORIDA CERTIFIED ORGANIC GROWERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 59-3006664 501(C)(3) 7,000. 0. THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B	FAMILY FARM DEFENDERS								
FARM COMMONS PO BOX 3050 MADISON, WI 53704  ### SYSTEM  ### SYSTEM	P.O. BOX 1772							TAKING ACTION TO CHANGE	
PO BOX 3050 MADISON, WI 53704  45-5445890  501(C)(3)  5,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  FLORIDA CERTIFIED ORGANIC GROWERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301  30-0390131  501(C)(3)  5,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE ORGANIZATION OF RESOURCE	MADISON, WI 53701	39-1814573	501(C)(3)	8,000.	0.			THE SYSTEM	
PO BOX 3050 MADISON, WI 53704  45-5445890  501(C)(3)  5,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  FLORIDA CERTIFIED ORGANIC GROWERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301  30-0390131  501(C)(3)  5,000.  0.  TAKING ACTION TO CHANGE THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE ORGANIZATION OF RESOURCE									
MADISON, WI 53704 45-5445890 501(C)(3) 5,000. 0. THE SYSTEM  FLORIDA CERTIFIED ORGANIC GROWERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 59-3006664 501(C)(3) 7,000. 0. THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B ORGANIZATION OF RESOURCE	FARM COMMONS								
FLORIDA CERTIFIED ORGANIC GROWERS AND CONSUMERS - P.O. BOX 12311 - GAINESVILLE, FL 32604 59-3006664 501(C)(3) 7,000. 0. THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B ORGANIZATION OF RESOURCE	PO BOX 3050								
AND CONSUMERS - P.O. BOX 12311 -  GAINESVILLE, FL 32604 59-3006664 501(C)(3) 7,000. 0. THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B ORGANIZATION OF RESOURCE	MADISON, WI 53704	45-5445890	501(C)(3)	5,000.	0.			THE SYSTEM	
AND CONSUMERS - P.O. BOX 12311 -  GAINESVILLE, FL 32604 59-3006664 501(C)(3) 7,000. 0. THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B ORGANIZATION OF RESOURCE	HI ODIDA GERMINIE ODGANIG GROVERG								
GAINESVILLE, FL 32604 59-3006664 501(C)(3) 7,000. 0. THE SYSTEM  FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B ORG. OF RESOURCE COUNCILS								TAKING AGETON EO GUANGE	
FRIENDS OF FAMILY FARMERS 249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B  TAKING ACTION TO CHANGE TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE		E0 2006664	E01/C)/2)	7 000	0				
249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE ORGANIZATION OF RESOURCE	GAINESVILLE, FL 32004	39-300664	501(C)(3)	7,000.	0.			INE SISIEM	
249 LIBERTY ST. NE, SUITE 212 SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. TAKING ACTION TO CHANGE THE SYSTEM TAKING ACTION TO CHANGE THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE ORGANIZATION OF RESOURCE	FRIENDS OF FAMILY FARMERS								
SALEM, OR 97301 30-0390131 501(C)(3) 5,000. 0. THE SYSTEM  WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B 501(C)(3) 5,000. 0. THE SYSTEM  TAKING ACTION TO CHANGE THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE								TAKING ACTION TO CHANGE	
TAKING ACTION TO CHANGE WESTERN ORG. OF RESOURCE COUNCILS THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE	•	30-0390131	501(C)(3)	5 000.	0.				
WESTERN ORG. OF RESOURCE COUNCILS 2205 27TH ST., SUITE B THE SYSTEM - IDAHO ORGANIZATION OF RESOURCE	,								
2205 27TH ST., SUITE B ORGANIZATION OF RESOURCE	WESTERN ORG. OF RESOURCE COUNCILS								
	2205 27TH ST., SUITE B								
	BILLINGS, MT 59101	84-1123481	501(C)(3)	5,000.	0.			COUNCILS	

Part II Continuation of Grants and Other	Assistance to Go	overnments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	( <b>b)</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 non-cash assistance	<b>(h)</b> Purpose of grant or assistance
SOCIALLY RESPONSIBLE AGRICULTURE							TAKING ACTION TO CHANGE THE SYSTEM - ILLINOIS
PROJECT - P.O. BOX 687 - MCCALL,							CITIZENS OF CLEAN AIR AND
ID 83638	20-8688122	501(C)(3)	5,000.	0.			WATER
ILLINOIS STEWARDSHIP ALLIANCE 230 BROADWAY STREET, SUITE 200							TAKING ACTION TO CHANGE
SPRINGFIELD, IL 62701	37-6160476	501(C)(3)	7,500.	0.			THE SYSTEM
,		1	1,7,7,7				
INSTITUTE FOR AGRICULTURE AND TRADE POLICY - 2105 FIRST AVE. S.							TAKING ACTION TO CHANGE
- MINNEAPOLIS, MN 55404	36-3501938	501(C)(3)	5,000.	0.			THE SYSTEM
TRUST FOR CONSERVATION INNOVATION							TAKING ACTION TO CHANGE THE SYSTEM - INTERFAITH
405 14TH ST., SUITE 164							SUSTAINABLE FOOD
OAKLAND, CA 94612	91-2166435	501(C)(3)	5,000.	0.			COLLABORATIVE
IOWA CITIZENS FOR COMMUNITY IMPROVEMENT - 2001 FOREST AVE							TAKING ACTION TO CHANGE
DES MOINES, IA 50311	42-1110721	501(C)(3)	7,500.	0.			THE SYSTEM
LAND STEWARDSHIP PROJECT 821 EAST 35TH ST., SUITE 200 MINNEAPOLIS, MN 55406	41-1466054	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
MISSISSIPPI SUSTAINABLE  AGRICULTURE NETWORK - PO BOX 447  - OXFORD, MS 38655	46-4755705	501(c)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
, , , , , , , , , , , , , , , ,			1 2,330.	<u> </u>			
MISSOURI RURAL CRISIS CENTER							
1108 RANGELINE ST.							TAKING ACTION TO CHANGE
COLUMBIA, MO 65201	43-1432033	501(C)(3)	10,000.	0.			THE SYSTEM
NATIONAL FAMILY FARM COALITION							TAKING ACTION TO CHANGE
110 MARYLAND AVE. N.E., SUITE 307	38_2652620	501(C)(3)	20 000	0			
WASHINGTON, DC 20002	38-2652620	Por(C)(3)	20,000.	0.			THE SYSTEM

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	<b>nited States</b> (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	<b>(b)</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 non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR RURAL AFFAIRS 145 MAIN STREET, P.O. BOX 136 LYONS, NE 68038	47-0553823	501(C)(3)	17,500.	0.			TAKING ACTION TO CHANGE THE SYSTEM - NATIONAL SUSTAINABLE AGRICULTURE COALITION
CENTER FOR RURAL AFFAIRS 145 MAIN STREET, P.O. BOX 136 LYONS, NE 68038		501(C)(3)	7,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM - NATIONAL YOUNG FARMERS COALITION
NEW ENGLAND FARMERS UNION EDUCATION FOUNDATION - 176 AVENUE A, SUITE 2 - TURNERS FALLS, MA 01376	27-1536238	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM - NEW ENGLAND FARMERS UNION
COMMUNITY ALLIANCES OF INTERDEPENDENT AGRICULTURE - 30 KEETS ROAD - DEERFIELD, MA 01342	04-3439897	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM - NORTHEAST ORGANIC DAIRY PRODUCERS ALLIANCE
NORTHEAST ORGANIC FARMING ASSOCIATION INTERSTATE COUNCIL - 168 FAIRVIEW LANE - PORTSMOUTH, RI 02871	22-2574183	501(C)(3)	18,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
NORTHERN PLAINS RESOURCE COUNCIL 220 SOUTH 27TH ST. SUITE A BILLINGS, MT 59101	81-0367205	501(C)(3)	7,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
OHIO ECOLOGICAL FOOD AND FARM ASSOCIATION - 41 CROSWELL ROAD - COLUMBUS, OH 43214	34-1638273	501(C)(3)	6,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
ORGANIC SEED ALLIANCE P.O. BOX 772 PORT TOWNSEND, WA 98368	51-0175667	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
RURAL VERMONT 15 BARRE ST., SUITE 2 MONTPELIER, VT 05602	22-3045871	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM

Part II Continuation of Grants and Other	Assistance to Go	vernments and Orga	nizations in the U	nited States (Sch	edule I (Form 990), Pa	art II.)	
(a) Name and address of organization or government	<b>(b)</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 non-cash assistance	(h) Purpose of grant or assistance
SOUTHERN SUSTAINABLE AGRICULTURE WORKING GROUP - P.O. BOX 1552 - FAYETTEVILLE, AR 72702	71-0844535	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
TEXAS ORGANIC FARMERS & GARDENERS ASSOCIATION - P.O. BOX 48 - ELGIN, TX 78621	74-2687511	501(C)(3)	7,500.	0.			TAKING ACTION TO CHANGE THE SYSTEM
WEST VIRGINIA FOOD AND FARM COALITION - 411 MAINE STREET, SUITE 215 - MOUNT HOPE, WV 25880	46-2706460	501(C)(3)	5,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
WESTERN COLORADO CONGRESS PO BOX 1931 GRAND JUNCTION, CO 81502	84-0837218	501(C)(3)	6,000.	0.			TAKING ACTION TO CHANGE THE SYSTEM
WESTERN ORGANIZATION OF RESOURCE COUNCILS - 220 S. 27TH ST., SUITE B - BILLINGS, MT 59101	84-1123481	501(C)(3)	7,500.	0.			TAKING ACTION TO CHANGE THE SYSTEM
RURAL ADVANCEMENT FOUNDATION INTERNATIONAL-USA - PO BOX 640 - PITTSBORO, NC 27512	56-1704863	501(C)(3)	7,500.	0.			TAKING ACTION TO CHANGE THE SYSTEM - CAMPAIGN FO CONTRACT AG REFORM
UNIVERSITY OF NEBRASKA AT OMAHA 6001 DODGE STREET OMAHA, NE 68182	47-0049123	501(C)(3)	7,234.	0.			SCHOLARSHIP FOR FARMING STUDENTS
IOWA STATE UNIVERSITY OF SCIENCE AND TECHNOLOGY - 2221 WANDA DALEY DRIVE - AMES, IA 50011	42-6004224	501(C)(3)	13,779.	0.			SCHOLARSHIP FOR FARMING STUDENTS

36-3383233

FARM AID, INC Schedule I (Form 990) (2015) FARM AID, INC

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

Page 2

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance		
EMERGENCY AND FARM DISASTER GRANTS	79	39,306.	0.				
Part IV Supplemental Information. Provide the information rec	quired in Part I, lin	e 2, Part III, column	(b), and any other a	dditional information.			
PART I, LINE 2:							
FARM AID REQUIRES TWO REPORTS PER	YEAR.						
1. THE FIRST REPORT, DUE ON JULY 1	L5 OF THE	GRANT YEA	R, SHOULD	PROVIDE A			
NARRATIVE AND FINANCIAL INFORMATION ON HOW THE GRANTEE HAS USED THEIR GRANT							
AWARD IN THE FIRST SIX MONTHS OF THE GRANT YEAR. IF THE GRANT FUNDS HAVE							
BEEN FULLY EXPENDED AT THIS TIME, THIS REPORT MAY BE CONSIDERED THE FINAL							
REPORT, BUT MUST BE IDENTIFIED AS SUCH IN THE COVER LETTER.							

Schedule I (Form 990)

### **SCHEDULE L**

Department of the Treasury

(Form 990 or 990-EZ)

# **Transactions With Interested Persons**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Internal Revenue Service

➤ Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047

**Open To Public** Inspection

Name of the organization

FARM ATD TNC

Employer identification number 36-3383233

	mm mid,	1110					100		0 5 2				
Part I Excess Bene	fit Transacti	ons (section 50	01(c)(3	), sect	ion 501(c)(4), and 50	01(c)(29) organization	ns only	/).					
Complete if the c	organization ansv	vered "Yes" on	Form 9	90, Pa	art IV, line 25a or 25b	o, or Form 990-EZ, F	art V,	line 40	)b				
1 (a) Name of disqualified p	erson (b) F	Relationship bety			(c) Description of transaction								
(a) Name of alequamed p	7613611	person and or	rganıza	ation	,,	(c) Description of transaction Yes No							
										$\perp$	_		
										+	_		
										+	_		
										+	-		
2 Enter the amount of tax i	-	-	-			-		•					
								<b>&gt;</b> 5					
3 Enter the amount of tax,	ir any, on line ∠, a	above, reimburs	sea by	trie or	ganization			<b>&gt;</b> \$					
Part II Loans to and	d/or From Int	erested Per	sons										
					, Part V, line 38a or I	Form 990 Part IV lir	ne 26·	or if th	e oraș	nizati	nn -		
reported an amo	-				, rait v, iiic ooa or i	1 01111 330, 1 art 14, III	10 20,	01 11 11	ic orga	ii iiZati	511		
(a) Name of	(b) Relationship	(c) Purpose	(d) Lo	an to or	(e) Original	(f) Balance due	(a)	ln	<b>(h)</b> Ap	proved	(i) W	ritten	
interested person	with organization	of loan	from organiz	the zation?	principal amount	(i) Balance due	defa		bý bo comn	ard or I	agree		
			То	From			Yes	No	Yes	No	Yes	No	

#### Total Grants or Assistance Benefiting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (c) Amount of (a) Name of interested person (e) Purpose of (d) Type of (b) Relationship between assistance assistance assistance interested person and the organization

▶ \$

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

Schedule L (Form 990 or 990-EZ) 2015

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz reven	ation's
	porcon and the organization	tranoaction.	transastion	Yes	No
JOHN MELLENCAMP	DIRECTOR	40,001	LOGISTICS C		X
Part V Supplemental Information			1		
Provide additional information for res	ponses to questions on Schedule L (see i	nstructions).			
SCH L, PART IV, BUSINESS	TRANSACTIONS INVOLVI	NG INTEREST	TED PERSONS:		
(A) NAME OF PERSON: JOHN	MELLENCAMP				
(D) DESCRIPTION OF TRANSA	CTION: LOGISTICS COOF	RDINATION.	PER DIEM AN	D	
TRAVEL REIMBURSEMENT PAID	O TO JOHN MELLENCAMP'S	S MANAGER (	TOUR MANAGE	MENT	
ASSOCIATES, LLC) FOR JOHN	MELLENCAMP PROVIDING	G A GRATIS	PERFORMANCE	FOR	A
FUNDRAISING EVENT.					

## **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Open To Public Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

**Employer identification number** 

	FARM AID, IN	IC			36-3	<u> 3383</u>	233	
Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of d noncash contrib	etermir		is .
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	1	53,150.	STOCK MARKE	ET Q	UOT	ATI
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ( MERCHANDISES )	X	1		FAIR MARKET		LUE	
26	Other $\blacktriangleright$ ( FOOD AND BEVE)	X	1	30,421.	FAIR MARKET	' VA	LUE	ı
27	Other • ()							
28	Other ()							
29	Number of Forms 8283 received by the organia	ization durin	g the tax year for o	contributions				
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement <b>29</b>				
							Yes	No
30a	During the year, did the organization receive by	y contribution	on any property rep	ported in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the date	e of the initia	al contribution, and	d which is not required to be	used for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contrib	utions?	31		X
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) t	for a type of prope	rty for which column (a) is ch	iecked,			
	describe in Part II.							
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Schedule M	(Form	990)	(2015)

Schedule M (Form 990) (2015)

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

Department of the Treasury

Internal Revenue Service

FOOD.

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.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

INC FARM AID,

**Employer identification number** 36-3383233

SINCE 1985, FARM AID HAS RAISED \$50 MILLION TO SUPPORT PROGRAMS THAT HELP FARMERS THRIVE, EXPAND THE REACH OF THE GOOD FOOD MOVEMENT, TAKE ACTION TO CHANGE THE DOMINANT SYSTEM OF INDUSTRIAL AGRICULTURE AND PROMOTE FOOD FROM FAMILY FARMS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: GUIDANCE FOR NEW FARMERS, DIRECT ASSISTANCE TO FARMERS IN CRISIS, AND SUPPORT FOR FARMERS LOOKING TO TRANSITION TO MORE SUSTAINABLE PRODUCTION METHODS AND MARKETS. THROUGH THE NETWORK, FARM AID BUILDS RELATIONSHIPS BETWEEN INDIVIDUALS, FARM SERVICE ORGANIZATIONS, BUSINESSES TO ADDRESS CHALLENGES AND CREATE OPPORTUNITIES FOR FARMERS. FARM AID POINTS FARMERS AND ADVOCATES TO OUR MOST TRUSTED RESOURCES, NEW OFFERINGS AND TIMELY OPPORTUNITIES VIA THE RESOURCE NETWORK GUIDES AND THE RESOURCE SPOTLIGHT BLOG, WHICH RECEIVED MORE THAN 4,000 VISITS IN 2015, A 77% INCREASE OVER LAST YEAR.

IN JANUARY, FARM AID HOSTED A TEXAS DROUGHT DISASTER SUMMIT. DRAWING FROM THE EXPERTISE OF TEXAS FARM BASED ORGANIZATIONS, AS WELL AS NATIONAL ADVOCATES AND DISASTER RESPONSE EXPERTS, THE SUMMIT BROUGHT NEARLY 100 TEXAS FARMERS, RANCHERS AND SERVICE PROVIDERS TOGETHER TO FOCUS ON IMMEDIATE NEEDS AS WELL AS BUILDING LONG-TERM RESILIENCE. AS A RESULT OF THE SUMMIT, PARTICIPATING ORGANIZATIONS HAVE BEEN INSPIRED TO

DEVELOP AND DEEPEN THEIR OWN FARM ADVOCATE SERVICES, AND NEW

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COLLABORATIONS HAVE BEEN FORMED, IMPROVING FARMER SERVICE OFFERINGS AT
THE STATE LEVEL AND BEYOND.

DURING 2015, FARM AID PARTNERED WITH DR. CHARLES THOMPSON OF THE DUKE

UNIVERSITY CENTER FOR DOCUMENTARY STUDIES TO DOCUMENT THE WORK OF THE

FARM ADVOCATES WE'VE COLLABORATED WITH SINCE THE FARM CRISIS OF THE

'80s. CHARLIE AND HIS DOCUMENTARY TEAM TRAVELED THE COUNTRY TO MEET,

FILM AND PHOTOGRAPH FARM ADVOCATES LIKE MONA LEE BROCK AND BENNY

BUNTING, WHO WORK ONE-ON-ONE WITH FARMERS TO HELP THEM NAVIGATE TOUGH

TIMES AND KEEP THEIR FARMS IN THE FACE OF CRISIS. THE FILM WAS SCREENED

AT FARM AID 30 TO RAVE REVIEWS. THE FILM WILL BE RELEASED TO A BROADER

AUDIENCE IN 2016.

FARM AID AWARDED \$279,300 IN GRANTS TO ORGANIZATIONS THAT HELP FARMERS

SECURE THE RESOURCES THEY NEED TO BEGIN FARMING, ACCESS NEW MARKETS,

GROW SUSTAINABLY, AND BUILD RESILIENCE IN THE FACE OF FINANCIAL AND

NATURAL DISASTERS. AN ADDITIONAL \$38,500 WAS GRANTED TO FARMERS IN THE

FORM OF EMERGENCY GRANTS AND THROUGH THE FAMILY FARM DISASTER FUND TO

SUPPORT FARMERS AFFECTED BY WEATHER DISASTERS ACROSS THE COUNTRY,

INCLUDING TORNADOES IN THE MIDWEST AND HISTORIC FLOODING IN SOUTH

CAROLINA. SCHOLARSHIPS FOR COLLEGE STUDENTS STUDYING AGRICULTURE

TOTALED \$22,965.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PARTICIPATE IN STRENGTH FROM OUR ROOTS, THE PRE-CONCERT GATHERING; AND

TO BILLING, MT, TO PARTICIPATE IN PRINCIPLES OF COMMUNITY ORGANIZING

WORKSHOPS.

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IN MARCH, WHILE PRESIDENTIAL HOPEFULS GATHERED TO PARTICIPATE IN THE

FIRST IOWA AG SUMMIT, WILLIE NELSON PENNED AN OP-ED IN POLITICO TO CALL

FOR FOOD AND FARM POLICY THAT IS GUIDED BY FAMILY FARMERS AND SUPPORTED

BY POLICIES THAT PROMOTE ACCESS TO LAND, CREDIT AND FAIR MARKETS. FARM

AID PARTNERED WITH GROUPS ON THE GROUND TO OFFER A NATIONAL VOICE TO

SUPPORT IOWA ORGANIZING EFFORTS WORKING TO COMBAT THE CORPORATE

AGRICULTURE AGENDA PUT FORTH BY THE SUMMIT.

FOR YEARS, FARM AID HAS FOUGHT FOR ANTITRUST ENFORCEMENT AND
PROTECTIONS FOR FARMERS FACING CORPORATE ABUSE IN THE LIVESTOCK SECTOR.

FOLLOWING OUR WORK IN 2014 TO BRING AWARENESS TO ABUSES ENDURED BY

FARMERS IN THE CONTRACT POULTRY SYSTEM, THE ISSUE WAS PICKED UP BY

HBO'S LAST WEEK TONIGHT WITH JOHN OLIVER IN A MAY 2015 SEGMENT

FEATURING SEVERAL FARM AID PARTNERS AND HEARINGS FARM AID HAS TAKEN

PART IN OVER THE YEARS. FOLLOWING THE BROADCAST, FARM AID ATTENDED A

CONGRESSIONAL BRIEFING IN JUNE ON THE ROLE OF CONGRESS IN PROTECTING

GROWERS, WHILE WILLIE NELSON SENT A LETTER TO HOUSE COMMITTEE

LEADERSHIP URGING THEM TO PROTECT POULTRY GROWERS. IN JULY, WILLIE

NELSON AND CONGRESSWOMAN MARCY KAPTUR CO-WROTE AN OP-ED IN THE

WASHINGTON POST, CALLING FOR REFORM OF THE POULTRY INDUSTRY. A CRITICAL

HOUSE VOTE IN JULY PROVED VICTORIOUS WHEN FOR THE FIRST TIME IN YEARS,

CONGRESS REMOVED RESTRICTIONS ON THE USDA FROM PROTECTING POULTRY

GROWERS.

IN SEPTEMBER, FARM AID PARTNERED WITH STORYCORPS TO RECORD THE STORIES

OF FARMERS, ADVOCATES AND ACTIVISTS WHO ARE LEADERS IN THE FARM

MOVEMENT. THE STORIES ARE TOUCHING AND POWERFUL, AND ONE OF THEM,

FEATURING CORKY JONES AND DAVID SENTER, AIRED ON CHICAGO PUBLIC RADIO.

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THROUGHOUT THE YEAR, FARM AID BROUGHT FORWARD OPPORTUNITIES FOR FARMERS AND EATERS TO INFLUENCE PUBLIC POLICY, INCLUDING GMO LABELING, FARM TO SCHOOL PROGRAMS, GLOBAL TRADE AGREEMENTS, ANTITRUST ENFORCEMENT IN THE LIVESTOCK INDUSTRY, THE KEYSTONE XL PIPELINE, AND A BILL TO FORGIVE STUDENT LOAN DEBT FOR COLLEGE STUDENTS WHO BECOME FARMERS. FARM AID CONTINUED ITS SUPPORT OF MANDATORY LABELING OF FOODS CONTAINING GENETICALLY MODIFIED INGREDIENTS. IN DECEMBER, WILLIE NELSON, JOHN MELLENCAMP, NEIL YOUNG AND DAVE MATTHEWS PENNED A LETTER TO PRESIDENT OBAMA TO CALL ON HIM TO USE HIS AUTHORITY TO THWART ANY EFFORTS BY CONGRESS TO INSERT A RIDER INTO THE APPROPRIATIONS BILL THAT WOULD DENY AMERICANS THE RIGHT TO LABELING OF GMO FOOD. FARM AID ALSO LENT A HAND TO FARM ORGANIZATIONS WORKING ON CRITICAL STATE POLICY ISSUES, INCLUDING MISSOURI FARMERS FIGHTING CORPORATE EFFORTS TO INSTITUTE A NEW BEEF CHECK OFF TAX ON RANCHERS, TO REMOVE LOCAL CONTROL PROTECTIONS AND TO ALLOW FOREIGN CORPORATIONS TO OWN MISSOURI FARMLAND. IN NEBRASKA, WE SUPPORTED EFFORTS TO COMBAT A BILL THAT WOULD ALLOW MULTINATIONAL CORPORATIONS TO OWN AND CONTROL HOGS IN CONTRACT HOG OPERATIONS.

FARM AID CONTINUES TO SERVE AS A LEADER AND CONTRIBUTING MEMBER OF

VARIOUS COLLABORATIVE EFFORTS TO CHANGE OUR FARM AND FOOD SYSTEM AND

ADVANCE THE POWER AND PARTICIPATION OF FARMERS IN THESE EFFORTS. THESE

HAVE INCLUDED EFFORTS TO ADDRESS ECONOMIC AND SOCIAL INJUSTICES ACROSS

ANIMAL AGRICULTURE, EFFORTS TO ELEVATE ON-THE-GROUND SOLUTIONS TO

CLIMATE CHANGE, AS WELL AS EFFORTS TO REBUILD THE SUPPLY OF NON-GMO

FOOD INGREDIENTS AND ANIMAL FEED IN THE UNITED STATES.

Name of the organization **Employer identification number** FARM AID, INC 36-3383233 FARM AID ALSO CONTINUES TO INCREASE ITS LEADERSHIP IN THE PHILANTHROPIC COMMUNITY TO BRING ATTENTION TO THE VARIED CHALLENGES FACED BY FAMILY FARMERS AND TO ENCOURAGE COLLABORATION AND COLLECTIVE PROBLEM SOLVING. FARM AID SERVED ON THE SUSTAINABLE AGRICULTURE AND FOOD SYSTEMS FUNDERS (SAFSF) POLICY BRIEFING PLANNING COMMITTEE FOR ITS SECOND ANNUAL GATHERING IN DES MOINES, IOWA, THIS DECEMBER. FARM AID ALSO HOSTED A WORKSHOP AT THE ANNUAL SAFSF FORUM IN CHICAGO THIS PAST JUNE, HIGHLIGHTING THE ROLE OF THE FOOD AND FARM MOVEMENT IN RESTORING DEMOCRATIC AND PARTICIPATORY ENGAGEMENT IN OUR FOOD SYSTEM. FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: ON SEPTEMBER 19 AT FARM AID 30: - FARM AID SERVED LOCAL, ORGANIC, FAMILY FARM FOOD THROUGHOUT THE VENUE WITH FARM AID'S HOMEGROWN CONCESSIONS , WHICH BRINGS FAMILY FARM FOOD TO THE CONCESSIONS STANDS AT EVERY CONCERT VENUE WHERE FARM AID PLAYS. HOMEGROWN CONCESSIONS BUILDS A STRONG RELATIONSHIP BETWEEN FARMERS, FOOD COMPANIES, OUR CONCESSIONAIRE AND CONCERTGOERS. FOOD COMPANIES AND SPONSORS DONATED FAMILY FARM FOOD FOR HOMEGROWN CATERING BACKSTAGE AND IN VIP AREAS. - THE HOMEGROWN YOUTHMARKET SOLD LOCAL PRODUCE FROM FAMILY FARMERS TO CONCERTGOERS. THE YOUTHMARKET WAS STAFFED BY LOCAL YOUTH FROM CHICAGO'S HIGH SCHOOL FOR AGRICULTURAL SCIENCES, WINDY CITY AND GROWING POWER. - IN FARM AID'S HOMEGROWN VILLAGE, 35 FARM AND FOOD GROUPS ENGAGED CONCERTGOERS IN HANDS-ON INTERACTIVE ACTIVITIES ABOUT FAMILY FARMERS, SOIL, WATER, FOOD PRODUCTION, AND RENEWABLE ENERGY. ON THE FARMYARD STAGE, AGRICULTURAL JOURNALIST ALAN GUEBERT HOSTED CONVERSATIONS WITH

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FARMERS, ACTIVISTS AND ARTISTS THAT INSPIRED CONCERTGOERS TO ACTION. IN

Schedule O (Form 990 or 990-EZ) (2015) Name of the organization **Employer identification number** FARM AID, INC 36-3383233 THE HOMEGROWN SKILLS TENT, CONCERTGOERS LEARNED HOW TO FORAGE FOR URBAN EDIBLES, MAKE BUTTER AND CHEESE, AND MORE. - FOOD AND SERVICEWARE WASTE WAS COLLECTED TO BE TURNED INTO COMPOST TO SUSTAIN FUTURE CROPS. FARM AID SOLD REUSABLE WATER BOTTLES TO REDUCE PLASTIC USE. CONCERT T-SHIRTS WERE MADE WITH CERTIFIED ORGANIC COTTON, WITH SUPPORT FROM SPONSORS. - THE CONCERT GENERATED SEVERAL MAJOR DONATIONS AS WELL AS INDIVIDUAL GIFTS. CORPORATE SPONSORS INCLUDED AMY'S KITCHEN, HORIZON ORGANIC, CHIPOTLE MEXICAN GRILL, APPLEGATE, CANIDAE NATURAL PET FOOD COMPANY, GREENER FIELDS TOGETHER, LAGUNITAS BREWING CO., ORGANIC VALLEY, FIRSTMERIT BANK, WHOLE FOODS MARKET, RUDI'S ORGANIC BAKERY, ECONSCIOUS AND TIME OUT CHICAGO. HUNDREDS OF VOLUNTEERS DONATED THEIR TIME TO MAKE THE CONCERT A SUCCESS. FARM AID HOSTED A NUMBER OF PRE-CONCERT EVENTS AND ACTIVITIES IN CHICAGO TO BRING FARMERS TOGETHER, ENGAGE THE PUBLIC AND INVITE THE MEDIA TO HIGHLIGHT ISSUES OF CONCERN TO FAMILY FARMERS AND EATERS. THESE EVENTS INCLUDED: - FARM AID 30: STRENGTH FROM OUR ROOTS, WHICH GATHERED NEARLY 200 FARMERS, ACTIVISTS, FARM ADVOCATES AND CIVIC LEADERS FROM ACROSS THE COUNTRY TO ENGAGE IN INSPIRED STORYTELLING, INTERGENERATIONAL EXCHANGE, MEANINGFUL REFLECTION AND STRATEGIC ANALYSIS. - FILM2FARMAID, OUR FIRST FILM FESTIVAL! FILM2FARMAID RAN OVER THREE DAYS IN CHICAGO, FEATURING SHORT AND FEATURE FILMS ABOUT FOOD AND FARMING. THE LAST NIGHT OF THE FESTIVAL FEATURED COUNTRY, A 1984 FILM

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ABOUT THE 1980'S FARM CRISIS. JESSICA LANGE JOINED US BY PHONE FOR A

ADVOCATES AND FARMERS SPOKE ABOUT THEIR EXPERIENCES DURING THE FARM

CONVERSATION ABOUT WHAT DREW HER TO THE FILM AND A PANEL OF FARM

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- AN URBAN FARM TOUR, WHICH BROUGHT 50 PEOPLE TO THREE FARMS IN CHICAGO CITY LIMITS TO SEE HOW COMMUNITY AND ROOFTOP GARDENS, PUBLIC ORCHARDS AND COMMERCIAL FARMS NOURISH THE CITY.
- THE TAKEOVER OF MODERN FARMER'S INSTAGRAM ACCOUNT. FARM AID SHARED PHOTOS DURING THE WEEK OF FARM AID 30, REACHING A NEW AUDIENCE OF FARMERS AND CONCERNED EATERS WHO LEARNED ABOUT ALL OF THE THINGS A FARM AID CONCERT ENCOMPASSES ASIDE FROM THE INCREDIBLE MUSIC.
- AND FARM AID EVE, A CELEBRATION OF FAMILY FARMERS AND GOOD FOOD THAT BROUGHT TOGETHER MORE THAN 400 DONORS, FARMERS, ACTIVISTS, VOLUNTEERS AND OTHER MEMBERS OF FARM AID'S CORE COMMUNITY THE NIGHT BEFORE THE CONCERT.

BEFORE DOORS OPENED AT FARM AID 30, FARM AID HELD A PRESS EVENT ATTENDED BY HUNDREDS OF MEMBERS OF THE MEDIA. THE EVENT FEATURED FARM AID'S BOARD ARTISTS AND FARMERS, ADVOCATES AND ACTIVISTS REPRESENTING FARM AID'S ROOTS AND FARM AID'S FUTURE. THE DIVERSITY OF VOICES ON STAGE WAS AN INSPIRATION TO ALL. FARMER/ACTIVIST DAVID SENTER SAID, "THE BRINGING TOGETHER OF SO MANY YOUNG FARM LEADERS GAVE ME HOPE THAT THE WORK OVER THE YEARS HAS PAVED THE WAY FOR OUR NEW LEADERS OF THE FUTURE. I BELIEVE THERE IS A BRIGHT FUTURE FOR FAMILY FARMERS PRODUCING HEALTHY FOOD THANKS TO FARM AID'S EFFORTS."

FARM AID 30 RECEIVED SIGNIFICANT LOCAL AND REGIONAL MEDIA COVERAGE, INCLUDING CHICAGO ASSOCIATED PRESS, CHICAGO TRIBUNE AND CHICAGO SUN-TIMES, AS WELL AS NATIONAL ATTENTION, INCLUDING STORIES IN ROLLING STONE AND BILLBOARD MAGAZINE, AND ON CNN AND THE LATE SHOW. THE TOTAL NUMBER OF MEDIA HITS EARNED BY FARM AID WERE SIGNIFICANTLY HIGHER IN

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Name of the organization

**Employer identification number** 

FARM AID, INC 36-3383233

2015 THAN IN RECENT YEARS, WITH 2,800 PRINT, ONLINE AND BROADCAST MEDIA

HITS. FEATURE STORIES PROMOTED THE ENTERTAINMENT VALUE OF THE CONCERT,

AS WELL AS FARM AID'S MESSAGE ABOUT CONNECTING PEOPLE EVERYWHERE WITH

INFORMATION ABOUT HOMEGROWN CONCESSIONS , THE HOMEGROWN VILLAGE AND THE FAMILY FARMERS IN ATTENDANCE.

FRESH, HEALTHFUL FOOD FROM FAMILY FARMS. EACH STORY INCLUDED

FARM AID 30 WAS BROADCAST LIVE ON SIRIUS XM SATELLITE RADIO ACROSS THE

COUNTRY, WITH INTERVIEWS OF ARTISTS, FAMILY FARMERS AND ADVOCATES

FEATURED BETWEEN MUSIC SETS. THE CONCERT WAS WEBCAST LIVE ON

WWW.FARMAID.ORG AND FARM AID'S YOUTUBE CHANNEL, WITH 43,000 PLAYBACKS

AND AN AVERAGE VIEW TIME OF 33 MINUTES. AXS TV RECORDED THE CONCERT TO

CREATE A 90-MINUTE SPECIAL THAT AIRED MULTIPLE TIMES IN JANUARY 2016.

FARM AID LAUNCHED ITS THIRD EVENT APP FOR FARM AID 30. THE APP PROVIDED

DETAILS FOR THE EVENT, INCLUDING THE MUSIC LINEUP, STORIES ABOUT

FEATURED FARMERS, INFORMATION ABOUT THE WORK OF THE ORGANIZATIONS

TAKING PART IN THE HOMEGROWN VILLAGE, AND DETAILS ABOUT THE FARMERS WHO

PROVIDED FOOD FOR HOMEGROWN CONCESSIONS. THE FARM AID 30 APP WAS

DOWNLOADED BY MORE THAN 6,000 PEOPLE, WITH MORE THAN 460,000 SCREEN

VIEWS AND AN AVERAGE SESSION TIME OF MORE THAN 3 MINUTES.

FARM AID CONTINUED THE SUCCESS OF OUR #ROAD2FARMAID SOCIAL MEDIA

CAMPAIGN, RELAUNCHING IN EARLY JULY TO BUILD EXCITEMENT FOR FARM AID 30

AND ALLOW EVERYONE TO SHARE HOW THEY ARE PART OF STRENGTHENING FAMILY

FARM AGRICULTURE. THE CAMPAIGN GREATLY EXPANDED EXPOSURE FOR FARM AID

AND OUR MISSION. MORE THAN 500 PEOPLE SUBMITTED THEIR STORIES OF HOW

THEY'RE CHANGING THE FARM AND FOOD SYSTEM AT ROAD2.FARMAID.ORG. THE

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#ROAD2FARMAID CAMPAIGN REACHED AN AUDIENCE OF 16 MILLION ON SOCIAL

MEDIA!

GROWING OUR ONLINE COMMUNITY

IN SPRING 2015, FARM AID UNVEILED OUR REDESIGNED WEBSITE, WHICH GIVES

US NEW WAYS TO CONNECT WITH OUR AUDIENCE OF FAMILY FARMERS, MUSIC FANS

AND FAMILY FARM ALLIES IN THE GOOD FOOD MOVEMENT. THE NEW SITE IS

MOBILE-FRIENDLY AND DESIGNED TO MAKE IT EASIER TO FIND INFORMATION

ABOUT FARM AID'S WORK, THE CHALLENGES OF FAMILY FARMERS AND THE

CONCERT.

FARM AID'S WEBSITE WAS A PRIMARY TOOL FOR COMMUNICATING WITH OUR

AUDIENCE, COLLECTING DONATIONS, SELLING CONCERT TICKETS AND

MERCHANDISE, ENGAGING USERS IN ONLINE ADVOCACY WITH PETITIONS AND

LETTER-WRITING CAMPAIGNS, AND ORGANIZING EVENTS. IN 2015, THERE WERE

MORE THAN 753,000 VISITS TO FARMAID.ORG BY MORE THAN 521,000 UNIQUE

VISITORS. ON THE DAY OF FARM AID 30, MORE THAN 44,000 USERS MADE MORE

THAN 63,000 VISITS TO THE WEBSITE.

IN NOVEMBER, WE LAUNCHED A NEW WEB FEATURE SPOTLIGHTING OUR GRANTEES.

IN OUR INTERACTIVE GRANT "QUILT" WE COLLECTED STORIES TO SHOW HOW FARM

AID'S GRANT PROGRAM HAS BEEN "THREADING TOGETHER" A VIBRANT NETWORK OF

FAMILY FARM ORGANIZATIONS OVER THE PAST 30 YEARS. THESE ORGANIZATIONS

ARE CRITICAL ON-THE-GROUND PARTNERS IN THE WORK TO CHANGE THE FARM AND

FOOD SYSTEM. VIEW THE QUILT AT FARMAID.ORG/QUILT.

FARM AID'S EMAIL NEWSLETTER KEPT THE FARM AID COMMUNITY INFORMED AND INSPIRED WITH MONTHLY COLUMNS THAT PROFILE AMERICA'S FAMILY FARMERS,

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Schedule O (Form 990 or 990-EZ) (2015) Name of the organization **Employer identification number** FARM AID, INC 36-3383233 ADDRESS READERS' QUESTIONS AND CONCERNS ABOUT FOOD AND FARMING, AND GIVE OPPORTUNITIES FOR READERS TO TAKE ACTION. SPECIAL FEATURES ON FARMAID.ORG INCLUDED "FARM AID: THIRTY YEARS OF ACTION FOR FAMILY FARMERS, WITH AN INTERACTIVE TIMELINE TO EXPLORE FARM AID'S WORK. IN 2015, FARM AID GREW ITS EMAIL LIST BY MORE THAN 15,000 NEW CONTACTS. FARM AID CONTINUED ITS SOCIAL MEDIA ENDEAVORS ON FACEBOOK, TWITTER, INSTAGRAM AND YOUTUBE. THE NUMBER OF FOLLOWERS ON THESE NETWORKS GREW BY THOUSANDS OF USERS (CURRENTLY 96,000 ON FACEBOOK, 28,000 ON TWITTER, 7,000 ON INSTAGRAM, AND 48,000 ON YOUTUBE). WE ADDED VIDEOS TO FARM AID'S YOUTUBE CHANNEL, BRINGING TOTAL TO 1,876 VIDEOS, WITH MORE THAN 65 MILLION VIEWS. FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE: **HOMEGROWN.ORG** HOMEGROWN.ORG IS FARM AID'S ONLINE COMMUNITY DEDICATED TO ENHANCING THE RELATIONSHIP BETWEEN FAMILY FARMERS AND EATERS. NEARLY 8,000 MEMBERS ENGAGE IN SHARING THEIR EXPERIENCES, SKILLS AND EXCITEMENT ABOUT DO-IT-YOURSELF FARM AND FOOD PROJECTS. BY PARTICIPATING FIRSTHAND IN THE CULTURE OF AGRICULTURE, HOMEGROWN PARTICIPANTS DEVELOP A DEEPER APPRECIATION OF FAMILY FARMERS AND GOOD FOOD. HOMEGROWN.ORG HAS 50,500 FACEBOOK FANS, 4,000 TWITTER FOLLOWERS AND 2,000 PINTEREST FOLLOWERS. THE EVER-EXPANDING HOMEGROWN 101 LIBRARY OF HOW-TOS ON GARDENING, COOKING, BAKING, CRAFTING AND MORE CONTINUES TO BE A MAJOR TRAFFIC

YOUTHMARKET ADDED LIVELY COMMENTARY ON THE SITE IN 2015. FOUR

DRIVER TO THE WEBSITE. THE YOUNG AND GREEN BLOGGERS FROM THE GROWNYC

CONTRIBUTING AUTHORS FROM AROUND THE COUNTRY UPDATED THE HOMEGROWN LIFE

Name of the organization **Employer identification number** FARM AID, INC 36-3383233 BLOG, SHARING THEIR OWN STORIES, STRUGGLES AND ADVICE. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: GROWING THE GOOD FOOD MOVEMENT - IN 2015, FARM AID AND ITS PARTNERS CONTINUED TO IMPLEMENT STRATEGIES THAT BOLSTER THE GOOD FOOD MOVEMENT-THE GROWING NUMBER OF AMERICANS DEMANDING FAMILY FARM-IDENTIFIED, LOCAL, ORGANIC OR HUMANELY RAISED FOOD. FARM AID IN THE AMOUNT OF \$83,000 TO ORGANIZATIONS THAT BUILD AWARDED GRANTS CONNECTIONS BETWEEN FARMERS AND CONSUMERS AND CREATE NEW MARKETS FOR FAMILY FARM FOOD. IN OCTOBER, FARM AID PARTNERED WITH THE NATIONAL FARM TO SCHOOL NETWORK TO CELEBRATE NATIONAL FARM TO SCHOOL MONTH, HIGHLIGHTING RESOURCES AVAILABLE FOR FAMILY FARMERS TO PARTICIPATE IN FARM TO SCHOOL PROGRAMS, AS WELL AS TOOLS FOR SCHOOLS INTERESTED IN BUILDING RELATIONSHIPS WITH LOCAL FARMS. FARM AID LED AN ADVOCACY CAMPAIGN TO GATHER SUPPORT FOR INCREASED FUNDING FOR FARM TO SCHOOL PROGRAMS. EXPENSES \$ 242,097. INCLUDING GRANTS OF \$ 83,000. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 2: WILLIE NELSON AND LANA NELSON - FAMILY RELATIONSHIP FORM 990, PART VI, SECTION A, LINE 8B: THERE WERE NO COMMITTEE MEETINGS HELD IN 2015. FORM 990, PART VI, SECTION B, LINE 11: FARM AID, INC. HAS GIVEN EXTENSIVE REVIEW OF THE 2015 FORM 990 WITH A NEW

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AUDITING FIRM AND WITH EXTERNAL EXEMPT-ORGANIZATION TAX COUNSEL.

FORM 990, PART VI, SECTION B, LINE 12C:

FARM AID'S CONFLICT OF INTEREST POLICY APPLIES TO ALL BOARD MEMBERS AND OFFICERS. IT IS MONITORED BY THE ORGANIZATION'S OPERATIONS DIRECTOR.

FORM 990, PART VI, SECTION B, LINE 15:

FARM AID METHODICALLY ASSESSES AND MAKES DECISIONS ON SALARY LEVELS BASED ON INDEPENDENT MARKET RATE COMPENSATION SURVEYS PRODUCED BY ITS PAYROLL PROVIDER, A NATIONAL LEADER IN PAYROLL MANAGEMENT. SALARIES ARE DETERMINED USING THE COMPENSATION ANALYSES, AND BASED ON THE 50TH PERCENTILE OF MARKET RATE FOR EACH POSITION GIVEN FARM AID'S GEOGRAPHIC LOCATION AND LINE OF WORK. ADDITIONALLY, FARM AID UTILIZES BUREAU OF LABOR STATISTICS DATA FOR ANNUAL COST OF LIVING SALARY INCREASES, TO BE WAIVED IN THE EVENT OF SEVERE ORGANIZATIONAL FINANCIAL DIFFICULTY, OR IN THE EVENT OF A RECENT MARKET RATE ADJUSTMENT. EXPANSION OF JOB DESCRIPTION IS THE DETERMINING FACTOR IN MAKING OTHER SALARY INCREASES. THE EXECUTIVE DIRECTOR MAKES ALL FINAL SALARY DETERMINATIONS, EXCEPT IN THE CASE OF THE EXECUTIVE DIRECTOR'S SALARY, IN WHICH CASE, IT IS DETERMINED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AZ, AR, CA, CT, FL, GA, HI, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH

OK, OR, PA, RI, SC, UT, WV, WA, WI

FORM 990, PART VI, SECTION C, LINE 19:

GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE MADE AVAILABLE UPON
REQUEST. FINANCIAL STATEMENTS ARE AVAILABLE ON OUR WEBSITE, AND ARE ALSO
MADE AVAILABLE UPON REQUEST.

Name of the organization  FARM AID, INC	Employer identification number 36-3383233
FORM 990, PART IX, LINE 11G, OTHER FEES:	
OTHER CONTRACTED SERVICES:	
PROGRAM SERVICE EXPENSES	51,022.
MANAGEMENT AND GENERAL EXPENSES	8,618
FUNDRAISING EXPENSES	3,150
TOTAL EXPENSES	62,790.
MARKETING, PUBLIC RELATIONS & MEDIA:	
PROGRAM SERVICE EXPENSES	163,389
MANAGEMENT AND GENERAL EXPENSES	0 .
FUNDRAISING EXPENSES	3,609
TOTAL EXPENSES	166,998
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	229,788
FORM 990, PART VIII, LINE 1F	
THIS AMOUNT ALSO INCLUDES \$160,504 OF SPONSORSHIP INCOME	RECEIVED FOR
THE CONCERT AND BENEFIT EVENTS IN 2015.	