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Form

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2008 Open to Public

_				0.401.400			sporting roquir		inspection
				0/01/08 , and ending	9/	<u>30/09</u>	1		
	Check if applica	riea IPS	C Name of organization					D Employ	yer identification number
_ ∐ ′	Address change	label or	OHIO	CORN MARKETIN	G PROC	<u>GRAM</u>			
	Name change	print or	Doing Business As					34-	1610319
一百.	nıtıal return	type.	Number and street (or P O box if mail	is not delivered to street address)			Room/suite	E Telepho	one number
片'	INDALIEUTI	See	59 GREIF PARK	WAY			101	740	-201-8088
	Termination	Specific Instruc-	City or town, state or country, ar	nd ZIP + 4				G Gross recei	pts\$ 1,778,199
\Box	Amended return		DELAWARE	OH 43	3015		Ī	<u> </u>	
\equiv		E 11-	e and address of principal officer		7010			H(a) In this o	group return for
\Box	Application pen	ding ' ''	o and address or principal officer						
								affiliates H(b) Are all a	affiliates H., H.,
								included	17 Les 140
				···				If "No,"	attach a list. (see instructions)
	Tax-exempt		501(c) (6) ◀ (insert n	0) 4947(a)(1) or	527				
J	Website:								exemption number
*****	Type of organiz		r of formation 19	<u>89 </u>	M State of legal domicile OH				
_ <u>P</u>	art I	Summa	ry						
	1 Brief	ly describe	the organization's mission or mi	ost significant activities:					
a l	I	NCREASE	PROFITABILITY OF	OHIO CORN PRODUCE	RS				
2									
13				•					
Ve	2 Cho	ak thia hav	state emerication dine.			46 01	·0/ -4	_	
တိ			If the organization disco		osea or m	iore than 23	% of its assets		1.0
රේ			g members of the governing boo					3	16
Activities & Governance			pendent voting members of the	governing body (Part VI, line	1b)			4	0
Š	5 Tota	number of	employees (Part V, line 2a)					5	0
Aci	6 Tota	l number of	volunteers (estimate if necessa	ıry)				6	0
	7a Tota	gross unre	lated business revenue from Pa	art VIII, line 12, column (C)				7a	
	b Net	inrelated bu	isiness taxable income from Fo	rm 990-T, line 34				7b	0
							Prior Yea		Current Year
9	8 Conf	ributions ar	d grants (Part VIII, line 1h)				2,294	,680	1,751,650
Revenue	9 Prog	ram service			· ·				
š.			me (Part VIII, column (A), lines	3. 4. and 7d)			33	,010	26,549
œ			Part VIII, column (A), lines 5, 6d	•					
			add lines 8 through 11 (must eq		12\	 	2,327	690	1,778,199
			ar amounts paid (Part IX, colum		, 12)		580	,000	657,200
			or for members (Part IX) column	300	,000	031,200			
			()	' '		-			
S			ompensation, employee benefit		5–10)	<u> </u>			
penses	16a Profe	essional	draising fees (Part 2X) foluming	♠), line 11e)					
Exp	b Tota	l fundraışlığ	draising feesj(Part 2X) မြား။ကြ jexpenses (Part IX, column	line 25) 🕨 _					
ш	17 Othe	r expenses	(Part IX, column (A), lines 11a-	1d, 11f-24f)			<u>1,599</u>	, 994	1,541,695
	18 Tota	expenses	Add ines 1317 (must equal Pa	art IX, column (A), line 25)			2,179	,994	2,198,895
	19 Reve		penses Subtract line 18 from le					,696	-420,696
5 8					••••		Beginning of		End of Year
Assets or Balances	20 Tota	l assets (Pa	rt X, line 16)	•			1,318	,772	928,651
Ass	21 Tota	l liabilities (I	Part X, line 26)	••	•			,168	108,744
الريخي		•	nd balances Subtract line 21 fro	om line 20			1,240		819,907
[] []			re Block				_,	, 1	
			Ities of perjury, I declare that I have e	examined this return, including acc	Omnaniano i	schedulos or	nd etatements ==	d to the boar	t of my knowledge
TC3		and belief	Lis true, correct, and complete Declar	aration of preparer (other than offi	cer) is based	d on all inform	nation of which bi	eparer has a	any knowledge
e⊗ _Sia	<u>. </u>	× 1	1.14cl 86				·		7/10
∠Sig			may-ax					/_	1110
≸Hei	re	Signati	ire of officer	-1100011	VE	CU7	آ مازار	Date	~75) B
\bigcirc		\mathbf{L}		KMAN t	<u> </u>	<u> </u>	IVE 1	SINE	CIUIC
		▼ Type o	r print name and title						
	.	Preparer's				Date	Check if	-	Preparer's identifying number
≱ Pai	d	signature	LARRY A. MORRIS	SON] -	11/12/	. self-		(see instructions) P00952291
	parer's		KLESHINS		MORRIS			T	► 34-1568021
	e Only	Firm's name	EOO TOXT		TAMO	<u> 1 тт</u>		EIN	► 24-T20005T
	١ .	if self-emplo		NGTON AVE	E O E			Phone	410 756 2011
-		address, an	THINDLIDE		505		<u></u>	no 🕨	419-756-3211
			eturn with the preparer shown a						X Yes No
DAA	For Priva	acy Act and	Paperwork Reduction Act No	tice, see the separate instru	ictions.				Form 990 (2008)

		Service Accomplishments (see i	nstructions)	
	the organization's missi PROFITABILIT	on TY OF OHIO CORN PRODUC	EERS	
the prior Form	990 or 990-EZ?	ificant program services during the year whi	ch were not listed on	Yes X No
3 Did the organiz	be these new services or ation cease conducting,	n Schedule O or make significant changes in how it condu	cts, any program	
	be these changes on Sch			Yes X No
Section 501(c)((3) and 501(c)(4) organiza	ents for each of the organization's three larg ations and section 4947(a)(1) trusts are requ , and revenue, if any, for each program serv	uired to report the amount of grants and	
	PRICE OF CC BY PROVIDIN	1,779,958 including grants of \$ DRN AND PROFITABILITY NG FUNDS FOR CORN UTIL MARKET DEVELOPMENT, A	IZATION	
•				
	•		•	
•				
			·	
4b (Code) (Expenses \$	including grants of \$. (Revenue \$.)
			·	
•			·	
	•			•
	·			
		•		
•				
	•			
4c (Code) (Expenses \$	including grants of \$) (Revenue \$	
· .	,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, (13,5,13,5	
-				
	•			
-			•	
4d Other program	services (Describe in Sc	chedule O.)		
(Expenses \$		including grants of \$) (Revenue \$)
4e Total program	service expenses	\$ 1,779,958 (Must equal P	Part IX, Line 25, column (B))	5 990 (2008)

	A 10 4 6 D	
Part IV	Checklist of Requi	

			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		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	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		<u>X</u>
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		<u>X</u>
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		'	.,
_	complete Schedule D, Part III	8		<u>X</u>
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,"	_		w
40	complete Schedule D, Part IV	9		X
10 11	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,	44		v
12	Parts VI, VII, VIII, IX, or X as applicable	11		<u>X</u>
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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Λ	X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	170		
U	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	170		<u> </u>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Χ
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		_X_
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J .	23		X
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		<u>X</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ļ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	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		<u> </u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			\ _V
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	27		v
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	990	(2008)

Part 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			
а	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		<u>X</u>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		<u>X</u>
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Χ_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	1		
	conservation contributions? If "Yes," complete Schedule M	30		<u>X</u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I .	31		<u>X</u>
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		X
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		X
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	_	<u>X</u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	1		
	Schedule R, Part V, line 2	35		X
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		
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			
	<u>VI</u>	37		X
		Form	990	(2008)

Form **990** (2008)

Form	990 (2008) OHIO CORN MARKETING PROGRAM 34-1610	319		F	Page 5
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			<u>_</u>	
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1 _			
	U.S Information Returns Enter -0- if not applicable	1a 0			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable			
_	gaming (gambling) winnings to prize winners?	r i	1c	ļ	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return.		2b		-
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by			
- Cu	this return?	a by	3а	1	Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	 	$\stackrel{\wedge}{\vdash}$
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority	35		\vdash
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin				
	account)?		4a		Х
b	If "Yes," enter the name of the foreign country:				
	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?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
С	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	ļ	
6a	Did the organization solicit any contributions that were not tax deductible?		<u>6a</u>	_	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or			
7	gifts were not tax deductible?		<u>6b</u>	-	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than			
а	\$75?	tnan	7a	1	Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	•	7b		<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	15	'		
-	required to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	[7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal			
	benefit contract?		7e_		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		Х
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7 <u>g</u>	<u> </u>	X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	C as		ł	
	required?		. 7h	ļ	X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec				
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spor	nsoring			
•	organization, have excess business holdings at any time during the year?		8	 	
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			1	ŀ
a	Did the organization make any taxable distributions under section 4966?		9a		
b 10	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
а	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	100			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b			
11	Section 501(c)(12) organizations. Enter				
· . а	Gross income from members or shareholders	11a			l
	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11Ь			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	L	L
	IS 4Ven Pontantha and A St.	1 1		1	· · · · · · · · · · · · · · · · · · ·

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

Sec	tion A. Governing Body and Management					
	· ·				Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe	the				
	circumstances, processes, or changes in Schedule O See instructions	- 1				
1a	Enter the number of voting members of the governing body	1a	16			1
b	Enter the number of voting members that are independent	1b	0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with		1		
	any other officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the					l
	supervision of officers, directors or trustees, or key employees to a management company or other pe			3	ļ	X
4	Did the organization make any significant changes to its organizational documents since the prior Form		was filed?	4		X X X X
5	Did the organization become aware during the year of a material diversion of the organization's assets	37		_ 5_	4	X
6	Does the organization have members or stockholders?			6	4	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more mer	mbers				l
	of the governing body?			<u>7a</u>		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other person			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken du	uring				
	the year by the following				۱	
а	The governing body?			_ <u>8a</u>	_+	₩
b	Each committee with authority to act on behalf of the governing body?			<u>8</u> 6		 ,,-
9a	Does the organization have local chapters, branches, or affiliates?			_9a	-	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such ch	napter	s,		1	
	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 organization's governing body before it was filed?	anızat	ions	٠. ا		٠,,
	must describe in Schedule O the process, if any, the organization uses to review the Form 990			10		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	l at			,,
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		.			X
<u>Sec</u>	tion B. Policies				Τ.,	Τ
40-	Done the assessmention have a suritten conflict of schools to be 20 to 100 ft "No. 10 to 100 ft.			42	Yes	No X
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12	*	+^
р		a give		12	_	
_	rise to conflicts?	/oo."		12	'	+
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es,		12	_	
12	describe in Schedule O how this is done Does the organization have a written whistleblower policy?			13	_	X
13	Does the organization have a written document retention and destruction policy?			14		X
14 15	Did the process for determining compensation of the following persons include a review and approval	hv		<u> </u>		1
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and		sion.			1
-	The organization's CEO, Executive Director, or top management official?	<i>a</i> aco.	31011	15		Ιx
a b	Other officers or key employees of the organization?			15		X
D	Describe the process in Schedule O (see instructions)			··*	1	+**-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent				
iva	with a taxable entity during the year?			16	<u>.</u>	X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evalu	ate		···	-	
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safe		4			
	the organization's exempt status with respect to such arrangements?	.	_	16		İ
Sec	tion C. Disclosure				<u>- </u>	
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T ((501 <i>(</i> c)(3)s only)	-		
	available for public inspection. Indicate how you make these available. Check all that apply		,,-,- - ;)			
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, co	onflict	of interest			
	policy, and financial statements available to the public					
20	State the name, physical address, and telephone number of the person who possesses the books and	d reco	rds of the			
_0	organization ► DWAYNE K. SIEKMAN 59 GREIF PAR			E 101		
מ	-		3015	740-2	01-8	3088
						(2008)

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 o	rganization did not compe	nsate	e an	y offi	сег,	direc	tor,	trustee, or key employee		
(A)	(B) Average	Posi	tion (C)	hat a	nlv	(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per week	Individual trustee or director		Officer		Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MARK E SCHWI	EBERT							0		0
DIRECTOR MONTE E BERG	•	├			ļ	 - -		0	0	0
V. CHAIRMAN	Þ Í							0	0	0
MATT BELL			 		-			0		
DIRECTOR				l				0	0	0
PAUL R HERRI	NGSHAW	T		 						
TREASURER								0	0	0
FRED YODER								-		
DIRECTOR	_				L	<u> </u>		0	0	0
DWAYNE K SE	KMAN					İ				
EXEC. DIRECT		1	<u> </u>	<u> </u>	-	_	<u> </u>	0	0	0
JOHN M WALLE	BROWN				ł			0	0	
DIRECTOR LES IMBODEN		\vdash		_		⊢	_	U	<u> </u>	0
DIRECTOR					l			0	0	0
TADD D NICHO	LSON							Ŭ T		
DIR GOV. AFF					ļ	1		0	0	0
STEPHEN B VA	NZANT									
<u>DIRECTOR</u>			_	<u> </u>		ļ		0.	0	0
NATALIE LEHN	ER								_	_
DIR COMMUN		\vdash					<u> </u>	0	0	0
RICHARD D HA	RER								_	_
DIRECTOR	N CE	╀	├		-	-		0	0	0
BRIAN E HARI DIRECTOR	SAGE I	1	ļ	l				0	0	0
PAUL SALYER		+	┢	-	┢╌		-		<u> </u>	<u> </u>
DIRECTOR				l				0	0	0
J MATTHEW MO	COY	f^{-}	 	 		T			<u>~</u>	<u></u>
SECRETARY]		L.	L	Ĺ			0	0	0
DAVIS L ROE	М									
<u>CHAIRMAN</u>		<u> </u>	<u> </u>	<u> </u>	<u>L</u>		<u> </u>	0	0	0
	<u> </u>	1_	<u>L</u> _		<u> </u>					

Pai	rt VII Section A	. Officers, Directors, Trus	stees	s, Ke	y Er	nplo	yees	, an	d Highest Compensated I	Employees (continued)					
	(A) Name and title	(B) Average			checl		hat a		(D) Reportable	(E) Reportable	Esti	F) nated	_		
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	of compe fror organ and	unt of her ensation in the itzation related izations			
												-			
													· 		
	•		_												
			-		-		-					· · · · · · · · · · · · · · · · · · ·			
				ļ	_										
	•														
1b 2		ıvıduals (ıncluding those in	1a)	who	rece	ıved	mor	e th	an \$100,000 in reportable o	compensation from the					
3	organization ▶ 0	a list any former officer du	·oeto	rori	mict			mple	oyee, or highest compensa	ted		Yes	No		
4	employee on line 1a For any individual li	a? If "Yes," complete Sche sted on line 1a, is the sum	dule of re	J for	r suc able	h ind	dıvıdı ipen:	ial satio	on and other compensation is," complete Schedule J fo	from	3		X		
5	individual Did any person liste		crue ·	com	pens	atioi	n fror	n ar	ny unrelated organization fo		5		X		
Sec	ction B. Independent		, co	Пріс	ie o	CHEC	ıdıç .	, 101	Such person						
1	Complete this table compensation from	the organization	ensa	ated	inde	pend	lent (cont	ractors that received more			(C)			
	· · · · · · · · · · · · · · · · · · ·	(A) Name and business address		_					Descrip	(B) blion of services		(C) Compensa	ation		
								\vdash		-					
_															
	Total number of ind	lependent contractors (incl	udin	a the	se ir	1 1) 1	who	ece	ived more than \$100,000 II	<u> </u>					
DAA	compensation from										Fo	0 m 99 ((2008)		

Pa	rt VI	II Statement of Rev	enue						
		•				(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
(0, (0)				······································			revenue		512, 513, or 514
된		Federated campaigns	1a						
B	b	Membership dues	1b						
ıs,	C	Fundraising events	1c						
gif ar	d	Related organizations	1d						
ě,E	е	Government grants (contributions)	1e						
ror		All other contributions, gifts, grants,							
語	•	and similar amounts not included above	1f	1.7	51,650				
ĒŠ					31,030				
an S	_	Noncash contributions included in lines	1a-1f \$			1 751 650			
<u></u>	<u>n</u>	Total. Add lines 1a-1f			<u> </u>	1,751,650			
Program Service Revenue Contributions, gifts, grants anounts					Busn. Code				-
<u> </u>	2a	•							
~	b								
.ઙૄ	C								
, j	d								
Ē	e								
gra	f	All other program service re-	/enue			,			
8		Total. Add lines 2a-2f	Veriue						
$\overline{}$							 		
	3	Investment income (includin	g aiviae	nas, intere	est, and	26 540			26 540
		other similar amounts)				26,549			26,549
	4	Income from investment of t	ax-exen	npt bond p	proceeds -		<u> </u>		
	5	Royalties			>			·····	
		(ı) Rea	<u> </u>	(II) F	Personal			,	
	6a	Gross Rents							
	b	Less rental exps							
		Rental inc or (loss)							
		Net rental income or (loss)			•				
		Gross amount from (i) Securi	ties	(11) Other				
		sales of assets		 	,	ļ			
		other than inventory		+		1			
	D	Less cost or other			ŧ				
		basis & sales exps		 					
		Gain or (loss)							
		Net gain or (loss)			<u> </u>				
	8a	Gross income from fundraising e	vents			į			
ä		(not including \$				l			
/eu		of contributions reported on line	1c)			l			
Ş		See Part IV, line 18	a	ı.					
Other Revenue	ь	Less direct expenses	ь						
된		Net income or (loss) from fu	ndraisir	a events	•	Ī			
Ū		Gross income from gaming activ		1					
	Ja	See Part IV, line 19	a	.]		1			
	_								
		Less direct expenses	t						
		Net income or (loss) from ga	_	ctivities					
	10a	Gross sales of inventory, les	SS						
		returns and allowances	ā	·	[
	b	Less: cost of goods sold	t	·L					
	С	Net income or (loss) from sa	ales of i	nventory	▶				
		Miscellaneous Rever			Busn. Code	1			
	11a								
	b								
	c	•							
	_	All other revenue			 			·	
	1	All other revenue			<u> </u>			-	
		Total. Add lines 11a–11d		4 - 4 -	74.0-				
	12	Total Revenue. Add lines 1	n, 2g, 3	, 4, 5, 6d,	/d, gc,	1 770 100	•		0 00 540
	Ī	9c. 10c. and 11e			▶	1,778,199	0	1	0 26,549

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

		·			
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and	657 000	657.000		
_	organizations in the U.S. See Part IV, line 21	657,200	657,200		
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16			······································	
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified				
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
•	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	12,580		12,580	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion _				
13	Office expenses	112,755	2,447	110,308	
14	Information technology				
15	Royalties			-	
16	Occupancy	20 750	20 750	· · · · · · · · · · · · · · · · · · ·	
17	Travel	30,750	30,750		
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	26 400	26 400		
	Conferences, conventions, and meetings	26,488	26,488		
20 21	Interest Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed	[
	5% of total expenses shown on line 25 below)				
а	MARKETING DEVELOPMENT & P	1,022,885	1,022,885		
b	MANAGEMENT AGREEMENT	296,049		296,049	
С	DUES & SUBSCRIPTIONS	24,384	24,384		
d	PUBLIC RELATIONS	5,555	5,555		
е	MISCELLANEOUS	5,001	5,001		
f	All other expenses	5,248	5,248		
25	Total functional expenses. Add lines 1 through 24f	2,198,895	1,779,958	418,937	
26					
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation				

	411.7	Dalance Sheet	(A) Beginning of year		(B End of					
	1	Cash—non-interest bearing	331,375	1		97,	940			
	Ż	Savings and temporary cash investments	700,000	2			388			
	3	Pledges and grants receivable, net		3						
	4	Accounts receivable, net	287,397	4	3:	27,	323			
	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								
		Part II of Schedule L		6						
ţ	7	Notes and loans receivable, net		7	1.	50,	000			
Assets	8	Inventories for sale or use		8						
As	9	Prepaid expenses and deferred charges	-	9						
	10a	Land, buildings, and equipment cost basis 10a								
	b	Less: accumulated depreciation. Complete								
	İ	Part VI of Schedule D 10b	10c							
	11	Investments—publicly traded securities		11						
	12	Investments—other securities See Part IV, line 11		12						
	13	13								
	14	14								
	15	Other assets See Part IV, line 11		15						
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,318,772	16	9:	28.	651			
	17	Accounts payable and accrued expenses	78,168				744			
	18	Grants payable		18		 ,				
	19	Deferred revenue		19		•				
	20	Tax-exempt bond liabilities		20						
es	21 Escrow account liability. Complete Part IV of Schedule D									
≝	22	Payables to current and former officers, directors, trustees, key		:						
Liabilities		employees, highest compensated employees, and disqualified								
Ë		22								
	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	78,168	26	1 (08.	744			
S		Organizations that follow SFAS 117, check here ▶ X and	· · · · · · · · · · · · · · · · · · ·							
nces	İ	complete lines 27 through 29, and lines 33 and 34.								
<u>a</u>	27	Unrestricted net assets	1,240,604	27	8-	19.	907			
Bala	28	Temporarily restricted net assets		28						
Fund	29	Permanently restricted net assets		29						
Ę		Organizations that do not follow SFAS 117, check here ▶								
<u>-</u>	1	and complete lines 30 through 34.								
	30	Capital stock or trust principal, or current funds	i	30						
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund		31						
Ş	32	Retained earnings, endowment, accumulated income, or other funds		32						
et /	33	Total net assets or fund balances	1,240,604	33	8.	L9,	907			
ž	34	Total liabilities and net assets/fund balances	1,318,772	34			651			
P	art)	Financial Statements and Reporting								
					r	Yes	No			
1		counting method used to prepare the Form 990: Cash X Accrual Oth								
		ere the organization's financial statements compiled or reviewed by an independent account	ant?		2a		X			
		ere the organization's financial statements audited by an independent accountant?			2b		X			
•		Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility					1			
_	the audit, review, or compilation of its financial statements and selection of an independent accountant?									
3		a result of a federal award, was the organization required to undergo an audit or audits as s	set forth in							
		Single Audit Act and OMB Circular A-133?			3a		-			
) If "	Yes," did the organization undergo the required audit or audits?			3b	.				
					Form	990	(2008)			

· SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047

Open to Public

lame	of the organization		Employe	r identification nu	ımber
OI	HIO CORN MARKETING PROGRAM			610319	
Pa	the organizations Maintaining Donor Advised Further the organization answered "Yes" to Form 990, I	nds or Other Similar Funds or A Part IV, line 6.	Account	s. Complete	if
		(a) Donor advised funds	(b)	Funds and other ac	counts
1	Total number at end of year				
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 donor advisors in writing that	the assets held in donor advised			
	funds are the organization's property, subject to the organization's excl	usive legal control?		Yes	☐ No
6	Did the organization inform all grantees, donors, and donor advisors in	-			
	used only for charitable purposes and not for the benefit of the donor or				
	impermissible private benefit?			Yes	☐ No
Pa	rt II Conservation Easements. Complete if the orga	anization answered "Yes" to Fore	m 990, F	Part IV, line 7	•
1	Purpose(s) of conservation easements held by the organization (check				
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically im	portant lar	nd area	
	Protection of natural habitat	Preservation of certified historics	-		
	Preservation of open space				
2	Complete lines 2a–2d if the organization held a qualified conservation of	contribution in the form of a conservation	easement		
_	on the last day of the tax year.				
	·		:	Held at the End	of the Year
а	Total number of conservation easements		2a		
b	-		2b		
	Number of conservation easements on a certified historic structure incl	uded in (a)	2c		
	Number of conservation easements included in (c) acquired after 8/17/	• •	2d		
3	Number of conservation easements modified, transferred, released, ex	• •			
•	the taxable year			•	
4	Number of states where property subject to conservation easement is I	ocated ►			
5	Does the organization have a written policy regarding the periodic moni				
•	enforcement of the conservation easements it holds?	de la company de		Yes	□ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforcing	g easements during the year ▶		_	_
7	Amount of expenses incurred in monitoring, inspecting, and enforcing e				
8	Does each conservation easement reported on line 2(d) above satisfy the				
•	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ı)?			Yes	□No
9	In Part XIV, describe how the organization reports conservation easem	 ents in its revenue and expense stateme. 	nt. and	_	_
	balance sheet, and include, if applicable, the text of the footnote to the				
	the organization's accounting for conservation easements				
Pa	art III Organizations Maintaining Collections of Art,	Historical Treasures, or Other	Similar	Assets.	
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 8.			
1a	If the organization elected, as permitted under SFAS 116, not to report	in its revenue statement and balance sho	eet works	of	
	art, historical treasures, or other similar assets held for public exhibition				
	provide, in Part XIV, the text of the footnote to its financial statements t	hat describes these items.			
ь	If the organization elected, as permitted under SFAS 116, to report in it	s revenue statement and balance sheet	works of a	rt,	
	historical treasures, or other similar assets held for public exhibition, ed				
	provide the following amounts relating to these items	·			
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$	
	(ii) Assets included in Form 990, Part X		>	\$	
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial gain, pro	ovide the		
-	following amounts required to be reported under SFAS 116 relating to t				
а	D : 1 1 1 5 000 Ded VIII line 4		•	\$	
	Assets included in Form 990, Part X		•	š — — — -	
U	About included in Form 330, Farch			- ·	

		MARKETING PE			10319				age 2
	rt III Organizations Maintaining					sets ((contir	ued)	<u> </u>
3	Using the organization's accession and other items (check all that apply)	records, check any of the	following that are a	significant use of its	collection				
а	Public exhibition	d Loan o	or exchange progran	าร					
ь	Scholarly research	e Other							
c	Preservation for future generations				. – – –	_			
	Provide a description of the organization's co	llections and explain how t	they further the orga	nızatıon's exempt pu	ırpose ın				
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	r receive donations of art, l	historical treasures,	or other similar		П	Yes	П	No
	rt IV Trust, Escrow and Custod	iol Arrangemente C	omplete if orga	nization answer	ed "Vec" to				140
ГФ					eu res u	J 1 011	11 330,		
	Part IV, line 9, or reported a								
1a	Is the organization an agent, trustee, custodi	an or other intermediary fo	r contributions or other	ner assets not					
	included on Form 990, Part X?					Ш	Yes	Ш	No
b	If "Yes," explain the arrangement in Part XIV	and complete the following	g table						
							Amour	<u>t</u>	
С	Beginning balance				1c				
	Additions during the year				1d				
	Distributions during the year				1e				
	Ending balance				1f				_
20	Did the organization include an amount on Fe	orm 000 Part V line 212			<u> </u>		V	П	No
	_					Ш	Yes		МО
	If "Yes," explain the arrangement in Part XIV. To the True of the Arrangement of the Arr		nawarad "Vaa" i	to Form 000 Da	rt IV/ line	10			
Pa	rt V Endowment Funds. Comp					_	(0) 50		
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three yea	rs back	(e) Fou	r years	Dack
1a	Beginning of year balance								
b	Contributions								
C	Investment earnings or losses							·····	
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs			Ī		1			
f	Administrative expenses								
	End of year balance		······································						
				<u>L.,</u>	l		1		
2	Provide the estimated percentage of the yea								
	Board designated or quasi-endowment	%							
	Permanent endowment ▶ %								
C	Term endowment ▶ %								
3a	Are there endowment funds not in the posse	ssion of the organization th	nat are held and adn	ninistered for the					
	organization by							Yes	No
	(i) unrelated organizations						3a(i)	ļ	Ļ
	(ii) related organizations		•				3a(ii)		<u> </u>
b	If "Yes" to 3a(ii), are the related organizations	s listed as required on Sch	edule R?	·	-		3ь		
4	Describe in Part XIV the intended uses of the								
Pa	rt VI Investments—Land, Build			0. Part X. line 1	0.				
	Description of investment	(a) Cost or other basis	(b) Cost or ot		preciation		(d) Bool	k value	
	Decemped to missiane.	(investment)	basis (other	1 ' '	•	1	• •		
<u> </u>	Lond	<u> </u>	 	·		+			
	Land		 		<u></u>	+			
	Buildings	 	 			+-			
C	Leasehold improvements	ļ				+-			
d	Equipment	ļ <u>.</u>				+-	_		
	Other	<u> </u>							
Total	l. Add lines 1a-1e (Column (d) should equal I	Form 990, Part X, column	(B), line 10(c))			<u> </u>			
					_				

Schedule D (Form 990) 2008 OHIO CORN MARKETI		34-1610319	Page
Part VII Investments—Other Securities. See Fo			
(a) Description of security or category	(b) Book value	(c) Method of valuation	
(including name of security)		Cost or end-of-year market	value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
 			*
			·

Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	D 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Part VIII Investments—Program Related. See Fo			
(a) Description of investment type	(b) Book value	(c) Method of valuation	
		Cost or end-of-year market	value
<u></u>			
		· · · · · · · · · · · · · · · · · · ·	
			·····
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	>		
Part IX Other Assets. See Form 990, Part X, lin	e 15.		h) Cast value
Fotal. (Column (b) should equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. See Form 990, Part X, lin (a) Descri	e 15.	(1	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	1)	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1)	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1	b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(1)	b) Book value
(a) Descri	e 15.		b) Book value
Part IX Other Assets. See Form 990, Part X, Iin (a) Description Total. (Column (b) should equal Form 990, Part X, col (B) line 15)	ie 15. iption	(I)	b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Description Total. (Column (b) should equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X	ne 15. Inption , line 25.		b) Book value
Part IX Other Assets. See Form 990, Part X, Iin (a) Description (b) should equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X (a) Description of liability	ie 15. iption		b) Book value
Part IX Other Assets. See Form 990, Part X, Iin (a) Description (b) should equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X (a) Description of liability	ne 15. Inption , line 25.		b) Book value
Part IX Other Assets. See Form 990, Part X, Iin (a) Description (b) should equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. See Form 990, Part X (a) Description of liability	ne 15. Inption , line 25.		b) Book value
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	dule D (Form 990) 2008 OHIO CORN MARKETING PROGRAM		34-161031	9	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Fina	ncial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1,778,199
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	2,198,895
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	-420,696
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
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	-420,696
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts V	Vith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	1,778,199
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c]	
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	1,778,199
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
С	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	1,778,199
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents	With Expenses per l	Retur	
1	Total expenses and losses per audited financial statements			1	2,198,895
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a]	
b	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c]	
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	2,198,895
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
C	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	2,198,895
Pŧ	rt XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin	nes 1a	and 4, Part IV, lines 1b		· -
and :	2b; Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d	and 4l)		
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Schedule D (F	orm 990) 2008	OHIO	CORN	MARK	ETIN	G PR	OGRA	M			34	-16	<u> 1031</u>	9	 		Pa	age 5
Part XIV	orm 990) 2008 Suppleme	ntal Infor	mation	(continue	3)										 			
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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Part !

OHIO CORN MARKETING PROGRAM

General Information on Grants and Assistance

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

► Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.

▶ Attach to Form 990.

Employer identification number 34-1610319

Open to Public Inspection 2008

OMB No 1545-0047

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.	ie amount of the grice? Ice? Inforing the use of (rants or ass	istance, the grantees' in the United States.	eligibility for the grants	s or assistance, and	77	∑ kes ∑	%
75	vernments an cipient that re-	d Organi ceived m pace is r	zations in the Un ore than \$5,000. leeded	ited States. Com Check this box if	plete if the org no one recipie	anization answ nt received mo	vered "Yes" on ure than \$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 (b) Method of valuation (book, FMV, appraisal, assistance other)	(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	
US GRAINS COUNCIL 1400 K STREET NW SUITE 1200								
WASHINGTON DC 20005			270,000					
632 CEPI DRIVE CHESTERFIELD MO 63005			310,000					
RT FEDERATION								
		-	50,000					
THE OHIO STATE UNIVERSITY								
			20,000					
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations	organizations							

Schedule I (Form 990) 2008

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. DAA

Page 2

34-161031

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

Schedule I (Form 990) 2008 OHIO CORN MARKETING PROGRAM

Part III

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of (c) Amount of cash grant Use Schedule I-1 (Form 990) if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part IV Schedule I (Form 990) 2008

34-1610319	Federal Stateme	nts		
	Taxable Interest on Invest Amount \$ 26,549 \$ 26,549	ments Unrelated Business Code	Exclusion Code	Postal Code
				·
	Tax-Exempt Interest on Inve	<u>stments</u>		
Description	s	Unrelated Business Code	Exclusion Code	Postal Code
TOTAL	\$0			
				:

	`	<u>.</u>		 	
•		Raising \$			
	:	Management & General			
ements	- All Other Expenses	Program Service \$ 3,940 1,308 \$ 5,248			
Federal Statements	Form 990, Part IX, Line 24f - All Other Expenses	Fotal Expenses \$ 3,940 1,308 \$ 5,248			
	For	ption			
		Description			
34-1610319		POSTAGE PRINTING TOTAL			

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