

**Return of Organization Exempt From Income Tax**

**2005**

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

The organization may have to use a copy of this return to satisfy state reporting requirements.

**A** For the 2005 calendar year, or tax year beginning **APR 1, 2005** and ending **MAR 31, 2006**

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return  
 Amended return  
 Application pending

**C** Name of organization  
**BIO-DYNAMIC FARMING AND GARDENING ASSOC., INC.**

**D** Employer identification number  
**14-1377504**

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
**25844 BUTLER ROAD**

City or town, state or country, and ZIP + 4  
**JUNCTION CITY, OR 97448**

**E** Telephone number  
**(541) 998-0105**

**F** Accounting method:  Cash  Accrual  
 Other (specify) **▶**

\* Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**H** and **I** are not applicable to section 527 organizations.

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates **▶ N/A**

**H(c)** Are all affiliates included? **N/A**  Yes  No (If "No," attach a list.)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number **▶ N/A**

**M** Check  if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

**G** Website: **▶ WWW.BIODYNAMICS.COM**

**J** Organization type (check only one)  501(c) ( 3 ) (insert no.)  4947(a)(1) or  527

**K** Check here  if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **▶ 353,485.**

**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances**

<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, and similar amounts received:				
	<b>a</b> Direct public support	1a	120,609.		
	<b>b</b> Indirect public support	1b			
	<b>c</b> Government contributions (grants)	1c			
	<b>d</b> Total (add lines 1a through 1c) (cash \$ <b>117,892.</b> noncash \$ <b>2,717.</b> )	1d		120,609.	
	<b>2</b> Program service revenue including government fees and contracts (from Part VII, line 93)	2		34,963.	
	<b>3</b> Membership dues and assessments	3		42,062.	
	<b>4</b> Interest on savings and temporary cash investments	4		4,013.	
	<b>5</b> Dividends and interest from securities	5			
	<b>6 a</b> Gross rents	6a			
	<b>b</b> Less: rental expenses	6b			
	<b>c</b> Net rental income or (loss) (subtract line 6b from line 6a)	6c			
<b>7</b> Other investment income (describe <b>▶</b> )	7				
<b>8 a</b> Gross amount from sales of assets other than inventory	(A) Securities	8a			
	(B) Other	8b			
	Less: cost or other basis and sales expenses	8c			
	<b>d</b> Net gain or (loss) (combine line 8c, columns (A) and (B))	8d			
<b>9</b> Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>	<b>a</b> Gross revenue (not including \$ of contributions reported on line 1a)	9a			
	<b>b</b> Less: direct expenses other than fundraising expenses	9b			
	<b>c</b> Net income or (loss) from special events (subtract line 9b from line 9a)	9c			
<b>10 a</b> Gross sales of inventory, less returns and allowances	10a	147,132.			
	<b>b</b> Less: cost of goods sold <b>STATEMENT 2</b>	10b	116,161.		
	<b>c</b> Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a) <b>STMT 1</b>	10c		30,971.	
<b>11</b> Other revenue (from Part VII, line 103)	11		4,706.		
<b>12</b> Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12		237,324.		
<b>Expenses</b>	<b>13</b> Program services (from line 44, column (B))	13		179,986.	
	<b>14</b> Management and general (from line 44, column (C))	14		123,958.	
	<b>15</b> Fundraising (from line 44, column (D))	15		4,781.	
	<b>16</b> Payments to affiliates (attach schedule)	16			
	<b>17</b> Total expenses (add lines 16 and 44, column (A))	17		308,725.	
<b>Net Assets</b>	<b>18</b> Excess or (deficit) for the year (subtract line 17 from line 12)	18		-71,401.	
	<b>19</b> Net assets or fund balances at beginning of year (from line 73, column (A))	19		1,043,701.	
	<b>20</b> Other changes in net assets or fund balances (attach explanation)	20		0.	
	<b>21</b> Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21		972,300.	

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ASSOC., INC.

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**Part II** Statement of  
Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) ... (cash \$ 0, noncash \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25 Compensation of officers, directors, etc. **	46,000.	23,000.	23,000.	0.
26 Other salaries and wages	38,000.	19,000.	19,000.	
27 Pension plan contributions				
28 Other employee benefits				
29 Payroll taxes	9,760.	4,880.	4,880.	
30 Professional fundraising fees				
31 Accounting fees	4,908.		4,908.	
32 Legal fees	270.	270.		
33 Supplies	7,378.		7,378.	
34 Telephone	7,785.	5,839.	1,946.	
35 Postage and shipping	5,103.	4,593.	510.	
36 Occupancy	6,937.	3,468.	3,469.	
37 Equipment rental and maintenance	5,517.	5,517.		
38 Printing and publications	42,751.	42,751.		
39 Travel				
40 Conferences, conventions, and meetings	54,866.	29,578.	25,288.	
41 Interest				
42 Depreciation, depletion, etc. (attach schedule)	23,006.	23,006.		
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 3	56,444.	18,084.	33,579.	4,781.
44 Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	308,725.	179,986.	123,958.	4,781.

Joint Costs. Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No

If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A ; (ii) the amount allocated to Program services \$ N/A ;

(iii) the amount allocated to Management and general \$ N/A ; and (iv) the amount allocated to Fundraising \$ N/A

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\*\* SEE STATEMENT 4

**Part III** Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶ <b>TO PROMOTE BIO-DYNAMIC FARMING AND GARDENING METHODS.</b>	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
<b>a EDUCATION AND RESEARCH - TO SPREAD THE KNOWLEDGE OF BIO-DYNAMIC METHODS THROUGH LECTURES AND CONFERENCES AND TO ESTABLISH RESEARCH AND INFORMATION CENTERS.</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	<b>107,657.</b>
<b>b MAGAZINE PRINTING, EDITING, PRODUCTION AND DISTRIBUTION OF BIO-DYNAMIC JOURNALS AND PROMOTIONAL ITEMS CONTAINING CURRENT ARTICLES AND DISCOVERIES IN THE BIO-DYNAMIC METHODS.</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	<b>42,751.</b>
<b>c EXTENSION SERVICE - CONSULTATIONS WITH FARMERS TO EDUCATE AND PROMOTE THE BIO-DYNAMIC METHOD OF AGRICULTURE, HORTICULTURE, AND FORESTRY.</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	<b>29,578.</b>
<b>d</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>e Other program services (attach schedule)</b> (Grants and allocations \$ ) If this amount includes foreign grants, check here ▶ <input type="checkbox"/>	
<b>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</b> ▶	<b>179,986.</b>

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ASSOC., INC.

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**Part IV Balance Sheets** (See the instructions.)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	45	Cash - non-interest-bearing	18,634.	45	17,052.
	46	Savings and temporary cash investments	23,856.	46	24,096.
	47 a	Accounts receivable	22,420.	47a	
	b	Less: allowance for doubtful accounts	3,500.	47b	
			19,506.	47c	18,920.
	48 a	Pledges receivable		48a	
	b	Less: allowance for doubtful accounts		48b	
				48c	
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees		50	
	61 a	Other notes and loans receivable	123,121.	61a	
	b	Less: allowance for doubtful accounts		61b	
			158,693.	61c	123,121.
	52	Inventories for sale or use	124,824.	52	120,301.
53	Prepaid expenses and deferred charges	5,683.	53	2,033.	
54	Investments - securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54		
55 a	Investments - land, buildings, and equipment: basis		55a		
b	Less: accumulated depreciation		55b		
			55c		
56	Investments - other		56		
57 a	Land, buildings, and equipment: basis	802,801.	57a		
b	Less: accumulated depreciation	115,987.	57b		
		708,864.	57c	686,814.	
58	Other assets (describe )		58		
59	<b>Total assets (must equal line 74). Add lines 45 through 58</b>	<b>1,060,060.</b>	<b>59</b>	<b>992,337.</b>	
<b>Liabilities</b>	60	Accounts payable and accrued expenses	16,359.	60	20,037.
	61	Grants payable		61	
	62	Deferred revenue		62	
	63	Loans from officers, directors, trustees, and key employees		63	
	64 a	Tax-exempt bond liabilities		64a	
	b	Mortgages and other notes payable		64b	
	65	Other liabilities (describe )		65	
66	<b>Total liabilities. Add lines 60 through 65</b>	<b>16,359.</b>	<b>66</b>	<b>20,037.</b>	
<b>Net Assets or Fund Balances</b>	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67	Unrestricted	1,030,720.	67	959,299.
	68	Temporarily restricted	12,981.	68	13,001.
	69	Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
73	<b>Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)</b>	<b>1,043,701.</b>	<b>73</b>	<b>972,300.</b>	
74	<b>Total liabilities and net assets/fund balances. Add lines 66 and 73</b>	<b>1,060,060.</b>	<b>74</b>	<b>992,337.</b>	

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Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b N/A		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	N/A		
85	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		
	N/A		
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
	N/A		
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
	N/A	85g	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
	N/A	85h	
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 0.; section 4912 0.; section 4955 0.		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
90 a	List the states with which a copy of this return is filed NY, OR		
b	Number of employees employed in the pay period that includes March 12, 2005	90b	3
91 a	The books are in care of CHARLES BEEDY Telephone no. 541-998-0105 Located at 25844 BUTLER ROAD, JUNCTION CITY, OR ZIP + 4 97448		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country N/A	91b	X
c	At any time during the calendar year, did the organization maintain an office outside of the United States? If "Yes," enter the name of the foreign country N/A	91c	X
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Form 990 (2005)

**Part VII Analysis of Income-Producing Activities** (See the instructions.)

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
<b>Note:</b> Enter gross amounts unless otherwise indicated.					
93 Program service revenue:					
a <b>CONFERENCES &amp; LECTURES</b>					34,618.
b <b>FOOD CYCLER BAGS</b>					345.
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					42,062.
95 Interest on savings and temporary cash investments			14	4,013.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					30,971.
103 Other revenue:					
a <b>MISCELLANEOUS</b>					4,706.
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0.		4,013.	112,702.
105 Total (add line 104, columns (B), (D), and (E))					116,715.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	SEE STATEMENT 8

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

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.

Please Sign Here: Signature of officer: \_\_\_\_\_ Date: \_\_\_\_\_ Type or print name and title: \_\_\_\_\_

Paid Preparer's Use Only: Preparer's signature: *MT L...* Date: 10-4-06 Check if self-employed:  Preparer's SSN or PTIN: \_\_\_\_\_

Firm's name (or yours if self-employed), address, and ZIP + 4: MAILLIE FALCONIERO & COMPANY, LLP  
PO BOX 680  
OAKS, PA 19456-0680

EIN: \_\_\_\_\_ Phone no.: (610) 935-1420

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or 4947(a)(1) Nonexempt Charitable Trust

**2005**

**Supplementary Information-(See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Department of the Treasury  
Internal Revenue Service

Name of the organization **BIO-DYNAMIC FARMING AND GARDENING  
ASSOC., INC.** Employer identification number  
**14 1377504**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 ▶	0			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶	0	

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶	0	

**Part III Statements About Activities** (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE PART V-A, FORM 990	X	
e Transfer of any part of its income or assets?		X
3 a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.) SEE STATEMENT 9	X	
b Do you have a section 403(b) annuity plan for your employees?		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4 a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b  A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) sections 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: ▶  Type 1  Type 2  Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

14  An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

BIO-DYNAMIC FARMING AND GARDENING

**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	148,656.	136,655.	152,596.	173,705.	611,612.
16 Membership fees received	38,897.	41,182.	40,617.	47,718.	168,414.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	171,832.	147,897.	159,184.	156,071.	634,984.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	2,366.	2,016.	4,371.	26,639.	35,392.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	361,751.	327,750.	356,768.	404,133.	1,450,402.
24 Line 23 minus line 17	189,919.	179,853.	197,584.	248,062.	815,418.
25 Enter 1% of line 23	3,618.	3,278.	3,568.	4,041.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b N/A
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c N/A
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2004) 121,300. (2003) 118,398. (2002) 129,500. (2001) 159,985.					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2004) 0. (2003) 0. (2002) 0. (2001) 0.					
c Add: Amounts from column (e) for lines: 15 611,612. 16 168,414. 17 634,984. 20 _____ 21 _____					27c 1,415,010.
d Add: Line 27a total 529,183. and line 27b total 0.					27d 529,183.
e Public support (line 27c total minus line 27d total)					27e 885,827.
f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)					27f 1,450,402.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 61.0746%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 2.4402%

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See page 7 of the instructions.)

N/A

(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? .....		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? .....		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? .....		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)		
	.....		
	.....		
	.....		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff? .....		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? .....		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? .....		
d	Copies of all material used by the organization or on its behalf to solicit contributions? .....		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
	.....		
	.....		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges? .....		
b	Admissions policies? .....		
c	Employment of faculty or administrative staff? .....		
d	Scholarships or other financial assistance? .....		
e	Educational policies? .....		
f	Use of facilities? .....		
g	Athletic programs? .....		
h	Other extracurricular activities? .....		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
	.....		
	.....		
34 a	Does the organization receive any financial aid or assistance from a governmental agency? .....		
b	Has the organization's right to such aid ever been revoked or suspended? .....		
	If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation .....		

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)

N/A

(To be completed ONLY by an eligible organization that filed Form 5768)

Check  **a** if the organization belongs to an affiliated group. Check  **b** if you checked "a" and "limited control" provisions apply.

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
	N/A	
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....	<b>36</b>	
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....	<b>37</b>	
<b>38</b> Total lobbying expenditures (add lines 36 and 37) .....	<b>38</b>	
<b>39</b> Other exempt purpose expenditures .....	<b>39</b>	
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) .....	<b>40</b>	
<b>41</b> Lobbying nontaxable amount. Enter the amount from the following table -		
<b>If the amount on line 40 is -</b> <b>The lobbying nontaxable amount is -</b>		
Not over \$500,000 .....	20% of the amount on line 40 .....	} <b>41</b>
Over \$500,000 but not over \$1,000,000 .....	\$100,000 plus 15% of the excess over \$500,000 .....	
Over \$1,000,000 but not over \$1,500,000 .....	\$175,000 plus 10% of the excess over \$1,000,000 .....	
Over \$1,500,000 but not over \$17,000,000 .....	\$225,000 plus 5% of the excess over \$1,500,000 .....	
Over \$17,000,000 .....	\$1,000,000 .....	
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41) .....	<b>42</b>	
<b>43</b> Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 .....	<b>43</b>	
<b>44</b> Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 .....	<b>44</b>	

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720.

**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 instructions for lines 45 through 50 on page 11 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>45</b> Lobbying nontaxable amount .....					0.
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) .....					0.
<b>47</b> Total lobbying expenditures .....					0.
<b>48</b> Grassroots nontaxable amount .....					0.
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) .....					0.
<b>50</b> Grassroots lobbying expenditures .....					0.

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
<b>a</b> Volunteers .....			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines e through h.) .....			
<b>c</b> Media advertisements .....			
<b>d</b> Mailings to members, legislators, or the public .....			
<b>e</b> Publications, or published or broadcast statements .....			
<b>f</b> Grants to other organizations for lobbying purposes .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means .....			
<b>i</b> Total lobbying expenditures (Add lines c through h.) .....			0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash

(ii) Other assets

b Other transactions:

(i) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

Table with 3 columns: Question, Yes, No. Rows include 51a(i), 51a(ii), 51b(i), 51b(ii), 51b(iii), 51b(iv), 51b(v), 51b(vi), and 51c. All 'No' boxes are checked (X).

N/A

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. The table is currently empty.

52 Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No (X) No

b If "Yes," complete the following schedule: N/A

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. The table is currently empty.

2005 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 2

990

Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Amount Of Depreciation
	PROGRAM SERVICES											
6	EQUIPMENT	VARIABLES		5.00	16	18,356.			18,356.	16,985.		791.
7	BUILDING	122701SL		40.00	16	650,000.			650,000.	52,975.		16,250.
8	LAND	122701L				100,000.			100,000.	0.		0.
9	COPIER/FAX MACHINE	051202SL		5.00	16	550.			550.	321.		110.
10	FURNITURE	110102SL		7.00	16	1,737.			1,737.	599.		248.
11	MOWER	033103SL		5.00	16	799.			799.	320.		160.
12	TURTLE TREE EQUIP	093002SL		3.00	16	24,699.			24,699.	20,583.		4,116.
13	DELL COMPUTER	020904SL		5.00	16	2,045.			2,045.	467.		409.
14	DELL COMPUTER	091804SL		5.00	16	1,702.			1,702.	340.		340.
17	CAMERA	010705SL		5.00	16	727.			727.	145.		145.
18	CAMERA	122104SL		5.00	16	1,230.			1,230.	246.		246.
29	DELL COMPUTER (BOARD SEC.)	VARIABLES		5.00	16	842.			842.	168.		168.
30	DELL PRINTER	VARIABLES		5.00	16	114.			114.	23.		23.
	* 990 PAGE 2 TOTAL					802,801.		0.	802,801.	92,981.	0.	23,006.
	PROGRAM SERVICES											
	* GRAND TOTAL 990 PAGE 2 DEPR					802,801.		0.	802,801.	92,981.	0.	23,006.

FORM 990

INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 1

INCOME

1. GROSS RECEIPTS . . . . .	147,132	
2. RETURNS AND ALLOWANCES . . . . .		
3. LINE 1 LESS LINE 2 . . . . .		147,132
4. COST OF GOODS SOLD (LINE 13) . . . . .	116,161	
5. GROSS PROFIT (LINE 3 LESS LINE 4) . . . . .		30,971

COST OF GOODS SOLD

6. INVENTORY AT BEGINNING OF YEAR . . . . .	124,824	
7. MERCHANDISE PURCHASED . . . . .		
8. COST OF LABOR . . . . .		
9. MATERIALS AND SUPPLIES . . . . .		
10. OTHER COSTS . . . . .	111,638	
11. ADD LINES 6 THROUGH 10 . . . . .		236,462
12. INVENTORY AT END OF YEAR . . . . .	120,301	
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12) . . . . .		116,161

FORM 990	COST OF GOODS SOLD - OTHER COSTS	STATEMENT	2
DESCRIPTION		AMOUNT	
BIO-DYNAMIC LITERATURE		44,023.	
BOOK PURCHASES, PRODUCTION, AND ROYALTIES		67,615.	
TOTAL INCLUDED ON FORM 990, PART I, LINE 10B		111,638.	

FORM 990	OTHER EXPENSES			STATEMENT	3
DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING	
FOOD CYCLER COSTS	359.	359.			
OFFICE	9,862.		9,862.		
DONATIONS	4,300.	4,300.			
INSURANCE	15,923.	7,961.	7,962.		
ADVERTISING & PROMOTION	9,825.	4,913.	4,912.		
OTHER	10,843.		10,843.		
BAD DEBT EXPENSE	551.	551.			
FUNDRAISING	4,781.			4,781.	
TOTAL TO FM 990, LN 43	56,444.	18,084.	33,579.	4,781.	



MOWER	799.	480.	319.
TURTLE TREE EQUIP	24,699.	24,699.	0.
DELL COMPUTER	2,045.	876.	1,169.
DELL COMPUTER	1,702.	680.	1,022.
CAMERA	727.	290.	437.
CAMERA	1,230.	492.	738.
DELL COMPUTER (BOARD SEC.)	842.	168.	674.
DELL PRINTER	114.	23.	91.
<b>TOTAL TO FORM 990, PART IV, LN 57</b>	<b>802,801.</b>	<b>115,987.</b>	<b>686,814.</b>

FORM 990                      PART V-A - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES                      STATEMENT 7

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ERNIE HARVEY 2533 PLEASANTVIEW DRIVE VICTOR, MT 59875	BOARD MEMBER 0.00	0.	0.	0.
CHARLES BEEDY 25844 BUTLER ROAD JUNCTION CITY, OR 97448	EXECUTIVE DIRECTOR 40.00	46,000.	0.	0.
HAROLD HOVEN 3937 BANNISTER ROAD FAIR OAKS, CA 95628	BOARD MEMBER 0.00	0.	0.	0.
ROBERT GRIMES 6685 VREELAND ROAD YPSILANTI, MI 48198	CO-VICE PRESIDENT 0.00	0.	0.	0.
SARAH FLACK 5455 DUFFY HILL ROAD ENOSBURG FALLS, VT 05450	PRESIDENT 0.00	0.	0.	0.
GUNTHER HAUK 18 JOYCE DRIVE CHESTNUT RIDGE, NY 10977	CO-VICE PRESIDENT 0.00	0.	0.	0.
JIM FULLMER 39615 LUCKIAMUTE ROAD PHILOMATH, OR 97370	BOARD MEMBER 0.00	0.	0.	0.
LAVINIA MCKINNEY ELIXIR FARM BRIXEY, MO 65618	SECRETARY 0.00	0.	0.	0.

LAURA RICCARDI PO BOX 133 WOOLWINE, VA 24185	TREASURER 0.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		46,000.	0.	0.

FORM 990 PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES STATEMENT 8

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	MONIES RECEIVED FOR PROVIDING ADVISORY SERVICES REGARDING BIO-DYNAMIC FARMING & GARDENING METHODS.
93B	MONIES RECEIVED FROM THE SALE OF BIO-DEGRADABLE CYCLER BAGS.
94	MEMBERSHIPS SERVE TO INCREASE THE NUMBER OF PEOPLE WHO ARE AWARE OF THE PURPOSE AND WHO WILL HELP TO PROMOTE THE CAUSE OF BIO-DYNAMIC FARMING & GARDENING.
102	SALE OF EDUCATIONAL BOOKS AND LITERATURE TO MEMBERS AND GENERAL PUBLIC TO PROMOTE BIO-DYNAMIC FARMING & GARDENING METHODS.

SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS STATEMENT 9  
PART III, LINE 3A

THE ASSOCIATION GRANTS SCHOLARSHIPS TO INDIVIDUALS AND ORGANIZATIONS IN ORDER TO FURTHER PROMOTE THE BIO-DYNAMIC METHODS OF FARMING & GARDENING. QUALIFICATION FOR SCHOLARSHIPS IS BASED ON THE INDIVIDUALS OR ORGANIZATION'S NEEDS.

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box  ▶
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).  
**Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

**Part I Automatic 3-Month Extension of Time—Only submit original (no copies needed)**

**Form 990-T corporations** requesting an automatic 6-month extension—check this box and complete **Part I** only  ▶

*All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns. Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.*

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers). However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile).

<b>Type or print</b>	Name of Exempt Organization <b>Bio-Dynamic Farming and Gardening Association, Inc.</b>	Employer identification number <b>14-1377504</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>25844 Butler Road</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>Junction City, OK 97448</b>	

Check type of return to be filed (file a separate application for each return):

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

• The books are in the care of ▶ Maillie, Falconiero & Company, LLP

Telephone No. ▶ 610-935-1420 FAX No. ▶ 610-935-1632

- If the organization does **not** have an office or place of business in the United States, check this box  ▶
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the **whole** group, check this box  . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until November 15, 2006, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year 20\_\_ or  
 ▶  tax year beginning April 1, 2005, and ending March 31, 2006.

2 If this tax year is for less than 12 months, check reason:  Initial return  Final return  Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \_\_\_\_\_ \$ \_\_\_\_\_

b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \_\_\_\_\_ \$ \_\_\_\_\_

c **Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. \_\_\_\_\_ \$ None

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 12-2004)

8983-RLC