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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

Inter	nal Reve	nue Service	<u>′ </u>	The organization ma	ay have to	use a copy of t					_	ents.	Inspection	ווכ
A	For the	he 2008 ca	ilendar	year, or tax year l	beginning	Actober	(, ,	2008, and er	nding ,	senten.		30	<u>,20/9</u>	
В	Check If	applicable	Please	C Name of organizat	tion Dela	inare o	Soube	an Bd	<u> </u>		P	imploy 1 k	rer identification	
	Address	s change	use IRS lebel or	Doing Business As								YU.	:44022	<u> </u>
	Name c	change	print or type.	Number and street (or	2/0	nail is not delivered to	o street addr	ess) Roor	n/suite			•	ne number מאס	~~
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				Evans, 98			$\overline{}$	gridgeville	2421				ncluded? WYes	
1		compt status	E M 5	501(c) (5) ◄ (insert i	na.) 4	947(a)(1) or 🔼	527		·		•		list. (see instruction	ans)
<u>J</u>		ite: ▶	_			n				H(c) Group				
K				ration 🔲 Trust 🔲 Ass	ociation 🗵	Other NON V	(O) of	L Year of for	mation:		MS	tate of	legal domicile:	
P	art I	Summ								N	 -			
	1	Briefly de	escribe	the organization	's mission	or most signi	ificant ac	t. :seitiviti	سلو.ه	pol. Di	PAG	cts.	relating	. 15 .
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Activities & Governance	1			if the organization					than 25	% of its a	ssets.		a	
4				ng members of th	_						H	3	9	
ş	1		•	pendent voting m		-	ng body	(Part VI, line	e 1b)		· -	4		
ξ	1			employees (Part	-	•					F	5		
₹				volunteers (estin							H	6		
				elated business re							- H	7a 7b		
_	┝	Net unre	o Deris	usiness taxable ir	ICOMB ITO	m Form 990-	i, line 34	· · · ·		Prior Ye		/B	Current Ye	
	١.	^			41.				-		387	, -	\$177.48	
9				nd grants (Part VI	-				<u> </u> '	405,	201	+	<u> </u>	21
Pevenue		_		revenue (Part VI		•			-	12,2	22	+	\$917	
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				Add lines 13-17				line 25)	1		03	$\neg \dagger$	\$267 517	}
				penses. Subtract li				, 1110 20).	-	\$19.3	26		- 499.64	<u> </u>
b 8							·		E	Seginning (of Yea		End of Yes	
#		Total ass	ets (Pa	rt X, line 16)					- 5	176 5	73		\$191.624	
₹ <u>₽</u>				Part X, line 26)			• • •		1	39:5	15		\$ 17.554	Ŧ
15	22	Net asse	s or fu	nd balances. Sub	otract line	21 from line	20		6	147.05	58		\$174.076	5
Pa	irt II	Sign	ature I	Block										
				perjury, I declare that										
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		Туре	or print	name and title					.					
		Preparer's					T	Date	Check self-	H _			lentifying number	
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		address,	and ZIP +							Phone n	<u>a. ► (</u>)	
Ma	y the	IRS discu	ss this	return with the p	reparer s	hown above?	(see inst	tructions)	<u> </u>	<u> </u>	<u> </u>		Yes	No
For	Privac	cy Act and	Papen	work Reduction A	ct Notice,	see the separa	ate instru	ctions.	(Cat. No. 11	282Y		Form 99 ((2008)

P	age.	2
•	aña	

Pai	Statement of Program Service Accomplishments (see instructions)
1	Briefly describe the organization's mission:
	To affect assessments and describe the money collected to fund singests
	related to international marketing, promotion of southeauthand mend unon, education and soglicon social to cut production data of Jarmers
	education and Soulison research to Cut production about of James "
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization case conducting or make significant changes in how it conducts, any program
•	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
_	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ 136-684 including grants of \$) (Revenue \$)
	United Soybean Board - Ya collections by law must go to USB -5/115, 792
	<u> </u>
	In State Research - \$20,892
	The Market Market and Assessment and

4h	(Code:) (Expenses \$ 104,641 including grants of \$) (Revenue \$)
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	Provotion of soybeans at various Joers + meetings
	The state of the s
	Education on dayleans and their manyuses.
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	Communication - news releason, aurual Report
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40	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
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	•••••••••••••••••••••••••••••••••••••••
4d	Other program services. (Describe in Schedule O.)
4-	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ \$ よれ、33 √ (Must equal Part IX, Line 25, column (B).)
40	TOTAL PLANTALL SOLVED TABLETISES FOR A.T.L.TA.'\ (IVIUSE BUUBI FB/T IA. LING 23. CUIUII/I (D).)

Pa	T IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	N	A
2	Is the organization required to complete Schedule B, Schedule of Contributors?,	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		/
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	N/	4
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	N	4
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		/
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		V
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1/
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		V
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, IX, or X as applicable	11	V	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	<u> </u>	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		V
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		<u> </u>
b	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		V
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		<u>/</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16 17		
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		5
18 19	Did the organization report more than \$15,000 total on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		7
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and II	21	V	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 27 if "Yes," complete Schedule I, Parts I and III	22		<u></u>
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		V
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 questions			~
_	24b-24d and complete Schedule K. If "No," go to question 25	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
	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 24d		V
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	N/z	4
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified		NA	}
26	person from a prior year? If "Yes," complete Schedule L, Part I	25b	•=1	~
27	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	26 27		/

Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		V
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		1
C	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		0
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u></u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		/
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		V
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		1
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		/
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		V
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		V
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	N	A
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		\

Form **990** (2008)

Pa	Statements Regarding Other INS Filings and Tax Compliance			
		- 18-A-1	Yes	No.
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		P.S.	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	N	4
	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			
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	NJF	10000
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			7.
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	પુર (૧)	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	_	_
4a	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)?	/ 4a		V
b	If "Yes," enter the name of the foreign country: ▶		14.00	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	. <u>5a</u>		1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			~
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		_
6a	Did the organization solicit any contributions that were not tax deductible?	<u>6a</u>	ļ	V
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		Aber Vice
7	Organizations that may receive deductible contributions under section 170(c).		1. (a)	
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		V
þ	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		/
d	If "Yes," indicate the number of Forms 8282 filed during the year	2.00		
0	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	and any and the first between the property of	7f		~
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	Ν/	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	N	4
В	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	(2) #(2)		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	1	1	型性
a	Did the organization make any taxable distributions under section 4966?	9a		
þ		9b	¥ 9 9	, 41 99 ₇ 1
0	Section 501(c)(7) organizations. Enter:			100
a	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		影響	随野
1	Section 501(c)(12) organizations. Enter:	LANGE TO SERVICE		
a				1
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	Av =2005	LANGUET 1
0	if "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b	學家公司	4 3 8 69	:

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

360	CON A. Governing body and management			
		7 1966	Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the			
	cimumstances, processes, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
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		<u>~</u>
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		
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		/
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		V
6	Does the organization have members or stockholders?	6		
7a				
	of the governing body?	7a		
h	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	Sec.	変	· · · · · · · · · · · · · · · · · · ·
-	the year by the following:			
а	The governing body?	8a	/	
b	Each committee with authority to act on behalf of the governing body?	8b	\	
9a	and the second s	9a		V
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
_	affiliates, and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations			
10	must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	~	
11	is there any officer, director or 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	11	_	
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12ь		
_				
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	V	
13	Does the organization have a written whistleblower policy?	13		
14	· · ·	14		V
15	Did the process for determining compensation of the following persons include a review and approval by	Mary .		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
a	The organization's CEO, Executive Director, or top management official?	15a		
	Other officers or key employees of the organization?	15b	N	
_	Describe the process in Schedule O. (see instructions)			A STATE OF THE STA
1 6 2	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		金融	
	with a taxable entity during the year?	16a		
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	1000	A.G	£3.4
-	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		1	1
	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 ▶ N/A			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	1(3)s	onlvi	
-	available for public inspection. Indicate how you make these available. Check all that apply.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	Own website Another's website W Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	nf into	mont	
	policy, and financial statements available to the public.	or inte	# 5 51	
20		nde et	tha	
	State the name, physical address, and telephone number of the person who possesses the books and reco organization: >	71/V	-74	12-450
		-J-LW	4.1	×:,

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

☐ Check this box if the organization did not co	mpensate	any o	offic	er,	dire	ctor,	trus	tee, or ke	y em	ployee.			
W	(B)				C)			(D)		(E)		(F)	
Name and Title	Average		on (check	k all	that ap	ply)				Reportable Estimated		
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensati from the organizatio (W-2/1099-N	on n	from rel organiza (W-2/1099	ated tions	other compensation from the organization organization organization	ition le tion ted
Matthew Weber-Chairman									1				
Mark Wilson - Treasurer													
Robert Baker - Director											1		
Dennie Clay - Director							-			`			
Jessey Wheatley - Director									8	Tion	P		
Kevin Evans - Director	_							CNS	P			-	Γ
Travis Hastings-Director						,,	T T	eno					
Jesse Vanderwende-Director					7	R		1					
Roland Hill-Director				ν	7	1					·		
			M	א									
		4	7										
													-
									1				
													

Pa	It VII Section A. Officers, Directors, Tru	stees, Key	Emp	loy	668	, an	d Higi	hest	Compensated	Employe	98 (CO	ntinued)	
	W	(B)	1		•	C)			(D)	(E)		(F	
	Name and title	Average hours per week	Individual trustee	netitutional trustee	Officer	all Key employee	Highest compensated a employee	출 Former	Reportable compensation from the organization (W-2/1099-MISC)	Reports compensa from rela organizat (W-2/1099-	ation ated tions	Estim amou oth comper from organia and re organia	ent of ner nsation the zation elated
		-											
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						_				<u>.</u> .		<u> </u>	
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				_		_							
						_				······································			
						_							
									/				
<u>1b</u>	<u> Total</u>	<u> </u>	<u> </u>						\$11,382	0			
2	Total number of individuals (including those organization ▶	e in 1a) wh	o rec	eive	ed n	nore	than	\$10	00,000 in repo	rtable con	npens	ation fro	
3	Did the organization list any former office employee on line 1a? If "Yes," complete So							•	o, or highest c	ompensat	be	3 3	
4	For any individual listed on line 1a, is the s the organization and related organizations of individual.											4	
5	Did any person listed on line 1a receive eservices rendered to the organization? If ")	or accrue	comp	ens Sch	satio edu	on t	rom a	iny uch	unrelated organization	anization 1	for	<u> </u>	
Se	ction B. Independent Contractors								•				
1	Complete this table for your five highest compensation from the organization.	mpensate	d inde	pe	nde	nt c	ontra	ctor	s that received	more the	an \$10	0,000 of	:
	(A) Name and business add	ress							(B) Description of se	rvices	,	(C) Compensat	ion
		NH	A										
2	Total number of independent contractors (including t	hose	in 1) w	ho	receiv	ed i	more than \$10	0,000 in	300 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3 m 3	10000000000000000000000000000000000000	
	compensation from the organization ▶										The state	4的一名,克莱	的规则

Part	VII	Statement of Re	venue		····		- (8)	(7)
			A STATE OF THE STA	The second of the second of	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b	Federated campaigns Membership dues Fundraising events	1a 1b 1c					
Contributions, gifts, grants and other similar amounts		Related organizations Government grants (contri All other contributions, gifts, g		£100 (101				
Contribu	g h	and similar amounts not inclu Noncash contributions include	ded above 1f	#177.431 •	B [77.42]			
e Revenue	2a b			Business Code	F. P. S.	AB CAMPANIA	""一个一个	
Program Service Revenue	d d e	All other program servi						
Ę.	3	Total. Add lines 2a-2f Investment income (inc	luding dividend		\$917	· · · · · · · · · · · · · · · · · · ·		A STATE OF THE STA
	4 5	other similar amounts) Income from investment of Royalties	of tax-exempt bon		38 0 15 FA S	The state of the s		· · · · · · · · · · · · · · · · · · ·
		Less: rental expenses Rental income or (loss)		(ii) Personal				
	ļ	Net rental income or (to Gross amount from sales of assets other than inventory	(i) Securities	(li) Other				
	c	Less: cost or other basis and sales expenses . Gain or (loss)						
Revenue	8a	Gross income from events (not including \$ of contributions reported to the state of	d on line 1c).	•				
Other	c p	Less: direct expenses Net income or (loss) fro	a b om fundraising e	events ▶	e se care de la care y la come	To the first in the state of th	The second secon	
	Ь	Gross income from gam See Part IV, line 19 Less: direct expenses.	a					
	10a b	Net income or (loss) from Gross sales of inverteums and allowances Less: cost of goods so Net income or (loss) from	entory, less a			Sheet is not suit share?		
	11a	Miscellaneous Revi		Business Code				TO SERVICE MANAGEMENT OF THE PROPERTY OF THE P
	b d	All other revenue Total. Add lines 11a-1						
	12	Total Revenue. Add lines 118-1 Total Revenue. Add lines, 10c, and 11e	nes 1h, 2g, 3, 4	• • •	6178,738		and the set of Art (M)	100 April 25 - 27 13 (3 (2)) 17 18 19

Statement of Functional Expenses

from a combined educational campaign and

fundraising solicitation

Part IX Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D). (A) Total expenses (B) Program service Do not include amounts reported on lines 6b, Fundraising Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses #136,684 Grants and other assistance to governments and £ 136,684 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 . . Benefits paid to or for members . . . Compensation of current officers, directors, trustees, and key employees 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 Pension plan contributions (Include section 401(k) and section 403(b) employer contributions), Other employee benefits Payroli taxes 10 Fees for services (non-employees): **b** Legal 811 RE c Accounting . . . d Lobbying The State of Professional fundraising services, See Part IV, line 17 f Investment management fees 12 Advertising and promotion \$ 383 6383 13 Office expenses 14 Information technology 15 Royalties 16 \$ L37 \$637 17 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 20 Payments to affiliates 21 22 Depreciation, depletion, and amortization. Insurance Other expenses. Itemize expenses not 24 covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) Educ, Prama + Communication 5104.64 Management Contracts \$ 15.673 \$15 623 Insurance + Bonding # 800 4 80V Miscellaneous 9582 o 582 f All other expenses Total functional expenses. Add lines 1 through 24f 5267,518 \$241.325 Joint Costs. Check here ► ☐ if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs

1 Cash—non-interest-bearing	1 2 3 4	(B) End of year & (GO, 172
	2	₩ 190,172
_	3	'
3 Pledges and grants receivable, net	4	
4 Accounts receivable, net		511452
5 Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L	5]
6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete	6	
Part II of Schedule L	7	
7 Notes and loans receivable, net	8	
7 Notes and loans receivable, net	9	
9 Prepaid expenses and deferred charges	- Chieft 1	Parational Land State
10a Land, buildings, and equipment: cost basis 10a	於護	
b Less: accumulated depreciation. Complete	- ×.	
Tall troi Scredule B	10c	
11 Investments—publicly traded securities	11	}
12 Investments—other securities. See Part IV, line 11	12	
13 Investments—program-related. See Part IV, line 11	13	ļ
14 Intangible assets	14	
15 Other assets. See Part IV, line 11	15	\$191624
To your debots / to most i most i made odds mis o y	16	\$191624 \$13.33b
17 Accounts payable and accrued expenses	17	#15,33b
18 Grants payable	18	# 4 × 13
19 Deferred revenue	19	
20 Tax-exempt bond liabilities	20	
21 Escrow account liability. Complete Part IV of Schedule D	21	W 25 4 2 2 2 4 - 255 3 4 1
21 Escrow account liability. Complete Part IV of Schedule D	22	
23 Secured mortgages and notes payable to unrelated third parties .	23	
24 Unsecured notes and loans payable	24	
25 Other liabilities. Complete Part X of Schedule D	25	
26 Total liabilities. Add lines 17 through 25	26	\$17.554
Organizations that follow SFAS 117, check here and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets Temporarily petricted net assets		
27 Unrestricted net assets	27	
28 Temporarily restricted net assets	28	
29 Permanently restricted net assets	29	
Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 117, check here ▶ □ and complete lines 30 through 34.		
30 Capital stock or trust principal, or current funds	30	
31 Paid-in or capital surplus, or land, building, or equipment fund	31	
32 Retained earnings, endowment, accumulated income, or other funds	32	
33 Total net assets or fund balances	33	6174,020
	34	\$191.624
Part XI Financial Statements and Reporting		
		Yes No
1 Accounting method used to prepare the Form 990: Cash XAccrual Cother		202 - 300
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	7	2a 🗸
b Were the organization's financial statements audited by an independent accountant?	•	2b ,
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversign	aht e	
the audit, review, or compilation of its financial statements and selection of an independent accountant?	_	" 2c 🗸
3a As a result of a federal award, was the organization required to undergo an audit or audits as set if the Single Audit Act and OMB Circular A-133?		
b If "Yes," did the organization undergo the required audit or audits?		3b

SCHEDULE D (Form 990)

Supplemental Financial Statements

20**08**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 8, 7, 8, 9, 10, 11, or 12.

Name	of the organization belowere boy.	bean Board	Employer identification number
Pai	Organizations Maintaining Do	nor Advised Funds or Other Simila	Funds or Accounts. Complete if
	the organization answered "Yes	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Dollar advisas in the	
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year) .		
4	Aggregate value at end of year		·
5	Did the organization inform all donors and funds are the organization's property, subj		
6	Did the organization inform all grantees, dused only for charitable purposes and not	onors, and donor advisors in writing that	grant funds may be
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Com	plete if the organization answered "Yes	" to Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held Preservation of land for public use (e.g. Protection of natural habitat Preservation of open space Complete lines 2a–2d if the organization hel on the last day of the tax year.	., recreation or pleasure)	ion of an historically important land area tion of certified historic structure
			Held at the End of the Year
а	Total number of conservation easements ,		2a
b	Total acreage restricted by conservation e		2b
C	Number of conservation easements on a conservation	ertified historic structure included in (a).	
d	Number of conservation easements includ-	• • •	
3	Number of conservation easements modifithe taxable year ▶	ed, transferred, released, extinguished, or	r terminated by the organization during
4	Number of states where property subject t		
5	Does the organization have a written polic enforcement of the conservation easement	ts it holds?	Yes 🛄 No
6	Staff or volunteer hours devoted to monitor	- · · · · · · · · · · · · · · · · · · ·	- · · · · · · · · · · · · · · · · · · ·
7	Amount of expenses incurred in monitoring		
8	Does each conservation easement reporte 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?		Yes 🗌 No
9	In Part XIV, describe how the organization balance sheet, and include, if applicable, the organization's accounting for conservations.	he text of the footnote to the organization tion easements.	n's financial statements that describes
Par	Organizations Maintaining Colle Complete if the organization answ	ections of Art, Historical Treasures, overed "Yes" to Form 990, Part IV, line 8	or Other Similar Assets.
1a	If the organization elected, as permitted ur art, historical treasures, or other similar asse provide, in Part XIV, the text of the footnot	ets held for public exhibition, education, or	research in furtherance of public service,
b	If the organization elected, as permitted ur historical treasures, or other similar assets provide the following amounts relating to t	held for public exhibition, education, or r hese items:	esearch in furtherance of public service,
	(i) Revenues included in Form 990, Part V		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works following amounts required to be reported	under SFAS 116 relating to these items:	
a b	Revenues included in Form 990, Part VIII, I Assets included in Form 990, Part X		

D	0.00	1
_		

Par	t III Organizations Maintainin	g Collections of Art, H	listorica	Treasure	s, or O	ther Similar	Assets (continued)
3	Using the organization's accession a items (check all that apply):	nd other records, check	any of the	ne following	g that are	e a significant	use of its collection
а	Public exhibition	d		oan or excl			
b	Scholarly research	е		ther			
C	Preservation for future generation	ons					
4	Provide a description of the organiza Part XIV.	tion's collections and ex	plain how	they furth	er the or	ganization's e	xempt purpose in
5	During the year, did the organization so assets to be sold to raise funds rather	than to be maintained as	part of the	e organizatio	on's colle	ection?	Yes No
Pai	Trust, Escrow and Custo Part IV, line 9, or reported				ion ansv	wered "Yes" t	o Form 990,
						other assets r	not Yes No
b	If "Yes," explain the arrangement in	Part XIV and complete th	e followi	ng table:	·	1	Amount
					40		Amount
C	Beginning balance				. 1c		
d	Additions during the year				1d		
0	Distributions during the year				1e		
f					. <u> 1f</u>		
	Did the organization include an amount "Yes," explain the arrangement in	Part XIV.				· · · ·	☐ Yes ☐ No
Pai	t V Endowment Funds. Con						
	_		lor year	(c) Two yea		(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance	الله الله الله الله الله الله الله الله	To the state of th		1, 5, 1 44 1 2, 344 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6" 1- 130 125 NO.	TO THE STATE OF TH
b	Contributions	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			the state of the s	
C	Investment earnings or losses	Signal distriction	100 C	<u> </u>		Control of the second of	
d	Grants or scholarships			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Partie 13		
θ	Other expenditures for facilities and programs			The state of the s			
f	Administrative expenses						
9	End of year balance	• • • • • • • • • • • • • • • • • • • •		14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Shap : 20 1		A CONTRACTOR OF THE PARTY OF TH
2	Provide the estimated percentage of	=	id as:				
a	Board designated or quasi-endowme						
b	Permanent endowment ▶	%					
C	Term endowment ▶%						
3a	Are there endowment funds not in the	possession of the organi	zation the	at are neld a	ana aami	inistered for the	Yes No
	organization by: (i) unrelated organizations						3a(i)
	(ii) related organizations				• •		3a(ii)
ь	If "Yes" to 3a(ii), are the related organ	nizations listed as require	ed on Sci	hedule R?	• •		3b
4	Describe in Part XIV the intended use						<u> </u>
Par	t VI Investments—Land, Buil	dings, and Equipmen	t. See F	orm 990, F	Part X, li	ine 10.	
	Description of investment	(a) Cost or other basis (investment)	(b) Co:	st or other s (other)		epreciation	(d) Book value
1a	Land		1		图1.770		
ь	D. 31-31				**************************************		
C	Leasehold improvements						
ď	Fordered		<u> </u>			-	
8	Other		1				
	I. Add lines 1a-1e. (Column (d) should eq	ual Form 990, Part X, colu	mn (B), lin	e 10(c).)	· · ·	▶	
	() () () () () () () () () ()	, , , , , , , , , , , , , , , , , , , ,	1-7,	177	<u> </u>		

Part VII	Investments—Other Securities	. See Form 990, Part X	, line 12.	
(a) I	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
Financial der	ivatives and other financial products			
	d equity interests			
Other				
			In the control was the spring of the control of the	77 7 Comp. 1 W. 1848
	b) should equal Form 990, Part X, col. (B) line 12.)	4 O F 000 Dort V	English and the second	20 3 Tr. 18 70 78 75
Part VIII	Investments-Program Relate			
(a	a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
				<u> </u>
				
			<u> </u>	
Total (Column (b) should equal Form 990, Part X, col. (B) line 13.)		The state of the s	The state of the s
Part IX	Other Assets. See Form 990, Pa	t X, line 15.		
		(a) Description	(b) Bo	ok value
				
.				
				
	mn (b) should equal Form 990, Part X, col		<u> ▶ </u>	
Part X	Other Liabilities. See Form 990,		The state of the s	100 Y 200 A R
Federal inco	(a) Description of liability	(b) Amount		(2) (2)
rederal inco	ome taxes			
				为 其他
				"观验"。
			and the second s	
				是是完全
			The state of the s	
			And the state of t	
Total Mahana 4	b) should a well from 1990 Post V and 1991 For 1971 by			Service Services
rotal. (Column (i	b) should equal Form 990, Part X, col. (B) line 25.) ▶		The tent of tent of the tent o	- C & C W E 2

In Part XIV, 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.

Pai	t XI Reconciliation of Change in Net Assets from Form 990	to Financial Statemen	ts_	T- (
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	\$178,738
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	\$267,518
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3	8-88 681
4	Net unrealized gains (losses) on investments		4	L
5	Donated services and use of facilities		5	Ĺ
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net). Add lines 4–8		9	
10_	Excess or (deficit) for the year per financial statements. Combine lines	3 and 9	10	\$ - 88,68
Pa	t XII Reconciliation of Revenue per Audited Financial Sta	tements With Revenu	e pe	r Return
1	Total revenue, gains, and other support per audited financial statemen	nts	1	51178,738
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		4, 48	14 th
а	Net unrealized gains on investments	2a		े. हा स
b	Donated services and use of facilities	2b	ري ۾ البر الديو اي	
c	Recoveries of prior year grants	2c		() () () () () () () () () ()
d	Other (Describe in Part XIV)	2d		
•	Add lines 2a through 2d		26	9
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		23,75	<i>y</i> .
a	Investment expenses not included on Form 990, Part VIII, line 7b .	4a		Š7
b	Other (Describe in Part XIV)	4b	100	7,6
C			40	c
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line	e 12.)	5	\$178.738
Pai	t XIII Reconciliation of Expenses per Audited Financial Sta	atements With Expens	ses p	per Return '
1	Total expenses and losses per audited financial statements		1	52E7.518
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			<u> </u>
а	Donated services and use of facilities	2a	\$ 34	्रि ^{क्} र्वे
ь	Prior year adjustments	2b	100	
C	Losses reported on Form 990, Part IX, line 25	2c		A. A.
d	Other (Describe in Part XIV)	2d	ري. مقدة	<u> </u>
8	Add Bass On Money of Od		26	a
3	Subtract line 2e from line 1		3	·
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		Haji	\$2.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
ь	Other (Describe in Part XIV)	4b	28.27	
C	Add lines 4a and 4b		40	اد
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part	t I, line 18.)	5	\$ 262.518
Pai	t XIV Supplemental Information			1
Com	plete this part to provide the descriptions required for Part II, lines 3, 5,	and 9; Part III, lines 1a a	nd 4;	Part IV, lines 1b
	2b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b; and F			
		••••		

	•••••••••••••••••••••••••••••••••••••••	•••••		
··	***************************************			
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Schedule D (For	m 990) 2008	rage C
Part XIV	Supplemental Information (continued)	
************		***************************************

SCHEDULE 1 (Form 990)

Departm Internal F Name o

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

омв No. 1545-0047 20 08	Open to Public
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► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

Department of the Treasury Internal Revenue Service		•	► Attach to Form 990.	Form 890.			Inspection
Name of the organization	Souhean	Boar	P			Employer ident	$\mathcal{A} 0$: \mathcal{V} $\mathcal{A} \wedge \mathcal{A} \mathcal{A} \mathcal{A}$
Part I General Information on Grahts and Assistance	on Grants and A	ssistance					
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	in records to substraward the grants or zation's procedures	antiate the amor assistance?	int of the grants or ass the use of grant funds	sistance, the grantee in the United States.	s' eligibility for the gran	ts or assistance, a	nd 🔀 Yes 🛚 No
a	sistance to Gove e 21, for any recip l-1 (Form 990) if	emments and bient that received additional space	Organizations in the ved more than \$5,00 is is needed	ne United States. (30). Check this box	Organizations in the United States. Complete if the organization answered "Yes" on yed more than \$5,000. Check this box if no one recipient received more than \$5,000. e is needed	ization answered ceived more than	"Yes" on ≀\$5,000. Use
1 (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
United Souhases Bd	43-159337		6115,192				Soubeau Promo, Research Mild den,
			•				
University of Delawate 51-600197	81-6000197		\$ 13,652				Soupean Research
Schillinger Seed/Bartis 42-1496453	43-1496453		81,440				Soubean Research
			-				
2. Enter total number of section 501(c)(3) and government organizations 3. Enter total number of other organizations	1 501(c)(3) and gove	mment organiza	tions				
1 -	luction Act Notice, se	e the Instruction	s for Form 890.		Cat. No. 50055P	3	Schedule I (Form 990) 2008

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	Q Q	dule
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	ant	Use Schedule I-1 (Form 990) if additional
	Grants and Other Assistance to	Š
	Part III	

(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
Part IV Supplemental Information. Complete this	te this part to pr	ovide the informati	on required in Part	part to provide the information required in Part I, line 2, and any other additional information.	additional information.
Useos Grouts					
Research - The Board audits 2 projects on an annual basis. Have research	udits 2	Snajects b	n an one	ual basis.	Have research
audit procedure	in pla	، چې			
	-				

United Laybean Bd - We are required by Jedolah Paw to Dand Gen Ya of our assessments collected for notional heavench, new uses, communications, market development

SCHEDULE Ò (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Inspection

Employer identification number

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2008-2009

New Castle County	Term Expires
Robert Baker P.O Box 162 Odessa, DE 19730 Cell: 302.420.4866 bakerrob@verizon.net	June 2011 1 st Term
Dennis Clay 1034 Middletown-Warwick Rd Middletown, DE 19709 302-598-0665 HDCClay@aol.com	June 2010 1st Term
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Jesse Vanderwende 5067 Scotts Store Rd. Bridgeville, DE 19933 Cell: 302-381-2651 Basebal097@aol.com June 2011 1st Term

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Secretary of Agriculture

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