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Form **990**

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)

2008

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

Open to Public Inspection

Α	For the	2008 calendar year, or tax year beginning OCT 1, 2008 and ending	SEP 30, 2009	
В	Check if applicable	Please use IRS	D Employer identific	cation number
Г	Address change			
	Name hange	type Doing Business As	37-1	135507
	Initial	See Number and street (or P.O. box if mail is not delivered to street address) Room/st		
	Termin- ation	Specific P.O. BOX 487	(309)827-0912
	Amende	City or town, state or country, and ZIP + 4	G Gross receipts \$	7,615,947.
	Applica tion	DLOOMINGION, IL 01/02-046/	H(a) Is this a group re	eturn
	pending	F Name and address of principal officer RODNEY WEINZIERL	for affiliates?	Yes X No
	-	P.O. BOX 487, BLOOMINGTON, IL 617020487	H(b) Are all affiliates inc	luded? Yes No
		mpt status X 501(c) (5) ◀ (insert no) 4947(a)(1) or 527	If "No," attach a	list (see instructions)
		E ILCORN.ORG	H(c) Group exemptio	
		rganization: Corporation Trust AssociationX_ Other ▶ ORGAN L Y Summary	ear of formation: 1979 N	1 State of legal domicile: IL
		riefly describe the organization's mission or most significant activities. TO PROVI	DE RESEARCH	MARKET
Activities & Governance		DEVELOPMENT AND EFFICIENT MARKETS FOR ILLINO		
rua		Check this box if the organization discontinued its operations or disposed of m		
o ve	1	lumber of voting members of the governing body (Part VI, line 1a)	3	15
Ğ	1	lumber of independent voting members of the governing body (Part VI, line 1b)	4	0
es &	5 T	otal number of employees (Part V, line 2a)	5	0
<u>vi</u>	6 T	otal number of volunteers (estimate if necessary)	6	0
ć	7a T	otal gross unrelated business revenue from Part VIII, line 12, column (C)	7a	0.
	b N	let unrelated business taxable income from Form 990-T, line 34	7b	0.
			Prior Year	Current Year
e e	8 0	Contributions and grants (Part VIII, line 1h)		
Revenue	9 F	rogram service revenue (Part VIII, line 2g)	6,991,346.	7,590,920.
Re C	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	105,156.	18,334.
•	11 0	other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	21,003.	6,693.
inses	12 T	otal revenue - add lines 8 through 11 (must equal Part ////), column (A), line 12)	7,117,505.	7,615,947.
		Grants and similar amounts paid (Partix Column (A) Links 1.3)		3,230,128.
:	1	lenefits paid to or for members (Part IX, column (A), line 4)		470 160
Expenses	15 5	islaries, other compensation, and over Ahanefits Part XColumn (A), lines 5-10)		479,160.
, E	16a F	rofessional fundraising fees (Part IX column (A), line 11e)		
Ä	170	otal fundraising expenses (Part IX column (D), line 26)	833,506.	3,732,363.
			833,506.	7,441,651.
	1	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25) levenue less expenses Subtract line 18 from line 12	6,283,999.	174,296.
JC A	3	levertue less expenses Subtract line to nom line 12	Beginning of Year	End of Year
t Assets or	20 T	otal assets (Part X, line 16)	4,025,818.	3,912,665.
ASS	21 T	otal labilities (Part X, line 26)	1,078,219.	790,770.
Ret	22 1	let assets or fund balances Subtract line 21 from line 20	2,947,599.	3,121,895.
	art II	Signature Block	2/22//0000	0/202/0300
		Under penalties of perjury. I declare that I have examined this return, uncluding accompanying schedules and statemer and complete Declaration of which preparer (other than officer) to based on all information of which preparer has any knowled	its, and to the best of my knowledge	ge and belief, it is true, correct,
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ا سر ا	
Sıg	n	(rather)	3/	14/0
Her	re	Signature of officer	Date /	/
		RODNEY WEINZIERL EXEC DIRECTOR		
		Type or print name and title	Chook if Direct	1
Paid		Preparer's Date	self- (see ins	r's identifying number itructions)
Pre	narar'e -		employed >	·
Use	Only	yours of DUNDAR, BREITWEISER & COMPANY, LLP	EIN ►	
	1.	address and	Dhana 2	00027 0240
N.4.		Diodizing only in orion	Prione no. ► 3	09-827-0348
Ma	y the IH	S discuss this return with the preparer shown above? (see instructions)		X Yes No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

(Must equal Part IX, Line 25, column (B))

Form **990** (2008)

4e

Total program service expenses > \$

1

Form 990 (2008) ILLINOIS CORN MARKETING BOARD
Part 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_		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2_		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		<u> </u>
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> </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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
	If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	_X_	
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	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		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, business,			
	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		X
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		X
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		<u>X</u>
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		<u>X</u> _
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		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c_		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) 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		
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 disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial		ļ	
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	202	<u> X</u>
		Form	990 (2008)

Form 990 (2008) ILLINOIS CORN MARKETING BOARD

Part IV Checklist of Required Schedules (continued)

<u> </u>			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee		165	140
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an		Ì	
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			İ
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		х
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
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		х
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 VI	37		Х

Form **990** (2008)

			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			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		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 return0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	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)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		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
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	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?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?	7a		X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			ĺ
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			ĺ
	benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		X
8	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?	8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			l
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
0	Section 501(c)(7) organizations. Enter N/A			
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ĺ
1	Section 501(c)(12) organizations. Enter. N/A			
	Gross income from members or shareholders			ĺ
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	amounts due or received from them)			ĺ
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A 12b			<u> </u>

Form 990 (2008) ILLINOIS CORN MARKETING BOARD 37-1135507 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.			
1a	Enter the number of voting members of the governing body 1a 1	5		
b	Enter the number of voting members that are independent	<u> </u>		
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>	X
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		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	ļ	Х
6	Does the organization have members or stockholders?	6	ļ	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the		ŀ	
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<u> </u>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	1		•
	by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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 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 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 reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	<u>X</u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		ļ	
	to conflicts?	12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	ļ	
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	<u> </u>	<u> </u>
b	Other officers or key employees of the organization?	15b		<u>X</u> _
	Describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e 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, conflict of interest policy,	ind fina	encial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person of	ition:		
	RODNEY M. WEINZIERL - (309) 827-0912		_	
	P.O. BOX 487, BLOOMINGTON, IL 61702-0487			

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee

- 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.

(A) Name and Title	(B) Average		ı	-	C) sition			(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	director		all 1	that	Highest compensated employee		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
KENT KLEINSCHMIDT DIRECTOR								0.	0.	0.
JAMES ROBBINS SECRETARY								0.	0.	0.
JIM RAPP CHAIRMAN								0.	0.	0.
SCOTT STIRLING TREASURER								0.	0.	0.
DONNA JESCHKE DIRECTOR								0.	0.	0.
TIMOTHY SEIFERT DIRECTOR								0.	0.	0.
BILL CHRIST DIRECTOR								0.	0.	0.
LARRY HASHEIDER DIRECTOR								0.	0.	0.
RON GRAY PAST CHAIRMAN								0.	0.	0.
LOU LAMOREUX DIRECTOR								0.	0.	0.
WENDELL SHAUMAN DIRECTOR								0.	0.	0.
JOHN SHORE DIRECTOR								0.	0.	0.
HUGH DAVID SCATES DIRECTOR								0.	0.	0.
LEON CORZINE DIRECTOR								0.	0.	0.
GARY SCHMALSHOF DIRECTOR								0.	0.	0.
RODNEY M. WEINZIERL EXEC DIRECTOR	40.00							65,713.	0.	0.
EADC DIRECTOR								05,713.	<u> </u>	<u> </u>

U

Section A. Officers, Directors, T	<u>rustees, Key E</u>	<u>mple</u>	oyee	es, a	ınd l	<u>High</u>	<u>iest</u>	Compensated Employ	<u>(ees (continued)</u>	<u>-</u>			
(A)	(B)			(6	C)			(D)	(E)			(F)	
Name and title	Average	Position						Reportable	Reportable	э	E	stimate	ed
	hours		hecl	k all	all that apply)		yly)	compensation	compensation		ar	mount	
	per	į						from	from relate			other	
	week	l e				8	Ì	the	organization		1	npensa	
	ŀ	ig ig	ustee	1		asat		organization (W-2/1099-MISC)	(W-2/1099-MI	SU)	I	rom the ganizat	
		Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		(** 27 1000 141100)				d relat	
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1b Total								65,713.		0.			0.
2 Total number of individuals (including the	se in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,0	000 in reportable					
compensation from the organization													(
												Yes	No
3 Did the organization list any former office	r, director or tru	stee	, ke	y em	plo	yee,	or h	nghest compensated er	nployee on				
line 1a? If "Yes," complete Schedule J for	such individual										3		Х
4 For any individual listed on line 1a, is the			omp	ensa	ation	n and	d oth	ner compensation from	the organization				
and related organizations greater than \$1								•	J		4		X
5 Did any person listed on line 1a receive or									ices rendered to	.			
the organization? If "Yes," complete Sche											5	1	X
Section B. Independent Contractors	<u> </u>	<i>p</i> 0.0											
Complete this table for your five highest or	omnensated in	dene	ende	nt c	ontr	racto	ors t	hat received more than	\$100 000 of con	nnens	ation f	from	
the organization NONE	omponoatod in	оорс	J.,		· · · · ·	40.0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	nat received more than	Ψ100,000 01 con	препо	atioi i	.0	
(A)							П	(B)			(C	``	
Name and busines	s address							Description of s	ervices	С		رر nsatıor	n
							\dashv						
	- <u>-</u>		-				\dashv						
							\dashv						
	 						\dashv	 					
									ļ				
							-						
									l				
2 Total number of independent contractors	(including those	e in 1	1) wł	no re	cei	ved ı	more	e than \$100,000 in com	pensation				
from the organization	0												

Form **990** (2008)

Form 990 (2008) ILLINOIS CORN MARKETING BOARD Part IX Statement of Functional Expenses

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

	An other organizations must comp	nete column (A) but are			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	3,230,128.			
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				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	501,071.			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits	-21,911.			
10	Payroll taxes				
11	Fees for services (non-employees).				
а	Management				
b	Legal				
С	Accounting	7,000.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				- · · · · · · · · · · · · · · · · · · ·
g	Other	4,550.			
12	Advertising and promotion				
13	Office expenses	76,916.			
14	Information technology			-	
15	Royalties				
16	Occupancy	F4 064			
17	Travel	51,064.			· · · · · · · · · · · · · · · · · · ·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	06 502			
19	Conferences, conventions, and meetings	86,523.			
20	Interest				
21	Payments to affiliates	10 150			
22	Depreciation, depletion, and amortization	19,152.			
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.) COMMUNICATIONS PLAN FUN	1,472,809.	-		
a	EXPORT PROGRAMS FUNDING	1,046,318.	<u></u>		
b	INDUSTRIAL PROGRAMS FUN	873,562.			
c	EXECUTIVE PROGRAM FUNDI	72,965.			
d	INSURANCE AND BONDING	10,295.			
e f	All other expenses	11,209.			<u> </u>
	Total functional expenses Add lines 1 through 24f	7,441,651.			
25 26	Joint Costs Check here July if following	1,444,001.	-		
20	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				

			(A) Beginning of year		(B End of) vear	
	1	Cash - non-interest-bearing	5.	1	<u>,,,</u>	<u> </u>	5
	2	Savings and temporary cash investments	3,616,195.	2	3,42	7,8	
	3	Pledges and grants receivable, net		3		-	
	4	Accounts receivable, net	33,626.	4	15	8,9	13
	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			
Assets	8	Inventories for sale or use		8			
Ä	9	Prepaid expenses and deferred charges	244,331.	9	22	8,0	26
	10a	Land, buildings, and equipment cost basis 10a 313, 0	53.				
	ь	Less. accumulated depreciation Complete					
		Part VI of Schedule D 10b 219, 7	87. 97,717 .	10c	9	3,2	<u> 166</u>
	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	_		
	14	Intangible assets .		14			
	15	Other assets See Part IV, line 11	33,944.	15		4,6	43
	16	Total assets. Add lines 1 through 15 (must equal line 34)	4,025,818.	16	3,91	2,6	65
	17	Accounts payable and accrued expenses	349,588.	17	22	8,3	37
	18	Grants payable	455,105.	18	27	7,9	06
	19	Deferred revenue	100,000.	19	11	2,9	111
	20	Tax-exempt bond liabilities		20			
S	21	Escrow account liability Complete Part IV of Schedule D		21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees	,				
iab		highest compensated employees, and disqualified persons. Complete Part	п				
1		of Schedule L		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	173,526.	25		1,6	
	26	Total liabilities. Add lines 17 through 25	1,078,219.	26	<u>79</u>	0,7	<u>70</u>
		Organizations that follow SFAS 117, check here X and complete	te				
ŝ		lines 27 through 29, and lines 33 and 34.					
anc	27	Unrestricted net assets	2,947,599.	27	3,12	<u>1,8</u>	<u>95</u>
Bal	28	Temporanly restricted net assets		28			
Fund Balan	29	Permanently restricted net assets		29			
Ŀ		Organizations that do not follow SFAS 117, check here and					
Net Assets or		complete lines 30 through 34.					
šets	30	Capital stock or trust principal, or current funds		30			
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31			
et	32	Retained earnings, endowment, accumulated income, or other funds		32			
2	33	Total net assets or fund balances	2,947,599.	33	3,12		
<u> </u>	34	Total liabilities and net assets/fund balances	4,025,818.	34	3,91	2,6	65
Pa	rt XI	Financial Statements and Reporting				Vaa	l Na
						Yes	No
1		unting method used to prepare the Form 990 Cash X Accrual	Other				
		the organization's financial statements compiled or reviewed by an indepen			2a		X
		the organization's financial statements audited by an independent account			2b	<u>X</u>	
C		es" to lines 2a or 2b, does the organization have a committee that assumes r		audit,			İ
		w, or compilation of its financial statements and selection of an independent			2c	_ X	├
3a		result of a federal award, was the organization required to undergo an audit	or audits as set forth in the Sing	jle Audit			
		and OMB Circular A-133?			3a		X
b	If "Ye	es," did the organization undergo the required audit or audits?			3b		I

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

2008
Open to Public Inspection

Name of the organization

Employer identification number

Pa	rt I Organizations Maintaining Donor Advise		s or Accounts Complete fithe
T a			S of Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
	· · · · · ·	(a) perior de rieses incres	(b) I dilds and other accounts
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 v		
	are the organization's property, subject to the organization's		. L Yes L No
6	Did the organization inform all grantees, donors, and donor a	• • •	· — —
D-	for charitable purposes and not for the benefit of the donor o		
Pa			Part IV, line 7
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p	leasure) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conse	ervation contribution in the form of a cor	servation easement on the last day
	of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06	2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per	odic monitoring, inspection, violations, a	
	enforcement of the conservation easements it holds?		└── Yes └── No
6	Staff or volunteer hours devoted to monitoring, inspecting, ar		
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing easements during the year $ ightharpoonup$	<u> </u>
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		└── Yes └── No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
	conservation easements		
Pa	t III Organizations Maintaining Collections of	•	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 b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pu	iblic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if	ems	
b	If the organization elected, as permitted under SFAS 116, to i	report in its revenue statement and balar	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, or	research in furtherance of public servic	e, 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 trea	sures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 11	6 relating to these items	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply): a Public exhibition b Scholarly research c Preservation for future generations)
that apply): a Public exhibition b Scholarly research c Preservation for future generations d Loan or exchange programs e Other C Other	
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations	
b Scholarly research e Other c Preservation for future generations	
c Preservation for future generations] No
···] <u>No</u>
4. Do. 1. 1. 1. 1. Mark and the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the cont] <u>No</u>
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV] No
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets	No
to be sold to raise funds rather than to be maintained as part of the organization's collection?	
Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or	
reported an amount on Form 990, Part X, line 21.	
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included	_
on Form 990, Part X?	No
b If "Yes," explain the arrangement in Part XIV and complete the following table	
Amount	
c Beginning balance	
d Additions during the year	
e Distributions during the year	
f Ending balance	
2a Did the organization include an amount on Form 990, Part X, line 21?	No
b If "Yes," explain the arrangement in Part XIV	
Part V Endowment Funds. Complete if organization answered "Yes" to Form 990, Part IV, line 10	
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years	back
1a Beginning of year balance	
b Contributions .	
c Investment earnings or losses	
d Grants or scholarships	
e Other expenditures for facilities	
and programs	
f Administrative expenses	
g End of year balance	
2 Provide the estimated percentage of the year end balance held as	
a Board designated or quasi-endowment %	
b Permanent endowment > %	
c Term endowment > %	
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization	
	No
(i) unrelated organizations 3a(i)	
(ii) related organizations 3a(iii)	
b If "Yes" to 3a(ıı), are the related organizations listed as required on Schedule R?	
4 Describe in Part XIV the intended uses of the organization's endowment funds.	
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10	
Description of investment (a) Cost or other (b) Cost or other (c) Depreciation (d) Book value	
basis (investment) basis (other)	
1a Land	
b Buildings	
c Leasehold improvements	
d Equipment 313,053. 219,787. 93,2	66.
e Other	
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c))	66.

Schedule D (Form 990) 2008

(a) Description of security or category (including name of security)	(b) Book value	Cos	(c) Method of valu t or end-of-year ma	
Financial derivatives and other financial products				
Closely-held equity interests .				
Other				
				**
			······	
	-		,	
Total. (Col (b) should equal Form 990, Part X, col (B) line 12.)	>			
Part VIII Investments - Program Related.		e 13.		
			(c) Method of valu	ation.
(a) Description of investment type	(b) Book value	Cos	t or end-of-year ma	rket value
			<u> </u>	
	- 		 	
	-			·····
	-			
				
Table (Cal (b) about a good Form 000, Part V and (P) line 12)	_			
Total. (Col (b) should equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, lin				
Part IX Other Assets. See Form 990, Part X, III	a) Description			(b) Book value
	a) Description			(5) 2 5 5 11 11 11 11
	·			
				
				
Total. (Column (b) should equal Form 990, Part X, col (B)		·		
Part X Other Liabilities. See Form 990, Part	X, line 25.	(1) A		
(a) Description of liability		(b) Amount		
Federal income taxes		,,		
ACCRUED POSTRETIREMENT BENEF	'ITS	111,616.		
RESEARCH GRANTS PAYABLE		60,000.		
		_		
Total. (Column (b) should equal Form 990, Part X, col (B,) line 25)	171,616.		
In Part XIV, provide the text of the footnote to the organi			enization's liability f	or uncertain tax positions

ILLINOIS CORN MARKETING BOARD

Schedule D (Form 990) 2008

37-1135507 Page 3

	dule D (Form 990) 2008 ILLINOIS CORN MARKETING BOAT XI Reconciliation of Change in Net Assets from Form 990 to		ements	37-1	135507	Page 4
		i manciai otat			7 (15	0.47
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		7,615	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		7,441	
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		174	<u> 296.</u>
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			0.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		10		174	296.
Par	t XII Reconciliation of Revenue per Audited Financial Stateme	nts With Reve	nue per F	<u>Return</u>		
1	Total revenue, gains, and other support per audited financial statements			1	<u>7</u> ,615,	947.
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		1		
c	Recoveries of prior year grants	2c		1		
d	Other (Describe in Part XIV)	2d		1		
e	Add lines 2a through 2d	20		2e		0.
	-				7,615,	
3	Subtract line 2e from line 1			3	7,015,	741.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	1.1		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		0.
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	7,615,	947.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	enses per	Retur		
1	Total expenses and losses per audited financial statements			1	7,441,	<u>651.</u>
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	·	1 [
е	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	7,441,	651.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				.,,	
· a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV)	4b		1		
	,	40		1		0
-	Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			4c	7,441,	651
5 Par	t XIV Supplemental Information			5	/,441,	021.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III	, lines 1a and 4, Pa	art IV, lines 1	b and 2	b, Part V, line	4, Part
X, Pa	rt XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b					
				_		
		-	_			
		· · · · -				

SCHEDULE I								OMB No 1545-0047	
(Form 990)			Grants and Governn	Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.	to Organizations to Us.			2008	
Department of the Treasury Internal Revenue Service		► Comple	Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22.Attach to Form 990.	n answered "Yes," on F ► Attach to Form 990.	" on Form 990, Pa n 990.	ırt IV, lines 21 or 22.		Open to Public Inspection	•
Name of the organization	SIONITII	CORN MARKETING	ETING BOARD					Employer identification number 37-1135507] ĕ [
Part I General Info	General Information on Grants and Assistance	Assistance							
1 Does the organiza	Does the organization maintain records to substantiate the amount of	substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	1	
criteria used to aw	criteria used to award the grants or assistance?	nce?						Yes X No	Ŷ
2 Describe in Part IV	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	dures for monit	oring the use of grant	funds in the United	States				
Part II Grants and	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any	vernments and	Organizations in the	United States. C	omplete if the orga	ınızatıon answered "\	es" on Form 990, Part	IV, line 21, for any	1
recipient the	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule 1-1 (Form 990) if additional space is needed	000 Check this	box if no one recipien	t received more th	an \$5,000. Use Pa	rt IV and Schedule I-	(Form 990) if additions	I space is needed	\Box
1 (a) Name and add or gove	(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	
UNIVERSITY OF ILLINOIS 1901 SOUTH FIRST STREET,	NOIS TREET, SUITE A, M								
CHAMPAIGN IL 618207406				19,718.	0				
UNIVERSITY OF ILLINOIS 1901 SOUTH FIRST STREET, CHAMPAIGN, IL 618207406	NOIS TREET, SUITE A, H			40,000,	0				
ILLINOIS CORN GROWERS ASSOCIATION P.O. BOX 1623	FERS ASSOCIATION								
BLOOMINGTON, IL 617021623	7021623			960,000	0				
US GRAINS COUNCIL 1400 K ST NW, SUITE 1200 WASHINGTON, DC 20005	E 1200			700,000.	0				
US MEAT EXPORT FEDERATION 1050 17TH STREET, SUITE 2 DENVER, CO 80265	BERATION SUITE 2200			175,000.	0				
USA POULTRY & EGG EXPORT COUNCIL 2300 W PARK PLACE BLVD, SUITE 10	EXPORT COUNCIL BLVD, SUITE 100								
STONE MOUNTAIN GA	GA 30087			95,000	0				
	Enter total number of section 501(c)(3) and government organizations	government org	janizations					15	7
_	Enter total number of other organizations							A	
LHA For Privacy Act	For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	on Act Notice,	see the Instructions	for Form 990.				Schedule I (Form 990) 2008	88

37-1135507 ILLINOIS CORN MARKETING BOARD Schedule I (Form 990) 2008

| Part III | Grants and Othe

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Use Schedule I-1 (Form 990) if additional space is needed

(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	(f) Description of non-cash assistance
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	de the information	required in Part I,	line 2, and any other	additional information	
832102 12-18-08					Schedule I (Form 990) 2008

Department of the Treasury Internal Revenue Service SCHEDULE I-1 (Form 990)

Vame of the organization

▲ Attach to Form 990 to list additional information for Part II and Part III, Schedule I (Form 990). Continuation Sheet for Schedule I (Form 990)

Open to Public

OMB No 1545-0047 2008 Inspection

Employer identification number

ILLINOIS CORN MARKETING BOARD

(h) Purpose of grant or assistance 37-1135507 (g) Description of non-cash assistance valuation (book, FMV, appraisal, other) (f) Method of Part I | Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.) (e) Amount of assistance non-cash (d) Amount of cash grant 30,000, 25,000 23,000 40,000 30,000 120 000 (c) IRC Code section if applicable (b) EIN 1901 SOUTH FIRST STREET, SUITE A, DEPT AG & CONSUMER ECONOMICS (a) Name and address of organization or government OFFICE OF RESEARCH SERVICES EDWARDSVILLE, IL 62026-1046 EDWARDSVILLE, IL 62026-1046 775 RIDGE LAKE, SUITE 400 RENDLEMAN HALL, BOX 1046 RENDLEMAN HALL, BOX 1046 MEMPHIS TN 38120-9403 URBANA IL 61801-3605 UNIVERSITY OF ILLINOIS CHICAGO, IL 60612-7227 1301 W. GREGORY DRIVE 1737 WEST POLK STREET CHAMPAIGN, IL 61820 INFORMA ECONOMICS SIU-EDWARDSVILLE SIU-EDWARDSVILLE

Enter total number of Section 501(c)(3) and government organizations

Enter total number of other organizations

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury

➤ 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.

2008
Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** ILLINOIS CORN MARKETING BOARD 37-1135507 FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE: ORGANIZATION CREATED THROUGH STATE STATUTE FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PRODUCTS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: EXECUTIVE PROGRAMS - PROVIDE SPONSORSHIP OF AGRICULTURE RELATED ORGANIZATIONS. ALSO PARTICIPATE IN EDUCATIONAL & PROMOTIONAL ACTIVITIES WITHIN THE AGRICULTURAL COMMUNITY. FORM 990, PART VI, SECTION A, LINE 10: THE FORM 990 WAS REVIEWED BY THE AUDIT COMMITTEE OF THE ILLINOIS CORN MARKETING BOARD AND SUBSEQUENTLY REPORTED ON TO THE FULL BOARD OF DIRECTORS PRIOR TO FILING. FORM 990, PART VI, SECTION C, LINE 19: ALL MARKETING BOARD GOVERNING DOCUMENTS. POLICIES AND FINANCIAL STATEMENTS ARE AVAILABLE FOR REVIEW UPON REOUEST AT THE MARKETING BOARD'S OFFICE.

Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							
Part I Automatic 3-Month Extension of Time. Only submit onginal (no copies needed).							
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time							
to file income tax returns.	al exterision of this						
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extens noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or c you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic www.irs.gov/efile and click on e-file for Charities & Nonprofits.	nically if (1) you want the additional onsolidated Form 990-T. Instead,						
Type or Name of Exempt Organization print	Employer identification number						
ILLINOIS CORN MARKETING BOARD	37-1135507						
Number, street, and room or suite no. If a P.O. box, see instructions. P.O. BOX 487							
return See Instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. BLOOMINGTON, IL 61702-0487							
Check type of return to be filed(file a separate application for each return):							
X Form 990							
RODNEY M. WEINZIERL • The books are in the care of ▶ P.O. BOX 487, BLOOMINGTON, IL - 61702-0487 Telephone No. ▶ (309) 827-0912 FAX No. ▶ • If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ▶							
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until							
2 If this tax year is for less than 12 months, check reason: Initial return	Change in accounting period						
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$						
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated							
tax payments made, include any prior year overpayment allowed as a credit.	3b \$						
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).							
See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453 EO and Form	3c S N/A						